



Foster Care Program Manual



CEDARS Youth Services Foster Care Program Manual

INTRODUCTION TO CEDARS FOSTER CARE.....	5
Client Rights	5
FOSTER PARENT ROLE AND EXPECTATIONS	16
Licensed Foster Homes	6
Becoming a Licensed Foster Parent.....	7
Training Requirements and Continuing Education	10
Licensing Updates and Renewals	11
Approved Homes.....	13
Training for Approved Homes	13
Foster Parent Rights and Responsibilities	14
Foster Parent Code of Ethics	14
Confidentiality	15
Boundaries	15
Changes in the Foster Home	17
OTHER ROLES IN THE FOSTER CARE SYSTEM.....	18
CEDARS Role with Foster Families and Children	18
Foster Care Specialists	18
Working with Child Welfare and Juvenile Justice Systems	19
Department of Health and Human Services (DHHS).....	19
Juvenile Probation	20
Other Service Providers	20
BIOLOGICAL FAMILY INVOLVEMENT.....	20
Contact between Foster and Biological Parents	21
Contact between Foster Children and Their Families.....	21
FOSTER CARE ADMISSION AND PLACEMENT PROCESS	23
Matching and Placement Practices	23
Placing Children Removed from Their Home Unexpectedly	25
Foster Care Levels.....	26
Multi-Ethnic Placement Act (MEPA)	26
Indian Child Welfare Act (ICWA)	26
PERMANENCY FOR FOSTER YOUTH	27
Types of Permanency	27

SERVICES FOR FOSTER YOUTH	28
Foster Child and Youth Assessments	28
Initial Screening and Assessment	28
Comprehensive Assessment	29
Ongoing Assessment	30
Service Plan and Discharge Plan	30
Discharge Planning and Case Closing.....	32
Caring for Foster Children	32
Nurturing Home Environment.....	32
Transportation	33
Basic and Daily Needs	33
Cultural, Spiritual, and Religious Involvement	34
School	34
Day Care and Early Childhood Development	35
Social and Recreational Activities.....	35
Independent Living	36
Transition Planning and Supporting Youth “Aging Out”	37
Physical and Mental Healthcare	38
Medications	39
Behavior Support and Discipline Policy.....	41
KEEPING CHILDREN SAFE	43
Foster Home Safety	43
Room Searches.....	44
Drugs and Alcohol.....	45
Transportation Safety	45
Crises and Emergencies	46
Runaways	46
Suicide	46
Weather-Related Emergenices and Natural Disasters.....	47
Child Abuse	47
Reporting Abuse	48
Investigations of Foster Homes	49
FOSTER PARENT SUPPORT	50
27/7 Support	50
When to Call Foster Care Staff	50

Clinical Support	52
Engagement Activities and Resources	52
RESPITE CARE SERVICES	53
Utilizing Respite.....	54
Responsibilities of Respite Care Providers	55
Respite Home Safety	55
Calculation and Compensation of Respite	55
REQUEST FOR REMOVAL OF CHILD	56
Preventing Placement Changes.....	56
Managing Placement Changes	57
FOSTER PARENT COMPENSATION.....	57
Taxes.....	58
Insurance and Liability	58
CONCERNS AND TERMINATION	58
Foster Youth and Biological Family Concerns	59
Foster Parent Concerns	59
Agency Concerns and Corrective Action	60
Termination of Foster Parent Contract.....	61
Foster Parent Resignation	61
ADOPTION SERVICES	62
Pre-Adoption Services	62
Assistance Provided During Placement.....	62
Preparing the Child for Adoption	63
Preparing the Adoptive Parents for Adoption.....	64
Adoption Home Study	65
Openness in Adoption	66
Post-Adoption Services	66
Case Closure	66
Aftercare	67

INTRODUCTION TO CEDARS FOSTER CARE

CEDARS mission is to help children and youth achieve safety, stability, and enduring family relationships. CEDARS believes in a comprehensive and holistic approach to meeting the needs of those we serve, and provides services and resources to help children, youth, and their families be successful. CEDARS strives to be the recognized leader in the provision of quality services and assists families in navigating CEDARS broad continuum of care and/or other community resources as needed. CEDARS offers a family-centered, strength-based, and trauma-sensitive approach to all services. Through this service delivery model, children and families are provided the tools and assistance they need, and are supported in achieving the stability necessary to remain safe from harm and build enduring family relationships.

CEDARS believes foster care is not a permanent solution for a child. Instead, foster care provides for the physical and emotional needs of a child until a more permanent plan can be achieved. “Every child deserves permanency” is the philosophy of the CEDARS Foster Care program, whether with the child’s own family or through an alternative plan. We believe each child and each situation must be considered individually when working to achieve permanency and positive solutions for the children in our care.

The Foster Care program is designed to serve children birth to 19 years of age, whose needs can be met in a structured, nurturing, foster home environment. We are able to facilitate growth in the clients and families through the coordination of psychological, medical, educational, vocational, and recreational services. Crisis intervention services are offered to foster parents and foster care youth on a 24 hour, seven day a week basis.

CEDARS Foster Care is contracted through the Nebraska Department of Health and Human Services (DHHS). Youth are referred to CEDARS Foster Care by DHHS or Probation when it is determined that a child cannot safely remain at home. Children who are referred by DHHS are wards of the state, with DHHS serving as their legal guardian. For Probation youth referred by the Juvenile Probation Office, their biological parents remain the legal guardians and maintain all legal rights. As such, the parents of Probation youth must consent to all services and must be kept informed of their child’s progress while in foster care. Regardless of the referral source and who serves as the child’s legal guardian, it is important to maintain open communication and actively engage the biological parents for all youth in foster care.

CEDARS primary obligations are to recruit, train and license foster families; support foster homes to prevent placement disruption; and to assist with youth’s readiness for visits with biological families and permanency.

Client Rights

CEDARS Youth Services employees and foster parents will treat children, youth, and families with respect for their individual rights, their freedom and their inherent dignity. CEDARS recognizes and respects the following rights for all clients:

- A client’s personal dignity and right to privacy will be respected at all times.
- Consistent with the description of the individual program, a client will be served based only on his/her strengths and needs, not on gender, physical abilities, religious faith, racial or ethnic background, sexual orientation or economic status.
- A client will be free to exercise all rights as a citizen of the United States.

- A client may decide to not participate in services provided by CEDARS, unless required to do so by a court order.
- A client may decide to not participate in a research project that is being conducted within his/her participating program.
- A client's involvement with CEDARS will be kept confidential (except when legal obligations require reporting his/her involvement).
- A client will not be placed in physical restraint or secluded in a locked room.
- A client will not receive physical punishment, be abused, have his/her basic needs neglected, or have his/her money or property taken away improperly.
- A client will be able to keep clothing and other personal belongings that are consistent with the rules of the program.
- A client may freely communicate with family members, friends and/or other advocates in a manner that is consistent with the rules of the individual program and his/her service plan.
- A client will have the opportunity to worship through the religious faith of his/her choice.
- A client's individual service plan will be reviewed frequently and will include the client and/or his/her representative as available.
- A client will not be transferred or discharged from the program without an expressed reason.
- A client will be informed of what is expected of him/her for participation in services and will be told about hours of service and other relevant information.

FOSTER PARENT ROLE AND EXPECTATIONS

CEDARS Foster Care offers support to traditional licensed foster homes, as well as kinship and relative foster homes which are referred to as "approved homes." CEDARS is committed to recruiting, preparing, and supporting foster parents who are willing and able to care for youth in their home successfully and who are able to adapt as the service needs change. As a contracted foster home with CEDARS, obligations of foster parents are to provide child caring services and support to the foster child.

LICENSED FOSTER HOMES

CEDARS foster parents must possess the following qualities:

- Be at least 21 years old.
- Have a viable and adequate source of income (i.e. cannot include any form of public assistance) so that economic survival does not depend on CEDARS income.
- Be accepting of racial, cultural, religious and educational backgrounds different from their own.
- Be willing to work closely with and support relationships with children's biological family members.
- Two parent households must contain four (4) or fewer children under the age of 6 years old. This includes biological and foster children. There can be no more than six (6) children under the age of majority in a home. A single parent household can have no more than four (4) total children living in the home. There should be no more than two (2) children under the age of 6 years old, including the Foster Parent's own children.

- Be willing to work closely, cooperatively and professionally with the Foster Care staff in learning to carry out parenting procedures within prescribed guidelines. This includes scheduling in-home visits of one to three hours duration at least once a month.
- Be able to be responsible for maintaining a high level of treatment and teaching performance.
- Be willing to keep prescribed, orderly, daily records of key events.
- Must be responsible, mentally and emotionally stable, with a positive temperament and self-control.
- Have adequate room to house a child in a manner that allows him/her privacy. Nebraska requires 35 square feet per child. Foster children and biological children are **not** permitted to sleep in the same bed. Foster children and biological children may share a bedroom as long as it is age and gender appropriate.
- Have at least one parent available or a plan to supervise a youth when a child is home (e.g. after school, vacations, school suspensions).
- Enjoy children and be interested in helping youth who have experienced trauma.
- Have a car and telephone, and be able to transport (or make transportation arrangements for) youth to all appointments, school functions, biological parent visits when appropriate, counseling, respite, etc. At least one adult caregiver in the home must have a valid driver's license.
- Have passed all required background checks, including no history of committing a crime against a child or vulnerable adult. Refer to page 8 of the Foster Care Manual for additional background check requirements.
- Foster parents who are actively affiliated with another foster care agency will not be eligible until they have formally terminated that relationship. Those applicants who have worked with other foster care agencies will need to provide CEDARS with a written release allowing us to have access to evaluations of the service they provided.

Becoming a Licensed Foster Parent

Foster parents must participate in extensive pre-service training and additional requirements to prepare them for caring for foster children and supporting biological families. The pre-service training and preparation process for licensed foster homes includes the following steps:

- **Initial Application**

The prospective foster parent will complete an online application, which can be found on the CEDARS website (www.cedars-kids.org). They will provide basic information, report any history of law violations, and provide contact information for five references. A representative from the CEDARS Foster Care Program will then notify the applicant(s) whether or not they are eligible to begin the training and licensing process. Eligible applicants are then provided with additional information about CEDARS, a training calendar, release forms for background and reference checks, and a foster home checklist to help facilitate the next step in the process.

- **Home Review Checklist**

A thorough review of the prospective foster home will be completed to ensure that the home will meet the State of Nebraska's licensing standards. The checklist must be completed and submitted prior to, or at the Orientation.

- **Foster Parent Orientation**

The orientation for prospective foster parents is an opportunity to learn additional information on providing foster care and gain a deeper understanding of what foster care looks like today. This orientation is designed to help individuals determine whether or not foster care is the right fit for them. They will learn about the licensing process, meet the CEDARS Foster Care leadership team, and be able to ask any questions they might have. Foster parent orientations are held the week prior to the start of each foster parent training class. This orientation is mandatory and must be attended in order to be enrolled in the foster parent training.

- **TIPS-MAPP Training**

All licensed foster parents must participate in the required pre-service training. CEDARS trains foster parents using *Trauma Informed Partnering for Safety and Permanence – Model Approach to Partnerships in Parenting*, or TIPS-MAPP. TIPS-MAPP is held over a ten week period for three hours each week and is taught by certified TIPS-Mapp trainers. The training will start the week following the foster parent orientation.

There are five core competencies that TIPS-Mapp teaches.

- Foster Parents are to be able to meet the developmental and well-being needs of children and youth coming into foster care or being adopted through foster care.
- Foster Parents will be able to meet the safety needs of children.
- Foster Parents are able to share parenting with a child's biological family.
- Foster Parents are able to support concurrent planning for permanency.
- Foster Parents are able to meet their family's needs in ways that ensure a child's safety and well-being.

Foster Parents are assigned a Foster Care Specialist during the first class. Over the course of the training, the assigned Foster Care Specialist will meet with the Foster Parent in their home a minimum of two times to complete consultations. These consultations consist of completing questionnaires provided by the TIPS-Mapp curriculum in order to learn more about the family's strengths and needs in regards to Foster Care.

TIPS-MAPP training provides a mutual selection process in which CEDARS will get to know prospective foster parents better and determine if they meet CEDARS standards for providing foster care. This will also allow the foster parent to finalize their desire to provide foster care.

The parent's satisfactory completion of TIPS-MAPP includes:

- Attending all sessions
- Completing all written homework satisfactorily and independently
- An assessment of the foster parents to identify any concerns to address, and for CEDARS to determine whether to move forward in licensing and supporting the foster home

- **Background Checks**

The foster parents must receive clear background checks through Child and Adult Protective Services, Sex Offender Registry, FBI, DMV and Police check. People who have committed a crime against a child or vulnerable adult will not be certified as a foster home. Foster Parents who have certain misdemeanors or other law violations (with the exception of minor traffic violations) committed within the past five years are at risk of not being certified. CEDARS will not certify anyone with DUIs or drug charges within the last five years or felony convictions within the last ten years. Foster Parents must submit to finger printing analysis for FBI background checks. Foster Parents must sign a release of information for use by the local police

department to determine criminal history. There must also be cleared checks on all children in the home over the age of 13 years.

- **Home Visits and Home Study**

The foster home must have a written Home Study completed and approved in order to become licensed. This process will begin with an initial home visit that will generally take place early on in the training process to ensure overall safety and licensing compliance. The Foster Care Specialist who is assigned to facilitate the licensing process will make several additional home visits to complete licensing paperwork and learn more about the home. When CEDARS visits the home, it is best to observe the house in its “natural” state. CEDARS staff are primarily concerned with the safety and space of the environment, as well as getting to know the family’s lifestyle. During these visits, all household members will be interviewed for the purpose of obtaining a complete family history. All the information provided in the application, obtained during the interview, and obtained while visiting the home will be summarized in a report called a Home Study. The Home Study describes the family constellation, occupation of family members, plans for supervision, the family’s lifestyle, and the condition of the home. This home study is updated annually or more often if changes in the foster family composition or situation arise.

- **Household Safety**

Foster family homes must meet certain residence and safety requirements, according to State Foster Care Licensing Regulations. These include:

- One flushing toilet, one washbasin, and one bath or shower with hot and cold running water.
- An operable heating system
- An operable telephone
- Sleeping areas cannot be in an unsuitable area such as a hall, stairway, unfinished attic or basement, garage, bathroom, eating area, closet, shed or detached building, or any room used for purposes other than a bedroom.
- Foster children of the opposite sex who are 5 years of age or older may not share the same bedroom, unless DHHS approves. Each foster child shall be provided with a clean, comfortable mattress and clean linens, blankets, and pillow.
- Medication and containers with poisonous, caustic, toxic, flammable, or other dangerous material kept in the residence shall be distinctly marked or labeled as hazardous and stored in areas inaccessible to children less than 5 years of age.
- Emergency telephone numbers, including those for fire, police, poison control and ambulance shall be conspicuously posted adjacent to all telephones.
- Fireplaces, fireplace inserts, wood and coal burning stoves, and free-standing space heaters, if allowed by local ordinance, shall be installed, equipped and operated according to manufacturers’ specifications and requirements.
- An operable smoke detector shall be placed on each level of the residence. The detector shall be maintained in operable condition. Bedrooms below ground level used for foster youth must have an operable smoke detector in the bedroom.
- A portable fire extinguisher, suitable for Class B fires, shall be available in the kitchen and other cooking areas.
- Protective safety caps shall be placed in electrical outlets accessible to children younger than 5 years old.
- Exposed electrical wires are prohibited

- Drinking water from an individual water source must be safe as determined by an annual microbiological test conducted by a laboratory certified by the Department of Environmental Resources.
- If a basement or second floor bedroom is to be used for foster children, it must have an egress window at least 5.7 square feet, and no more than 44 inches from the floor to the bottom of the window. You also have to be able to open it without the use of any tools.

- **Health Assessment**

The foster parent must obtain a physician-documented assessment of their health and physical state or a copy of a recent health assessment conducted within the past year.

- **Reference Letters**

The foster parent must have at least 3 positive letters of reference, satisfactory completion of all application and interview questions, signed Foster Parent agreement with CEDARS, discipline policy, and policy manual.

- **Vehicle Information**

The foster parent will provide proof of auto insurance, current driver's license and current vehicle registration.

- **Household Pet Information**

Proof must be provided that any animal living in the Foster Home has the proper immunizations, is free of disease and, if applicable, is licensed by the city of residence.

Upon completion of pre-service training and when all licensing requirements have been met, CEDARS will submit the foster parent assessment and all licensing documentation to DHHS to review, and issue the foster home a license if approved. Foster parents will receive written confirmation of their status. Parents who have not been approved for licensure, will receive notification explaining why approval was not given. **The Nebraska Department of Health and Human Services retains the responsibility for licensure of foster homes. They have maintained the right to approve or not approve families where children are placed.**

Every two years foster homes are re-licensed and many of the steps in the initial licensing process are repeated.

Training Requirements and Continuing Education

In addition to TIPS-MAPP, foster parents must attend the following required trainings:

- Risking Connection for Foster Parents
- CPR and First Aid
- Medication Administration
- Reasonable and Prudent Parenting (trained during TIPS-MAPP)
- Human Trafficking
- Body Safety/Darkness to Light/Sexual Abuse Prevention
- Car Seat Safety

State foster care regulations and CEDARS require Foster Parents to complete **12 hours of continuing education** and/or training every year. The CEDARS Foster Care program will develop with foster parents a continuing education and training plan that is individualized to their particular needs. Throughout the year, CEDARS will provide foster parents with listings of workshops, reading materials, trainings, and community lectures that

would address the continuing education needs for foster families. It is highly recommended that a majority of training hours are completed classroom style through the CEDARS training department.

The following trainings are offered regularly throughout the year by CEDARS: CPR/First Aid (always needs to be current), Medication Administration (needs to be completed yearly), and Risking Connection for Foster Parents. Foster parents will receive information quarterly via email or mail regarding their training hours and deadlines. CEDARS also has a foster parent website with the current trainings offered. The website is <http://www.cedars-kids.org/fosterparents/>.

A foster parent training conference is facilitated by CEDARS once or twice a year to provide additional training opportunities specific to foster family needs. Foster families are always encouraged to identify particular topics of interest that could be addressed through sponsored trainings or workshops. CEDARS also offers a virtual Foster Parent Support Group which is a private group through the CEDARS Foster Care Facebook page that is facilitated by CEDARS therapists to offer education, training, and support to foster parents.

Licensing Updates and Renewals

CEDARS is committed to the success of each of our foster homes and the foster youth placed with them. Evaluations of homes are conducted periodically throughout a foster home's service with CEDARS. These include an annual update, as well as a complete renewal of the foster parent license every two years.

Annual Update

We use a thorough annual foster parent evaluation process to gather updated information and assess the strengths and abilities of foster parents, as shown by their current and past experiences in caring for foster children. Areas assessed during the Foster Parent Update include:

- The foster home's continued compliance with the State of Nebraska's regulations, including all health and safety requirements
- Training hours and if certain trainings are current
- How well the family has met the physical, emotional, cultural, spiritual, educational, and recreational needs of children
- Any changes to the types of children the home is willing to care for, and the number of children to be licensed for
- A mutual review of strengths, any areas needing improvement, and plans for necessary support or training to address concerns
- Re-evaluation of the foster parents' health and financial status
- The foster parents' overall cooperation with CEDARS Foster Care and DHHS

This information is used to complete an annual update of the Home Study, as well as provide constructive feedback to the foster parents.

Renewals

Every two years, Foster Homes are required to have their foster care license renewed per DHHS Licensure regulations. This process is similar to the initial licensing process without the pre-service training and is conducted by a CEDARS Foster Care Specialist responsible for overseeing licensing processes and compliance.

It is the responsibility of the assigned Licensing Foster Care Specialist to initiate and facilitate each step of the renewal process at the appropriate time.

The following steps are required for re-licensure:

- Fingerprints need to be ran within **six months** of the license being due.
 - Fingerprints can take several months to get back from the State Patrol, so it is necessary that these are ran in advance.
 - Fingerprints need to be completed on any member of the household who is 18 years or older.
 - Foster Care Specialists will either roll the Foster Parent's fingerprints, or give their Foster Homes information regarding the location to get their fingerprints ran so that an appointment with State Patrol can be made.
 - Fingerprints are then scanned by State Patrol. CEDARS will receive the results as soon as they are done. There is no way to rush fingerprint results.
- The Health Information Report needs to be completed. If the foster parent is on prescription medication(s), the foster parent needs their physician to complete Part B of the Health Information Report. If the foster parent is not on prescription medication, they do not need a Physician to complete the form, and can self-report.
- Twelve hours of approved training is needed for each foster parent, per licensing year. Licensing Foster Care Specialists will communicate with Foster Homes on training recommendations and requirements.
- **Sixty days** from the time of renewal the Licensing Foster Care Specialist should:
 - Complete a home visit.
 - Bring any licensure paperwork that has not yet been received (DHHS application, compliance review, discipline policy, w-9's, copies of any renewal paperwork).
 - Ensure that the bedrooms are in compliance and that basic safety measures are implemented for hazardous items.
 - Ensure medications are locked up and out of reach.
 - Ensure that there is a fire evacuation plan in place.
 - Obtain vehicle information such as updated insurance cards and copies of their driver's license.
 - Update the home study.

When all of the preceding information is received, the Foster Care Specialist will complete the home study update.

- **Thirty days** from the date of renewal, the Licensing Foster Care Specialist will give the completed home study update to the Licensing Manager who will review the home study for quality assurance.
 - If any updates or changes need to be made, the manager will return the home study for revisions.
 - The Foster Care Specialist will then submit the finalized home study update to DHHS
 - DHHS will also review the home study for quality assurance and send back any corrections that need to be made.

License Amendment Procedure

When a foster care license is out of compliance or experiences a change that would impact their licensure status, the following agency paperwork needs to be completed with foster parent(s) to bring their license back in compliance within two weeks of a change in the home composition.

- Compliance review
- HHS application

- Licensing change form
- W-9 (only if address change)
- Home study update

APPROVED HOMES

With DHHS approval, a relative or kinship approved home may be referred to affiliate with a foster care agency if their needs exceed those that can easily be met solely by the DHHS Case Manager. Relative and kinship homes are required to go through the home study process that shall be submitted to DHHS within **45 days** from the time of placement. Foster parents are assigned a Foster Care Specialist in order to complete this initial assessment process.

Over the course of 45 days, the assigned Foster Care Specialist will meet with the Foster Parent in their home to complete an interview. This interview consists of completing questionnaires provided by DHHS as well as a walk-through of the Foster Parent's home to ensure they are able to maintain a safe and stable home for the child(ren) for whom they took placement of. The home study process also includes a comprehensive assessment of the strengths and needs of the home that includes the following areas: finances, legal issues, housing, food and clothing, physical and mental health care. Where needs are identified, the Foster Care Specialist will work with the family to develop a plan for meeting those needs or will refer the family to supports and services within the community to provide assistance.

The information gathered during the interview and assessment process between the Foster Parent and Foster Care Specialist is used to write the family's home study. The home study is updated annually or more often if changes in the family composition or situation arise. The home study describes the family constellation, occupation of family members, plans for supervision, the family's lifestyle and the condition of the home, as well as many other items. When CEDARS visits the home to complete the home study assessment, it is best to observe the house in its "natural" state to be able to get a sense for the space and safety and get to know the family's lifestyle.

CEDARS encourages all eligible relative homes to take steps to become a **licensed relative home**. In order to become licensed, the family must be eligible. Certain non-safety licensing requirements, such as training, and home square footage, can be waived for approved homes to become licensed. The assigned Foster Care Specialist will work with the family to ensure they are in compliance with the necessary licensing regulations.

Training for Approved Homes

Most requirements for initial and ongoing foster parent training are waived for relative and kinship approved homes; however, approved homes are always invited and encouraged to attend CEDARS free foster parent trainings. Approved homes are required by the State of Nebraska to be trained in Human Trafficking, Sexual Abuse Prevention, Car Seat Safety, and Reasonable and Prudent Parenting, and are strongly encouraged by CEDARS to attend the Risking Connection for Foster Parents trauma training. The Foster Care Specialist will also provide informal education and training as needed to approved homes during scheduled home visits. Approved homes are not required to maintain continuing education hours. When possible, approved homes are encouraged to participate in DHHS module training, CEDARS Kinship Training, or TIPS-MAPP training and take the necessary steps to become licensed.

FOSTER PARENT RIGHTS AND RESPONSIBILITIES

Foster parents are essential in the growth and quality care of a child. CEDARS provides foster parents with some of the structure and support needed to be successful in this difficult but rewarding task.

CEDARS recognizes the following rights for all foster parents:

- Foster Parents have the right to receive all of the services provided by the agency. These services include: preparation for the placement of the child through Foster Parent training, support to the Foster Parents while the child is in your home and staff available with a 24 hour on-call system to respond in times of trouble.
- Foster Parents have the right to maintain the integrity of their home and may monitor the belongings of the child to ensure that they are not harmful or disruptive.
- Foster Parents have the right to establish reasonable rules and regulations in their own home.
- Foster Parents have the right to monitor visitors and guests in their home.
- Foster Parents have the right to participate in all service planning for their foster child.
- Foster Parents have the right to be compensated in a timely way for the services they provide.
- Foster Parents have the right to refuse a placement. If placement of a foster child seems inappropriate because of the child, family travel, or any number of other considerations, we expect Foster Parents to be honest and say, "Not at this time." Declining a placement will not jeopardize future placements.
- Foster Parents have the right to be fully informed of a child's background and physical and mental functioning to ensure provision of appropriate care and protection;
- Foster Parents have the right to participate in any child placement reviews and to have their opinions expressed in placement hearing reviews. The Foster Parent's opinion is important to the team.

Foster Parent Code of Ethics

Each foster parent has an obligation to maintain and constantly improve the practice of fostering; to examine, use, and increase the knowledge upon which fostering is based; and to perform the service of fostering with integrity and competence.

Foster parent's are expected to adhere to the following code of ethics:

1. I regard as my primary obligation the welfare of the child served.
2. I will work objectively with CEDARS and DHHS in effecting the plan for the child in my care.
3. I hold myself responsible for the quality and extent of the services I perform.
4. I accept the reluctance of the child to discuss his or her past.
5. I shall keep confidential, from the community, information pertaining to any child placed in my home.
6. I treat with respect the findings, views, and actions of fellow Foster Parents and use appropriate channels, such as CEDARS, to express my opinions.
7. I will take advantage of available opportunities for education and training designed to upgrade my performance as a Foster Parent.

8. I respect the worth of all individuals regardless of race, religion, sex, or national ancestry in my capacity as a Foster Parent.
9. I accept the responsibility to work toward assuring that any individual or organization providing foster care services adheres to ethical standards.
10. I will distinguish clearly in public between my statements and actions as an individual, and as a representative of CEDARS.
11. I accept responsibility for working toward the creation and maintenance of conditions within the field of foster care that enable Foster Parents to uphold the principles of this code.

Confidentiality

When foster parents accept a child into their home, they have assumed a great responsibility. The child will gradually begin to place confidence and trust in their foster parents. In time, foster parents will have learned (either from the agency or the child) many significant events and specific information regarding the child's growth, development and family life, which have shaped the child into the person he or she is today. **Any information about the child should be kept in strict confidence.** CEDARS recognizes that friends and associates will ask foster parents many questions about foster children. Giving general information, such as first names, ages, grade in school, etc., is fine; however, CEDARS requires that foster parents not violate the confidence of the child by disclosing any personal information about him/her, and/or his/her family. The foster child may also experience many questions by neighbors, schoolmates, and others that will place the child in awkward situations. It is helpful if you can plan with the child how he/she might respond to these questions in a way that will minimize harm or embarrassment to the child.

CEDARS firmly believes that individuals, including children, have a right to privacy. We make every effort to protect the information about the children we serve, their families and the reasons they may be receiving services within our organization. CEDARS will release information about an individual only with the appropriate written consent. Please speak to CEDARS Foster Care staff regarding appropriate and inappropriate disclosures of information about the child in your care.

Foster parents will abide by the privacy regulations issued under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) to maintain the service recipient's privacy and assure protection of the disclosure of information concerning clients. Therefore, information regarding the individual and his or her family will be released only after appropriate written consent or a court order is received, or if the individual poses an immediate danger to self or others. Circumstances that may require the release of confidential information without consent is provided to children, youth, and families at the time when services commence.

Foster Parents can NOT release or publish any identifying information, or make any posts to social media (Facebook, blogs, Instagram, etc.), regarding the children placed in their care without permission from the child's legal guardian, as they are wards of the state of Nebraska.

Boundaries

Boundaries are incredibly important in foster care because many of the youth we care for have had their boundaries violated in the past. As a result, they may have trouble feeling whole and safe within their own

bodies. They may have difficulties establishing appropriate social interactions, positive relationships, and healthy boundaries.

Boundaries allow us to protect ourselves from stress, physical injury, and situations that are uncomfortable. They are flexible and families tend to have more fluid boundaries than strangers. Healthy families will still respect the boundaries of respect and safety for all family members.

Many children will come into foster care with poor boundaries. They may have never learned appropriate boundaries from their family. It is important to be clear about boundaries and recognize when a child has poor boundaries. Foster parents and respite providers must set appropriate boundaries right away. Indications of poor boundaries are that the child may crave too much or too little attention from you. They may have trouble with privacy. Other signs may include:

- They may not know how to respect other people's things
- They always want to touch or hug or kiss other children or adults
- They constantly need attention or praise or acknowledgement
- They consistently invade other person's drawers or use their things without asking
- They don't seem to have a self-protective urge, such as not afraid of strangers, wander off easily, participate in high risk activities or put themselves in dangerous situations
- They may tell strangers about their abuse or want to go home with them
- They may ask very personal questions

It is important to respect the boundaries of the youth in your home as well as encourage good boundaries. Some of the many areas where it is important to maintain appropriate boundaries include:

- **Confidentiality:** Foster Parents should not share confidential information about the youth in their home for respite or as placement. It is not appropriate to share with people why the youth are removed or other information that is private.
- **Avoiding Triangulation:** Youth who are in foster care may attempt to have others take sides or have an "us" versus "them" mentality. It is important not to "side" with anyone and to keep communication open amongst the team.
- **Maintaining Boundaries with CEDARS:** Foster parents and respite providers are expected to maintain appropriate boundaries with CEDARS, and with one another. This includes having open and honest communication, and mutual respect.
- **Personal and Intimate Boundaries:** Foster families and respite providers must set firm boundaries when it comes to touching, bedtime, bath time, and clothing. Whenever there is a concern please notify CEDARS right away. Since many foster youth may not know appropriate personal boundaries, it is essential to set rules and guidelines within your home right. It is never acceptable for a foster parent and youth to sleep together in the same bed. If your foster child is having issues with sleep, your assigned Foster Care Specialist is available to provide you suggestions. It is also never appropriate to talk to a foster youth about intimate details in your relationships with other adults.
- **Establishing House Rules:** It is important to have house rules to help maintain boundaries. House rules should focus on safety and might include:
 - No using vulgar or bad language

- No hitting or hurting others
- No harming or destroying personal property
- Get permission before touching, using other people's property, or entering their space
- When angry, use your words, not your fists
- Get permission before you leave the house
- Always wear clothes or pajamas in the house
- No sexual touching between children in the home

Some families post these rules in the foster home and refer back to them throughout the week. It is important for kids in your home to know what is expected of them.

It is important that foster parents and respite providers model appropriate boundaries at all times. It is important for the adults to model appropriate touch and also follow the rules of the home. Foster parents can teach kids about respecting personal space and staying out of people's "bubbles." When in doubt, foster parents can call their Foster Care Specialist for tips and ideas on how to model and teach appropriate boundaries to the youth in their home.

Guidelines on boundaries adapted from: Alaska Center for Resource Families (2001). Fostering Skills: Boundaries in Foster Care.

Changes in the Foster Home

It is required that foster parents keep CEDARS informed of any change in their personal lives and/or home environments. It is CEDARS responsibility to know about anything that might affect the placement of a child or a child's adjustment in the home. It is also necessary to keep CEDARS informed to ensure the foster parent's license is in compliance with the State of Nebraska's regulations. Some examples of changes are:

- Move to a new home or new home address
- Marriage or divorce/separation
- Signification other's status (who the foster parent is dating and any changes to the relationship)
- Change of employment or loss of job
- Additions to the family or a person moving into or out of the home
- Loss of family member
- Hospitalization or illness of a foster parent or family member
- Mental health changes or improvements
- Significant medication changes that may affect your parenting
- Criminal activity, arrests or lawsuits
- Damage to home from fire, tornado, flood
- Change in respite providers, babysitters, etc

Any change in a family can be a source of stress for all members. The CEDARS Foster Care Specialist will work to minimize the impact of any changes on the child, and to support the family during times of change. Often children who have had unstable backgrounds in their early lives have more fears and concerns about change than might be anticipated. By working together, the foster family and the CEDARS Foster Care Specialist can often prevent unnecessary worry for a child that may be displayed through concerning behaviors.

OTHER ROLES IN THE FOSTER CARE SYSTEM

Foster youth often have many people responsible for their care and supporting them in achieving permanency. In addition to the foster family, others involved in their care may include a Case Manager and/or Probation Officer, CEDARS Foster Care staff, biological family members, a judge, Guardian ad Litem (GAL), therapist and other service providers. The role and responsibilities of everyone involved may get confusing for both foster children and foster parents at times. As the agency supporting the foster home, CEDARS will assist foster parents and youth in understanding the unique role of each team member and navigating the foster care system.

CEDARS ROLE WITH FOSTER FAMILIES AND CHILDREN

Foster parents can expect support from CEDARS in the form of training, in-home contacts, case consultation, reimbursement, assistance with respite, special services to the foster children in their care, and recognition and acknowledgment of foster parents' efforts.

The CEDARS Foster Care team is comprised of a Program Director, Assistant Program Directors who supervise staff and certain aspects of the foster care process, a Placement Coordinator who oversees the matching and placement process, and Foster Care Specialists who provide direct support to foster families and youth.

Foster Care Specialists

A CEDARS Foster Care Specialist will be assigned to each foster youth. The role of the Foster Care Specialist is to support, teach, and assist both the foster youth and foster parents. The Foster Care Specialist will provide support and training to CEDARS foster parents and serve as a liaison to schools, DHHS, the court, and other service providers. The Foster Care Specialist will also assist foster parents and youth in developing an open and supportive relationship with each other. The Foster Care Specialist will coordinate various support services to prevent the disruption of a child's placement in a foster home and promote stable placements for children in the program.

CEDARS Foster Care Specialists are divided into two specialized teams:

- **Support Foster Care Specialists:** The sole focus of this team is to support foster homes. The average caseload for a Support Foster Care Specialist is 17 youth.
- **Licensing Foster Care Specialists:** The primary focus of a licensing staff is to complete initial licensure, renewals, and updates as well as write foster and adoption home studies for all foster homes supported by CEDARS Foster Care. These staff are cross trained in support and can assist when needed with a small caseload (no more than 5 youth).

Foster Care Specialists will conduct face-to-face meetings at least once a month in the home with the foster parents and the child. During these in-home visits, the Foster Care Specialist will spend some time meeting separately with the children and foster parents to discuss any concerns or sensitive topics. When the Foster Care Specialist visits the home, the main objective is to discuss the service plan and goals, areas of progress, and any specific areas of concern. Additionally, the Foster Care Specialist will maintain regular contact with the youth and foster parents to build supportive relationships, monitor and promote safety and well-being, discuss both the foster parent's and worker's roles in supporting the service plan, and to share all relevant and legally permissible information concerning the youth.

The frequency of visits varies according to the needs of the family and of the particular youth. When a Foster Care Specialist is first assigned to a youth, visits in the home may be very frequent until placement is secure and a service plan is well established. Each foster youth is placed at an identified level of care based on the extent of support needed to meet the child's assessed needs. This level of care guides how often the Foster Care Specialist will meet with the youth and family on an ongoing basis. See page 25 in the manual for more information on how foster care levels are determined.

- **Essential:** Foster Care Specialist makes a minimum of one visit monthly with the youth and provides 24-hour phone and in-person response to support the home.
- **Enhanced:** Foster Care Specialist makes a minimum of two visits monthly with the youth and provides 24-hour phone and in-person response to support the home.
- **Intensive:** The Foster Care Specialist makes a minimum of three visits monthly with the youth and provides 24-hour phone and in-person response to support the home.
- **Intensive Plus:** Foster Care Specialist makes a minimum of four visits monthly with the youth and provides 24-hour phone and in-person response to support the home.
- **Professional:** The Foster Care Specialist makes at least four visits monthly with the youth and provides 24-hour phone and in-person response to support the home.
- **Specialized:** Foster Care Specialist makes a minimum of four visits monthly with the youth and provides 24-hour phone and in-person response to support the home.

The Foster Care Specialist will maintain the necessary frequency of visits and will work with the foster parents and youth to schedule the visits at a consistent and mutually agreed upon time when possible. Visits may increase in frequency at any time if specific concerns arise, if a placement is at risk of disruption, or if additional support is needed.

Foster Care Specialists are available to foster parents 7 days a week on a 24-hour basis. Foster Care Specialists must be contacted **immediately** if there is any type of emergency situation, such as a medical emergency, runaway or unaccountable time, law violation, suicide threat, or other incidents as described in the Incident Reporting Procedure. In the event of an emergency after hours, foster parents can contact the on-call number at (Lincoln 402-322-2520) and (Omaha 531-201-2923). A Foster Care Specialist will carry the on-call cell phone at all times so that they are accessible to foster parents in the event of a crisis or emergency. All Foster Care Specialists will be scheduled as part of the on-call rotation.

WORKING WITH CHILD WELFARE AND JUVENILE JUSTICE SYSTEMS

CEDARS Foster Care Specialists primarily conduct all of their communication regarding foster youth through the agency that referred the youth to foster care and is responsible for overseeing the case (i.e. DHHS or Probation). When possible, the Foster Care Specialist coordinates their monthly home visits with the Case Manager or Probation Officer in order to keep all parties on the same page. The Foster Care Specialist will notify the responsible Case Manager of any changes or updates to the youth's status in the foster home, doctor appointments, concerning behaviors, and any significant incidences either in or outside of the foster home. If needed, CEDARS will contact the CPS Hotline to inform DHHS of any immediate concerns to be relayed to the Case Manager.

Department of Health and Human Services (DHHS)

Foster youth who are placed through the Department of Health and Human Services are wards of the state and a DHHS Case Manager serves as the appointed legal guardian of the child. The DHHS Case Manager will provide service coordination to biological families, serve as the first point of contact with the biological family, provide consistent service coordination throughout the life of the case, and coordinate all services needed to monitor and support the youth and his/her biological family. The DHHS Case Manager will be responsible for providing recommendations for appropriate services to the youth and will arrange and facilitate team meetings. All major decisions regarding a youth should be discussed with the assigned DHHS Case Manager. The DHHS Case Manager is required to meet with each assigned youth face-to-face at least once per month.

Juvenile Probation

When youth are placed in foster care through the Office of Juvenile Probation, their biological parents remain the legal guardians and maintain all legal rights. As such, the parents of probation youth must consent to all services and must be kept informed of their child's progress while in foster care. A Probation Officer is assigned to each youth to manage the case, coordinate appropriate services, and oversee the successful completion of the youth's probation. Probation Officers must also be kept informed of the youth's status at all times, and must meet with each youth at least once per month.

Other Service Providers

CEDARS Foster Care Specialists and foster parents also regularly communicate with other service providers, when permitted through a signed release, in order to monitor service participation and effectiveness. CEDARS will acquire signed releases from the legal guardian authorizing contact with a youth's school, healthcare providers, therapist, or other relevant service providers in order to allow for communication and coordination of services.

Family Time Services

Services to support family time, also referred to as "family visitation," are contracted through DHHS separately from foster care services. There are many agencies, including CEDARS, that provide family time, so foster parents may at times have a worker from a different agency providing family time for the foster youth in their home. The DHHS Case Manager is primarily responsible for developing the family time plan, with input from the biological family, and the agency providing the family time service. At the time of placement, a plan for family time may be arranged. Visits may be planned with parents, siblings, grandparents, extended family members, or other significant, positive people in the child's life. Family time services and contact with biological families will be discussed further in the following section.

BIOLOGICAL FAMILY INVOLVEMENT

As a family-centered program, CEDARS Foster Care values the importance of a youth's contact with their biological family. A youth's contact with their biological family is important for their emotional development and is a legal right. CEDARS trains foster and adoptive parents using the TIPS-MAPP curriculum, which emphasizes the importance of biological family and encourages foster and adoptive parents to partner with a child's biological family whenever possible.

CEDARS believes that biological families should be involved in the foster care placement of their child, and will support the DHHS Case Manager in ensuring that the birth parent's expressed desires regarding placement are taken into consideration, if appropriate. Other areas where the family will be invited to participate include: referral meetings; the intake process; service plan development; family time planning; permanency and discharge planning; and team meetings. Biological families will be involved in decision making and advised of all information regarding the care and services provided to their child. CEDARS Foster Care Specialists and DHHS Case Managers are available to the biological parents to help them re-establish parental care, maintain parental ties, and identify and address issues leading to the placement of their children in out-of-home care.

Some suggestions for foster care workers and foster parents to keep in mind when working with biological families include:

- **Support the parents' efforts to be parents.** Accept what the parents can do (even if it is very little) as this may help the parents try harder.
- **Play second fiddle to the child's parents.** Showing disrespect toward the child's parents is unacceptable and is very destructive to the child, who needs to be able to love his/her parents. Help the child by showing respect and acceptance for the parents and by accepting and acknowledging that the child is a member in a family other than the foster family.
- **Don't play games.** Because birth parents may be hurt and angry, they may try to cause conflicts between foster parents and the DHHS Case Manager or the foster child. Foster parents should avoid getting trapped in this sort of game. A good working relationship between the foster parent and the assigned Foster Care Specialist and DHHS Case Manager is the best way to avoid this.
- **Support the DHHS Case Manager/parent relationship.** Often biological parents are hostile to the DHHS Case Manager and the agency. This is understandable, but hostility interferes with the treatment plan for the parent and child. Do not take sides.
- **Do not over-react to criticism.** Biological parents may belittle or criticize foster parents or workers to the child. Try to remember that the parents likely know that the foster parents and/or workers are doing their job with the child, which may be hard for them to accept.

Contact between Foster and Biological Parents

In keeping the foster child's best interest in mind, foster parents are encouraged to develop a positive and respectful relationship with the biological parents, beginning at the time of placement. **Foster parents are expected to contact the biological family within 24 hours of a child being placed in their home** in order to introduce themselves, learn more about the child, and answer any questions or concerns the birth parent may have.

The foster and biological parents, with the support of the CEDARS Foster Care Specialist and DHHS Case Manager when necessary, will also establish what ongoing communication and contact will look like. Examples of ongoing contact between foster parents and biological parents can be through team meetings, a daily communication log notebook, phone contact, community outings, and family time. Whenever appropriate, foster parents can also serve as role models for biological families, will work with them on specific interventions and behavior management techniques, and may even assist with the supervision and transportation of the

court-established family time. Because of the importance of the biological parents to the foster child, a foster parent's attitude toward the child's birth family and acceptance of their place in the child's life are important issues.

Contact between foster and biological parents may be difficult, but it can be the most important element in the success of foster care. It is important for foster parents to remember that biological parents and children are in a painful situation, and to be understanding of their feelings. As uncomfortable as it may seem, having ongoing contact helps the foster parents and the biological parents see each other as important care givers who are both looking out for the best interest of the child. This also gives the children the message that all the adults are supportive and working together.

Foster parents are encouraged to talk with their Foster Care Specialist if they experience difficulty or have any reservations in these sensitive areas.

Contact between Foster Children and Their Families

CEDARS Foster Care supports planned, ongoing, and frequent contact between foster children, parents, and siblings in order to maintain and strengthen family relationships. This ongoing family contact is a vital component of a child's stay in foster care and can be a critical step to reunification and permanency. Visits between the child and his/her family are also essential for the child's well-being. Persons with whom the child may have family time are their parents, siblings, aunt, uncle, grandparents, and/or other significant, positive people in their life. Unless deemed unsafe, foster parents are expected to be supportive of family time between the foster child and his or her family.

At the time of placement, a plan for family time (visitation) may be arranged. The family time plan takes into consideration;

- The youth's age and developmental stage
- The parent's needs and strengths
- The schedules of the youth and biological family
- The social, economic and cultural needs of the family
- The permanency goal
- Safety and well-being of the youth

Below are the federal guidelines around family time based on the age of the child:

Developmental Visitation Guidelines Age Frequency/Duration of Visits

0 – 6 Months • Daily visits are optimal. • Families should visit at least three times a week for 30-60 minutes. • During this developmental period, the focus should be on short, frequent visits.

6 – 12 Months • Families should visit at least three times a week for one hour. • Children in this developmental period begin to attach to caregivers. Therefore, visits should be scheduled so as to verify the parent as the child's primary caregiver.

1 – 4 Years • Families should visit at least twice a week for 1 1/2 hours. • Separation during this timeframe can create developmental problems for the child. Potential separation anxiety necessitates frequent visits for a longer duration to affirm the parent's role as primary caregiver. • All desires from verbal children should be solicited and considered.

5 – 12 years • Families should visit at least once a week for two or more hours. • Children in this developmental stage can tolerate more time between visits. • Note that once the child starts school, the visitation plan should be expanded so that the parent can attend school/community-based activities as well.

13 – 15 Years • Families should visit at least once a week for two or more hours. • The Team must take into consideration the child's desires.

15 – 18 Years • No recommendation regarding the specific frequency/duration of visits. • Child's desires should be strongly considered in creating the FVP.

To assist foster families in becoming familiar with a child's family time plan, CEDARS includes a "Family Visitation Schedule" in the foster care intake packet (enclosed below). This document includes information about the time and place for planned visits, who they are with, their relationship to the foster youth, and the level of supervision needed for the visit. The family time schedule is fluid and may need updated frequently as levels of supervision and location of family time may change. Unless otherwise advised, all phone calls and family time should be coordinated through CEDARS or the DHHS Case Manager.

Family time can provide an opportunity for foster parents to communicate with the biological parents and offer parenting suggestions when appropriate. A communication notebook is a tool that foster parents are encouraged to use to communicate with biological parents. The notebook can be sent on the visits to report how the child has been doing in the foster home that day, what goals they are working on, school information and progress, meals and feeding schedules, or other relevant child-specific information.

CEDARS understands that at times a child's family time schedule may present challenges for foster parents, as the child may sometimes have disruptive behaviors and mixed feelings before and following a visit with their biological family. It can be upsetting to allow a child to visit with their family who has neglected or abused them. Despite these potential challenges, it is important for foster parents to be respectful and objective when it comes to their attitudes and reactions to a child's visits with their family. If a child's contact with their parents or relatives becomes disruptive in any way, the foster parent should discuss it with the Foster Care Specialist.

CEDARS Foster Care Specialists and foster parents take steps to ensure that visits are positive and beneficial for the youth by providing guidance and support to the youth, helping prepare the youth for transition to and from in-person family contact, and following up after visits to assess for any concerns. Adequate communication and responsiveness regarding the youth's behavioral, mental, or emotional needs are also important to assuring a positive experience.

Withholding children from their family time or communication from biological family is never to be used as a punishment and is outlined in the Discipline Policy.

FOSTER CARE ADMISSION AND PLACEMENT PROCESS

Youth are referred to kinship or agency-supported foster care when it is determined by the Department of Health and Human Services (DHHS) and/or Juvenile Court that they cannot remain safely in their home.

CEDARS believes in family-centered practice, and that every youth deserves to be served in the least restrictive, most family-like setting possible. When children are unable to safely remain in their family home, placement with a relative is sought as the next best option. If there is no suitable or available relative, then the option of a “child specific” foster home is explored, which involves an adult already known to the child who is willing to become his/her foster parent. In the state of Nebraska, non-relative “child specific” placements are referred to as “kinship” care.

CEDARS supports DHHS in their utilization of the *Family Finding* practice to identify, locate, and engage relatives and kin for children in need of out-of-home care. When DHHS is successful in identifying a relative or kinship placement for a foster youth, and decides to refer the placement for agency supported foster and kinship care, the relative or kin caregivers can select the agency they wish to be supported by. CEDARS actively engages all relative and kinship foster placement referrals, and immediately provides outreach and support to ensure the needs of both the child and the relative home are quickly addressed.

When a relative or kinship placement is not available, then CEDARS will seek to place the youth in a licensed foster home that is the most suitable match for that child. This allows the youth to remain in a community-based setting within a family unit. Placement in a stable family home helps children and youth remain safe and healthy, and achieve permanency and well-being more quickly.

MATCHING AND PLACEMENT PRACTICES

CEDARS foster parents who are trained, licensed, and ready can agree to have a child placed in their care when an appropriate match is available. The CEDARS Foster Care Placement Coordinator is primarily responsible for reading foster care referrals and identifying possible foster families who may be a good match. The Placement Coordinator will monitor and maintain information regarding all foster families who are accepting placements, as well as their identified placement preferences. CEDARS will also strive to place the child in an environment that supports the child’s cultural identity and language needs, allows for placement with siblings if applicable, and is located within reasonable proximity to the child’s home community.

CEDARS will work closely with each CEDARS foster family to find a well-suited match between children and homes in the shortest possible time. The Placement Coordinator will notify any prospective foster homes of a referral if they may be a good match, and will share all available information about the referred youth with any families interested in placement. Foster parents are asked to respond to the Placement Coordinator and read available referral information within 24 hours of being notified. Foster parents always have the right to decline placement of a child and wait for another child who may be a better match for their home.

If a well-suited match is identified and the foster home is willing to take placement, the Placement Coordinator will notify DHHS of the available foster home option. DHHS is responsible for deciding which available home is the best fit for the child if multiple agencies identify possible homes. The CEDARS foster home that is willing to take placement will be notified either way if their home is the one selected by DHHS for placement. Factors that DHHS considers in selecting which available home in which to place a youth include proximity of the home to the youth’s school and family, as well as characteristics and experience of the foster parent that would make them the most suitable option for the child. Indian children are placed according to the placement preferences specified in the Indian Child Welfare Act, as applicable.

In addition to the placement process outlined above, CEDARS Foster Care implements the following practices to ensure that well-suited matches are made:

- Following the initial licensure training, and annually thereafter, foster/adoptive parents complete a placement characteristic preference form to indicate the various child characteristics they would or would not prefer to care for in their home. These preferences are kept as a part of the parent file maintained by CEDARS. Foster Parents can update their preferences at any time. CEDARS understands that preferences may change through experience, training, or over time, and encourages Foster Parents to talk with their Foster Care Specialist about their preferences on an on-going basis.
- Whenever time allows, pre-placement visits will be coordinated between the prospective foster parents and the youth. In conjunction with the DHHS Case Manager or Probation Officer, CEDARS will develop a family time plan to include visits that are progressive in their frequency and duration. The CEDARS Foster Care Specialist will be a part of the initial visit between the youth and the family to assist in the introduction and will remain involved in the visits as warranted.
- During the pre-placement visit, the foster or adoptive parents will be able to learn about the child's:
 - Strengths, interests, and personality
 - Social, genetic, medical, psychological and educational backgrounds
 - Current development, and any special needs
 - Current and past behavior
 - Anticipated future needs
 - Requests or expectations regarding openness of a potential adoption

Concurrently, DHHS and/or Probation will work with the biological family to make sure their expressed desires are also heard and taken into consideration during placement searches. The preferences of the foster family, youth and the child's family all play a crucial role in placement decisions. If an agreement is made for placement, a request for a court-ordered placement would be made by the DHHS Case Manager or Probation Officer. All placements will occur through voluntary agreements between CEDARS, the foster parents, children, the children's parents, and the DHHS Case Manager or Probation Officer.

Placing Children Removed from Their Home Unexpectedly

When children are removed from their home by DHHS unexpectedly or in response to emergency safety concerns, timely placement of the children in a safe and nurturing environment is essential. Intake information may be limited in these circumstances. The CEDARS Placement Coordinator, or on-call Foster Care Specialist if the referral is received after business hours, will inquire about the reason for the child(ren)'s removal upon notification from DHHS.

Once CEDARS receives the request for placement from DHHS, the Placement Coordinator or on-call Foster Care Specialist will begin the search for a foster home. If the placement request is received after-hours, the on-call Foster Care Specialist will consult the "Open and Available Homes" list that is updated weekly. This list provides information about the placement preferences of foster homes, the number of youth the home is available to take, as well as any pending placements a foster home may have. This document also identifies any foster homes that are currently on hold and unable to take placements, as well as homes that are able to provide scheduled and emergency respite. The on-call Foster Care Specialist can also call the on-call Foster Care Supervisor to discuss possible foster homes to contact. The Placement Coordinator or on-call Foster Care Specialist is to continue to contact foster homes until CEDARS is able to identify a foster parent willing and able to take placement or DHHS informs CEDARS that another home has been located.

To identify the safest and most nurturing home for every child, CEDARS will take into account the same factors in an urgent placement request that are considered in the placement and matching process for every youth. As such, CEDARS will examine the children's and caregiver's characteristics, strengths, needs, supports and the appropriateness of the foster family home environment to the best of its ability with the information available. Children will be placed according to their best interest in the most family-like and familiar setting possible with siblings, kin or in homes within reasonable proximity to their family and home community.

When a CEDARS foster home indicates that they are willing to accept the placement, the Placement Coordinator or on-call Foster Care Specialist will notify DHHS of the available foster home, and DHHS will then decide if the prospective placement is the best fit for the child(ren) being removed. If the placement is accepted and the child(ren) placed within the CEDARS foster home, the on-call Foster Care Supervisor must be informed of the placement, along with the ages of the youth and the reason for removal. This ensures that the Foster Care management team is aware and is able to quickly assign a Foster Care Specialist to support the foster home. The Foster Care Supervisor will inform the Service Director of the placement by the following business day, or sooner depending on the urgency of the situation.

After a placement is made, the on-call Foster Care Specialist is required to see the child(ren) in the foster home **within twenty-four (24) hours** of the placement. During this visit, the Foster Care Specialist will complete the Body Check form to document any existing injuries or scars. The Foster Care Specialist will also have the foster parent complete the required intake paperwork. If the child(ren) is/are placed between the hours of 9:00 PM and 8:00 AM, the Foster Care Specialist will wait until 8:00 AM or later to conduct this visit.

Foster Care Levels

Youth in care have a wide range of behavioral, medical, and/or emotional needs. Youth with more significant behavioral, medical, and/or emotional needs may require increased supervision, support, and/or additional services to adequately care for their needs. The CEDARS Foster Care program supports four levels of Foster Care: **essential, enhanced, intensive, intensive plus, professional, and specialized**. For youth who are state wards, the first three levels are determined by the DHHS Case Manager completing the Nebraska Caregiver Responsibility (NCR) Tool within 30 days of the youth being placed in a foster home. The levels are indicative of a child's needs and the level of responsibility required of the foster parent to meet those needs. Youth placed through Probation are generally assessed at the intensive level of care. The Professional Foster Care level is a specialized and highly intensive service that CEDARS provides through contract to Probation youth who are referred for that level of care.

The assessed level of need will determine the level of professional and financial support provided to foster youth and parents. The higher the level of assessed need, the more agency support and increased frequency of in-person contact a foster parent can expect to receive from CEDARS.

Multi-Ethnic Placement Act (MEPA)

CEDARS will comply with the Multi-Ethnic Placement/Inter-Ethnic Provision (MEPA) in making placements, arranging for placements, or doing home studies for foster or adoptive families. CEDARS staff who are responsible for making placements, arranging for placements, or doing home studies will be trained upon hiring and annually thereafter regarding the requirements. MEPA was adopted in 1994 and amended in 1996. It

prohibits denial or delay of placements because of the child's or foster/adoptive parent's race, color, or national origin. It encourages transracial placements and decreases the time children wait to be adopted.

Indian Child Welfare Act (ICWA)

CEDARS Foster Care program adheres to the Federal Law of the Indian Child Welfare Act (ICWA) that was passed in 1978. ICWA was passed to protect Indian children and preserve the ties between them and their tribes. It provides funds to tribes as well as gives them exclusive jurisdiction over any Native American child who resides or is domiciled within the reservation, or who is a ward of the tribal court.

In the initial meeting with the family, the Foster Care Specialist works with the family/child to determine the possibility of any Native American heritage in their family. As part of the referral process, this question has already been raised by the DHHS Case Manager. If the family or child suspects that they may be Native American, and wishes to have confirmation, the Foster Care Specialist communicates this to the DHHS Case Manager, who is responsible for identifying tribal affiliation and determining jurisdiction. The Foster Care Specialist maintains contact with the DHHS Case Manager regarding this determination.

When caring for Indian children, the child's cultural identity and needs will be assessed through the Master Assessment process, and the team will determine the most appropriate plan for the child that involves maintaining connections between the child and his/her tribe when appropriate. The effort to preserve the family unit is always primary and is upheld to the greatest extent possible through the resources available both through the community and the tribe. The focus is always on keeping the family together, when safely able to do so. The family will also be informed of their rights under the Indian Child Welfare Act.

DHHS will only have jurisdiction of an Indian child in limited circumstances. If an Indian child is a resident of, or domiciled on a reservation, or if the child is a ward of a tribal court, the tribe has exclusive jurisdiction over the child. DHHS may remove a child in an emergency, if the child is located off the reservation. Immediately following the removal, DHHS must notify the child's tribe. For an Indian child who is a resident of or domiciled in Nebraska, not on a reservation, and who is not a ward of a tribal court, DHHS may remove the Indian child if:

- an emergency exists, defined as imminent physical danger to the Indian child, or
- if DHHS has initiated a child custody proceeding in compliance with ICWA and has received a foster care placement order from a court.

During the initial TIPS-MAPP training for new foster parents, information is provided regarding the requirements of ICWA, to ensure their compliance with being culturally sensitive to the unique needs of tribal families.

PERMANENCY FOR FOSTER YOUTH

Each foster child will have a "permanency plan" that identifies the best permanency option for the child, any alternative placement resources, and actions needed to prepare the child for the permanency plan. CEDARS and DHHS's goal is always to secure for youth a safe, nurturing, and permanent placement as quickly as possible. The child's permanency plan is developed by the court and the DHHS Case Manager, and serves as a guide toward the child's discharge from foster care. This plan may evolve over time, but will need the full cooperation and involvement of all team members and caregivers in order to achieve the permanency goals for the child.

CEDARS Foster Care Specialists work closely with DHHS Case Managers to assist with permanency planning and support foster youth in attaining physical, emotional, and legal permanence. The permanency plan also describes ongoing contact between the child and their birth parents, siblings, or other family members who may be resources for placement and permanency.

Types of Permanency

Reunification

The initial permanency goal for a child in foster care is almost always reunification, which means the child is returned to the home environment from which they were removed once it is safe for them to be reunited with their family. When reunification of the child with their biological family is the identified permanency plan, all efforts will be made to support this plan through ongoing assessment of the progress toward family goals; emotional and physical preparation with parents, foster families, and children; transfer of all legal, educational, and medical documents; assistance in accessing community-based resources; and identification of post-reunification services.

If reunification does not seem possible or in the best interest of the child, then other permanency options and placements will also be explored. When possible, every effort is made to identify other relatives or extended family members who are able to provide permanency for the child. When no suitable relative placements are identified, then adoption or guardianship can be pursued by the child's current foster family, or another permanent home identified by an agency.

Adoption or Guardianship

The next option for permanency is adoption. Adoption is when the child's caretakers assume legal parental rights and responsibilities of the child. CEDARS supports any CEDARS foster parents who are interested in pursuing adoption of their foster children throughout the adoption process. Adoption is discussed further in another section of this manual.

Guardianship is the next level of permanency and is similar to adoption except there are fewer legal responsibilities assumed by the family.

Independent Living

Finally, children may also be transitioned into independent living programs and facilities starting at age 17, in which they learn job skills and how to live on their own in an apartment provided by an agency like CEDARS.

SERVICES FOR FOSTER YOUTH

CEDARS Foster Care staff and foster parents are responsible for providing a wide variety of services to youth in foster care. CEDARS will provide a thorough assessment of each child's strengths and needs. Our task is to develop specific service plans that will enable the child to understand and cope with the stress of placement, ensure their needs are met while in foster care, and work successfully toward achieving permanency. As the primary caretakers for foster children, foster parents also have the responsibility to attend to the health,

educational, spiritual, cultural, and recreational needs of the children in their care. These needs will be different for each child and frequent re-evaluation is done to assure that the most appropriate services and supports are in place for each child.

FOSTER CHILD AND YOUTH ASSESSMENTS

CEDARS Foster Care is responsible for completing an initial and comprehensive assessment of each child that is pertinent to meeting service objectives. Assessments are comprehensive, individualized, strength-based, and culturally-responsive. These assessments are conducted to help identify resources that can increase service participation and support the achievement of agreed upon goals.

Initial Screening and Assessment

The initial assessment process begins at intake or no more than 14 days from the time of placement. During the intake process, assessment focuses on gathering identifying information and assessing for any critical or immediate service needs, emergency health needs, or imminent risk or safety concerns.

Youth in CEDARS Foster Care will be assessed at intake for current health concerns and needs using the CEDARS Medical Questionnaire form. This form allows CEDARS to collect relevant medical history for the child and his/her family, as well as any immediate health needs. The CEDARS Foster Care staff completing the initial intake will also complete the Body Check Form to identify any visible injuries or areas needing medical attention.

When a child is first removed from the home and entering out of home care, the CEDARS Foster Care Specialist will work closely with the DHHS Case Manager and foster parent to coordinate an initial health screening within 14 days of entry into care to assess for any injury or other health condition requiring immediate medical attention.

At intake, the initial sections of the CEDARS Master Assessment are also completed to identify immediate needs or safety concerns. If any specific risks or immediate safety concerns are identified through the assessment processes, additional risk assessments are completed (i.e. Self-Harm Risk Assessment, Suicide Risk Assessment, Simple Screening Instrument for Substance Abuse, Dating Violence Screening Tool), and safety plans are developed when necessary.

Comprehensive Assessment

Following the initial intake and assessment process, the CEDARS Foster Care Specialist will continue to complete a comprehensive assessment of each child within the first 21 days of service. The comprehensive youth assessment is largely facilitated through the completion of the CEDARS Master Assessment, which actively involves the child, family members, and the foster family whenever possible. CEDARS Foster Care Specialists and foster parents will contact a child's birth parents within 24 hours following placement in order to introduce themselves and learn more about the child. When possible, the family will be invited to participate in the assessment process. When this is not possible, the CEDARS Foster Care Specialist works closely with the DHHS Case Manager, whose role is to work directly with and assess the birth parents, in order to gather information about the child's birth family.

The Master Assessment gathers information in the following areas:

- Historical information regarding the youth's family, living arrangements, and placement history;

- The presence and impact of trauma on the child and their family
- The child's mental and behavioral health, and treatment history
- Identification of family relationships and dynamics, as well as the characteristics, strengths, and barriers of the child's extended family system
- The youth's and family's strengths and needs in a variety of domains, including education, employment, physical and mental health, substance use, legal, cultural, spiritual, social, and recreational
- Identification of the child's informal support network and community connections so that steps can be taken to maintain and strengthen these relationships.

The assessment process also includes specialized assessment of the following areas:

Medical Assessment

The CEDARS Medical Consent Form is used to collect information pertaining to the medical history and current health status of the child and his/her family, assess any immediate health needs, and identify the child's primary health care providers. Any youth will need to receive a full physical exam within 14 days; however, this can be waived if documentation from a medical provider indicates the youth has been seen in the last year by a qualified health professional. Youth will need a dental and/ or vision exam completed within the first 30 days of placement.

Foster parents, with the support of the assigned Foster Care Specialist, are responsible for ensuring routine health check-ups according to well-child guidelines, as well as initial and ongoing appointments for non-emergency medical, dental, and vision needs. *(Refer to Physical and Mental Healthcare section of the manual for more information on caring for a foster youth's medical, dental, and vision needs.)* For continuity of care, the child is taken to his/her regular physician whenever possible. It is the responsibility of foster parents to provide the Foster Care Specialist with documentation of medical visits to be maintained in the youth's file. Immunization records will also be maintained in the youth's CEDARS file and must be current and up to date.

Developmental Assessment

For children five years and younger, an age-appropriate developmental screening will be completed as part of the initial master assessment process, using the Ages and Stages Questionnaire (ASQ). The ASQ is used to screen for child development in areas such as communication, gross motor and fine motor skills, problem solving, and personal-social development. The tool is used to identify those children who appear to be developing typically or who are in need of further evaluation and/or require a referral to the Early Development Network for early intervention services. Ongoing assessment of child development will occur throughout the first five years of a foster child's life, according to the established timelines of the ASQ tool.

Independent Living Assessment

CEDARS Foster Care and Adoption Services are dedicated to helping prepare youth for independent living. The goal is to evaluate each child for knowledge and skills appropriate for their age that will lead to development of the skills necessary in adulthood. CEDARS uses the Ansell-Casey Life Skills Assessment (ACLSA) to evaluate skills and identify needs. Every child 14 years and older will complete an ACLSA as part of the comprehensive master assessment process. The results from the assessment will be used to develop independent living goals as part of the youth's service plan within the first 30 days of care. The individualized goals and objectives will identify the skills needed and steps for acquiring them in order to prepare the youth for eventual independent living. A follow-up assessment will be completed annually to determine progress.

Foster parents, with the support of the Foster Care Specialist, are responsible for contributing to the development of necessary independent living skills for the foster youth in their care.

Ongoing Assessment

CEDARS takes the findings from all assessments into consideration when developing the goals and outcomes for services for the child and family. Additional assessments are completed on an ongoing basis as needs or circumstances change, and all assessment protocols that are included as a part of the master assessment are redone at least annually to provide updated information and inform any changes needed to the service plan.

SERVICE PLAN AND DISCHARGE PLAN

A service plan will be developed for each foster child to guide service delivery. The service plan builds on the assessment process and takes into account the child's and his/her biological family's strengths, resources, and unique needs that impact safety, permanency, and well-being. This information is used to establish goals and desired outcomes, as well as the most appropriate strategies and interventions necessary to attain them. If unmet needs or areas of concern are identified in any of the assessment domains, the service plan will include goals and objectives for strengthening that particular domain. Goals are set in the following areas, as appropriate:

- Living arrangement, including placement stability
- Mental and behavioral health
- Family interactions and relationships, including how to maintain and strengthen these relationships while the child is in foster care
- Parenting issues for any pregnant or parenting youth in care
- Independent living goals and skills needed for any youth 14 years and older
- Education
- Employment
- Physical health
- Crisis, safety, and trauma
- Legal issues, including any child welfare goals, the permanency plan, and the legal timeframes for achieving child permanence
- Cultural and spiritual well-being
- Social and recreational needs

The development of the service plan requires the full participation of the child, their birth families and/or other supportive individuals of their choosing when possible, and the foster family. The initial service plan is completed within 30 days and includes the service goals, objectives, measurable outcomes, timeframes for achievement, services and supports to be provided, and persons responsible. The youth, parents, and family teams sign the service plan whenever possible to indicate their participation in the development of and agreement with the identified goals and plan for services.

As the primary caregiver during a child's involvement with foster care, the foster parent is expected to consistently adhere to the service plan and actively contribute toward the achievement of a youth's goals and objectives. CEDARS foster parents, with the support of the assigned Foster Care Specialist, take primary responsibility for teaching skills, motivating the youth in achieving their goals, recognizing and helping remove barriers, and evaluating the youth's progress.

Foster Care Specialists will conduct face-to-face meetings at least once a month in the home with the foster parents and the child, during which time they will discuss specific areas of progress and/or concern, and provide

guidance for assisting the youth in the achievement of their goals. The frequency of visits varies according to the needs of the family and the youth. When a youth first enters care or upon placement, visits in the home may be more frequent until placement is secure and a service plan is well established.

All members of the team, including the child, Foster Care Specialist, foster family, DHSS Case Manager, and birth parents when possible, will regularly review the service plan and progress toward established goals, and will set new goals or make adjustments to the plan when necessary. At a minimum, the service plan will be reviewed fully on a quarterly basis, with progress, barriers, and any necessary revisions documented. The Foster Care Specialist and family teams will sign the updated plans. Service plans will be reviewed and updated more frequently as youth and family circumstances warrant.

The Foster Care Specialist will also review the case at least quarterly, or more frequently if needed, with a supervisor, peer team, and CEDARS therapist to assess service plan implementation, progress toward goals, and either the continued appropriateness of the goals and strategies or other recommendations. The case consultation process will also take into account the trauma history and needs of the youth, ways to facilitate healing, and methods for increasing positive relationships.

Discharge Planning and Case Closing

CEDARS Foster Care Specialists will work closely with foster youth from the beginning of services to support them in achieving permanency and to plan for case closing. Case closing is a clearly defined process that includes all relevant team members and assigned responsibilities. At the time of case closing, the CEDARS Foster Care Specialist will conduct a formal discharge summary including an evaluation and assessment of unmet needs. This summary will be provided to the DHHS Case Manager, in writing, upon case closure. Other collaborating service providers will also be informed of case closure as appropriate.

If case closure occurs following finalization of adoption through CEDARS Foster Care and Adoption Services, then adoptive families will work with CEDARS to develop an aftercare plan and be informed of post-adoption and aftercare services. If the case is closed due to a child's reunification with their family or for any other reason, it is the responsibility of DHHS to provide aftercare and follow-up.

CARING FOR FOSTER CHILDREN

Throughout the duration of a youth's stay in foster care, the CEDARS foster parents and Foster Care Specialist are responsible for ensuring that the youth receives appropriate services to promote their development and well-being. Services and supports for foster youth should include the areas addressed below, as applicable.

Nurturing Home Environment

Foster parents are responsible for providing nurturing care and a healthy home environment for foster youth that includes: relationships that promote positive attachment; nutritious meals and snacks; materials to support the youth's development; clean, seasonal clothing; developmentally appropriate boundaries, supervision, and expectations; a structured but flexible daily schedule and routines; and regular access to contact with workers and approved family and friends.

Orientation to the Foster Home

All foster youth must receive a developmentally appropriate orientation to CEDARS Foster Care and the foster home following placement. Foster children should be introduced to a new foster family and home in a manner that helps the child feel safe and welcomed. As part of their orientation to the home, foster children will be introduced to all family members and pets, informed of the rules and expectations of the home, and shown their own space for personalizing and storing their belongings.

Foster parents will be provided with a Foster Care Orientation Checklist at the time of placement in order to guide the orientation process throughout the first month and help facilitate a smooth transition for the foster child into the home. The Orientation Checklist identifies what information and supports must be provided to the youth within the first day, first 72 hours, first two weeks, and first month of placement. CEDARS staff and/or foster parents must date and initial each orientation task as they are completed. Once completed, the Orientation Checklist is then signed by the client, foster parent, and CEDARS staff, and returned to the client file within the first month of placement.

Supervision of Youth

CEDARS foster parents are responsible to provide/arrange for appropriate supervision of youth at all times. This includes after school hours, non-school days, sick days and during school suspensions.

Transportation

CEDARS foster parents are expected to provide all transportation for foster youth, just as parents would do for their own child. This includes, but is not limited to, transportation to and from school and educational meetings, therapy or counseling sessions, medical appointments and transportation to recreational activities, and visits with biological parents if needed. CEDARS believes that by the foster parent providing transportation for the child, it helps the foster child feel as normal as possible and to have a sense of security and comfort.

If the transportation is outside of a 25 mile radius CEDARS and the CFS will work with the foster parent to develop a plan for transportation. CEDARS staff is able to assist with transportation as needed, but is unable to provide daily school to and from transportation.

Basic and Daily Needs

The foster parent is responsible for providing each youth in their care with a nourishing, palatable, well-balanced diet that meets the daily nutritional, special dietary needs of each youth and ensure that any medically prescribed dietary needs are also met. The foster parent is also responsible for providing at least three (3) daily meals at regular times, comparable to normal mealtimes in the community, and for providing an afternoon and evening snack for each child in their care.

Foster parents should also expect to provide for any other daily needs of the youth placed in their home. These needs may include car seats, diapers, formula, toilet training seat, etc.

Personal Appearance and Hygiene

When it comes to a foster child's personal appearance it is important to respect the cultural and ethnic customs that may influence a child's appearance. **Foster parents are not legal guardians and should always consult with the youth's DHHS Case Manager and CEDARS Foster Care Specialist before making any changes to the child's appearance (i.e., hair cutting, ear piercing, tattoos etc.)**

Some children have not had much assistance or education pertaining to personal hygiene. One of the teaching functions of foster parents is to help the children in their care learn the skills necessary to maintain a clean, well-groomed appearance. This will include brushing their teeth morning and night, showering and shampooing their hair regularly, and maintaining clean and well-fitted clothing for them to wear.

It is also the responsibility of the foster parent to provide the youth in their care with personal grooming supplies. This shall include, but is not limited to:

- Soap
- Shampoo
- Deodorant
- Feminine hygiene products
- Toothpaste
- Toothbrush
- Comb

Clothing

Foster parents are responsible for ensuring that the youth in their care have adequate clothing. A child should have clothing appropriate for various activities, including play, school, and special occasions.

Often a child coming into foster care may have a very limited wardrobe. The foster parents are required to make an inventory of the clothing using the “Belongings List” provided by CEDARS at the time of intake, and inform the Foster Care Specialist of any clothing purchases the foster parent makes on behalf of the child. The Belongings List must be completed whenever a foster youth enters a home and must be dated and signed by the foster parent, the youth, and the Foster Care Specialist. The Belongings List must also be updated with a detailed inventory of all the youth’s clothing, with dates and amounts of clothing purchases, throughout their placement in a foster home. When the youth leaves a home, a final inventory needs to be completed.

If the foster parent inspects the clothing coming into the home with a child and finds it is worn or outgrown, they should not dispose of it. Instead, they should request that it be returned to the bio-parents through the Foster Care Specialist. If it cannot be returned to the parents, every effort should be made to store it for the child until he/she leaves the home. **Keep in mind that all clothing/belongings, whether purchased or donated, belong to the child and must go with that child when leaving a foster home.**

It can be the child’s responsibility at an appropriate age to do their own laundry and put their clothes away. Foster parents’ help in teaching them the skills they need and ensuring that they are dressed in clothes that are clean and appropriate for the occasion, will be helpful in preparing foster youth for adulthood.

The recommended minimum allotment of clothing for a child includes: 7 pairs of socks; 7 pairs of undergarments; 3 bras (when applicable); 10 seasonal shirts; 10 seasonal pants/shorts; 2 pairs of shoes; 1 seasonal coat; and other items deemed necessary or desirable by CEDARS parents or youth. CEDARS may be able to help supply the youth with suitable clothing through donations received by the organization or by utilizing the Foster Care Closet. Your Foster Care Specialist can give you the information to the Foster Care Closet and you can schedule an appointment to get clothing. You can also contact the Foster Care Closet at 402-853-9990.

Cultural, Spiritual, and Religious Involvement

Honoring the cultural, spiritual and religious traditions of youth and families is of primary importance to CEDARS. Church attendance may be invited but must never be required of foster youth. If a youth has a particular religious preference and wishes to attend services at a place of his/her choosing, the foster parent(s) and/or Foster Care Specialist will provide opportunities for this to be arranged. CEDARS supports the youth's involvement in spiritual and religious practices with the biological family whenever possible. **Under no circumstance should a child be baptized into a foster family's church.**

Cultural competence is also essential and involves the open discussion of cultural traditions and practices. Foster parents should welcome the inclusion of any cultural traditions into the foster home, and are expected to support and encourage the cultural identity of each foster child. Children should be provided with opportunities to participate in ethnic or cultural activities consistent with their own cultural identity.

School

CEDARS Foster Care encourages stability in a foster youth's home school whenever possible. Unless agreed upon by the youth's team, foster youth will remain in the school they were attending immediately prior to their foster care placement whenever the school is within a 25-mile radius of the foster home.

CEDARS Foster Care Specialists and foster parents are expected to collaborate with the child's teachers and school personnel to support the child's educational needs. Foster parents are also expected to assist the youth placed in their home with homework and will provide any necessary school supplies. It's important for caregivers to understand the impact that trauma can have on a child's ability to learn, set realistic expectations, and refrain from placing undue pressure on a child, while at the same time providing appropriate support and encouragement for the child to reach their full academic potential.

The DHHS Case Manager may make arrangements with the foster parents to function as a guardian on behalf of the child; however, the child's parent(s) maintain educational rights. Therefore, it is important to work closely with the biological parents and include them in planning for the child's needs, as they will need to finalize any educational decisions. Foster parents are encouraged to be actively engaged in their foster youth's education and school activities, including participation in school functions, sporting events, and parent-teacher conferences when appropriate. The biological parents should also be kept informed of school meetings, parent-teacher conferences, or other school events that involve the child.

Every foster child is eligible for free school lunches. The child's eligibility is automatic and the foster parents' income is not a consideration for the free lunch program; however, the foster parents must complete an application form in order for the child to receive free lunches.

Foster parents should keep the Foster Care Specialist informed of the child's progress or any concerns requiring special attention. If foster parents are concerned the child may have special educational needs that are not being addressed, they should contact the Foster Care Specialist and the child's assigned DHHS Case Manager for advocacy services. Below is the CEDARS policy and procedure on Education Services.

Day Care and Early Childhood Development

If childcare is necessary, the foster parent should contact the assigned Foster Care Specialist for assistance with making childcare arrangements. The foster parent must use a childcare provider who accepts state subsidized

Title XX payment and prior approval from the DHHS Case Manager is required when selecting or using a childcare provider. Childcare will only be authorized for the hours that the foster parent is working.

Social and Recreational Activities

Youth are encouraged to participate in developmentally appropriate activities of their choosing that promote their social development and support the child's interests and strengths. Activities might include team sports, after-school programs, hobbies, clubs, gym membership, or other activities within the community. Foster Care Specialists will work with foster parents to help coordinate and make arrangements for a youth's participation in activities, as well as inform foster parents of opportunities within the community for foster children to be involved in.

Developing and Maintaining Connections

CEDARS Foster Care promotes the healthy social and emotional development and positive support systems for all foster children by encouraging connections for each youth in care with family members, friends and the youth's community. The following guidelines help ensure that children in foster care are provided with ongoing, meaningful contact with positive connections:

- Whenever possible, youth are placed with relatives, together in the same home with their siblings, and/or in a home within close proximity to their home environment in an effort to maintain pre-existing relationships.
- The assessment process explores the social support networks and important relationships in each child's life, and children are supported in sustaining these relationships throughout their time in foster care. Every effort is made to keep foster children in their same home school, and allow for continued involvement with any teams or other activities they had previously been a part of.
- Children are assisted in further developing their support system by building relationships with people of their choosing, including relatives, peers, or other members of the community. Community connections can also be explored within the context of cultural, spiritual, educational, social, and recreational networks or groups.

Foster parents play an important role in helping to facilitate important community connections, as well as sustaining a child's prior relationships.

CEDARS Youth Leadership

CEDARS offers a Youth Action Committee/Teen Leadership group for any CEDARS-involved teen youth. This group provides opportunities to increase youth involvement, develop youth leaders, and ensure a voice at CEDARS for youth involved in out-of-home and juvenile justice programs. The group meets monthly to eat dinner and participate in various activities to strengthen their leadership skills and build relationships. Activities include mock job interviews, college tours, celebrating successes, building community partnerships, and planning engagement events. CEDARS Foster Care Specialists can provide foster youth and families with more information and how to get involved.

Travel and Vacation

CEDARS encourages the foster child's participation in all aspects of a foster family's life, including vacations, trips, and outings when possible. Foster parents must let the child's assigned DHHS Case Manager know in

advance when they are planning a vacation because approval is needed for a foster child to travel out of the county and state. Any out of state trips will require an authorization through the DHHS Case Manager. Foster parents should be sure to take the child's Medicaid Card and a "Travel Letter" verifying the child is in foster care and Nebraska Medicaid is to be billed. The assigned DHHS Case Manager will furnish such a letter. If there is a medical emergency out of state, these items will be presented to the doctor or hospital.

If the child is not going with the foster family on vacation, CEDARS must plan for the child's care during their absence. Foster parents should give their Foster Care Specialist at least 2 weeks' notice so that appropriate respite can be identified.

Independent Living

CEDARS Foster Care is dedicated to helping prepare youth for independent living. Every child 14 years and older is assisted in completing the Ansell-Casey Life Skills Assessment within 30 days of entry into care and annually thereafter to assess their independent living skills and set goals accordingly. The Foster Care Specialist works with the youth and foster parents to promote children's self-sufficiency and readiness to assume responsibility for the following, as appropriate: activities of daily living; obtaining housing; obtaining and maintaining employment; managing money; accessing community resources; navigating public assistance; effective conflict resolution and interpersonal skills. Foster parents will be provided with a list of resources that may be utilized to help educate foster youth and facilitate skill acquisition in these areas.

Allowance and Child's Money

An allowance should be provided for children who can accept this responsibility. Foster parents are asked to be as consistent with foster children as they are with their own children. Learning to handle money on their own is important for the future growth and responsibility of foster children.

CEDARS foster parents should develop a separate system for maintaining the money designated or belonging to a CEDARS youth. A separate saving account is recommended. Interest earned on a child's money must be applied to a child's account. When a child leaves a home, money must be returned to the child.

Jobs and Earning Money

Young people are often interested in working and earning money to supplement allowances. Foster youth may want to find part time work. A paying job, which does not interfere with schoolwork, can help the teenager learn vocational skills. The assigned DHHS Case Manager should also be involved in these discussions, especially with an older foster teenager who is considering future job choices.

Driver's License, Car, and Insurance

When a foster child reaches the legal age for driving, the DHHS Case Manager is the only individual who can sign the application for a permit for a driver's license. The foster child is not to obtain a driver's license or purchase a vehicle without first obtaining permission from their DHHS Case Manager. Foster children are not to drive the foster parent's car unless this is cleared by the assigned DHHS Case Manager. The agency does not cover the additional expense of insurance coverage.

Transition Planning and Supporting Youth "Aging Out"

Foster youth who are preparing to age out of the foster care system are supported in their transition to adulthood through planning and preparation. The CEDARS Foster Care Specialist, DHHS Case Manager, foster

parents, youth, and biological parents, when appropriate, are all involved in transition planning for the youth, which takes into account: the youth's strengths; informal and formal supports and relationships with caring adults; and the youth's safety, well-being, and permanency. As youth prepare for adulthood, they will work with supportive caregivers to explore: their relationships with others; readiness for their families' participation in their lives; housing options; educational and/or vocational options and supports; access to continued healthcare and other support services. Specific plans for each of these areas will be documented in their service plan at least six months prior to them aging out of the system.

CEDARS Foster Care Specialists will work with DHHS Case Managers to ensure that youth transitioning into adulthood and aging out of the child welfare system will be provided with the following necessary documents and information, as applicable:

- Identification cards, including social security card and driver's license
- Resume
- Original copy of the youth's birth certificate
- Bank account documents
- Documentation of immigration or refugee history or status
- Documentation of any tribal eligibility or membership
- A life book containing personal history and photos
- A list of known relatives with contact information
- Previous placement information
- Educational records

Shared Living Agreements

CEDARS Foster Care provides foster care services for youth through the age of 18. When a foster youth turns 19 and becomes an adult, they will age out of the Nebraska child welfare system and be discharged from CEDARS Foster Care. In the event that a youth and foster family would like for the youth to continue to reside in the home, CEDARS will support the youth and family in developing a shared living agreement that identifies the mutually agreed upon expectations and new roles of the living arrangement. The agreement will support the youth's needs while also promoting independence as the youth transitions to adulthood and ages out of formal care.

Physical and Mental Healthcare

Youth in CEDARS Foster Care program will be assessed at intake for current physical and mental health concerns and needs. To ensure the youth's health needs are met within required timelines, the Foster Care Specialist will also work with the foster family at intake to schedule any initial healthcare appointments. Foster parents, with the support of the assigned Foster Care Specialist, are responsible for ensuring routine healthcare services for the youth in their home, including initial and ongoing appointments for medical, dental, vision, and mental health, as appropriate. For continuity of care, the child is taken to his/her regular health care providers whenever possible. Foster parents are also encouraged to involve the biological parents in these appointments when appropriate. It is very important for the foster parent to keep a record of all healthcare services received by the child, as well as ***all prescribed medications***, and provide the CEDARS Foster Care Specialist with documentation of the child's health care needs and visits.

Medical Care

Any youth entering out of home care must receive an initial health exam within the first 72 hours of placement. Foster parents are provided with a list of health care resources and contact information for

providers that can be quickly and easily accessed (i.e. Health 360, Bluestem Health) when the child's primary health care physician is not available within that timeframe. In the event that the youth is unable to receive a health exam within 72 hours of entering foster care, they must have a qualified health care professional screen for any emergency medical needs within 72 hours, and then receive a comprehensive health exam within the first 14 days of care.

For any youth entering foster care from a previous out of home placement, they must receive a health exam within the first 14 days of placement or obtain medical records from a health exam completed within the last year, or according to well child guidelines.

For all foster youth, foster parents are responsible for ensuring ongoing health check-ups annually or according to well-child guidelines, as well medical care for any health related concerns. Foster parents are trusted to handle minor illnesses and accidents as they would for their own children. For major illnesses and emergencies, foster parents should call the doctor first and then notify the DHHS Case Manager. The DHHS Case Manager must sign approval for any surgical procedures.

DHHS/ Medicaid pays for all medical expenses. **FOSTER PARENTS SHOULD NOT PAY ANY MEDICAL BILLS OR PRESCRIPTION COSTS, AS THEY CANNOT BE REIMBURSED.** When the doctor provides a prescription to be filled, the foster parent should take it to the pharmacy with the child's Medicaid card. Costs for over-the-counter drugs cannot be reimbursed.

When traveling out of state, the foster parent must take the child's Medicaid Card and a "To Whom it May Concern" letter verifying the child is in foster care and Nebraska Medicaid is to be billed. The child's assigned DHHS Case Manager will provide foster parents with such a letter if needed. In the event of a medical emergency out of state, the foster parents must present these items to the treating doctor or hospital.

Dental Care

All foster children one year and older should have a dental exam within 30 days of placement in foster care (or documentation of a dental exam within the previous six months of out of home care), as well as routine, ongoing dental exams every six-months. Medicaid covers all dental costs except those for cosmetic care. For example, in most instances braces would not be covered. However, for certain medical conditions, such as jaw alignment issues, braces may be covered.

Eye Care

All foster children who are school-age and older should have an eye exam within the first 30 days of placement in out of home care, and annual ongoing eye care exams. Medicaid covers prescription eyeglasses. If a child breaks their eyeglasses, they should be replaced. Discuss these needs with the assigned DHHS Case Manager.

Mental Health Services

All foster youth participate in a comprehensive assessment within the first 21 days of care that includes an assessment of mental and behavioral health needs, as well as age-appropriate screenings for child development, and drug and alcohol use. Foster Care Specialists and foster parents will ensure that foster youth are connected to appropriate mental health or therapeutic services when needs are identified. For children already participating in therapeutic services, every effort will be made for those services to continue with the same provider. If a child has unmet mental health needs, a referral can be made to a CEDARS therapist or external mental health provider in the community to provide appropriate treatment services. Foster parents are

expected to support the youth's participation in mental health services, provide transportation to appointments, participate in counseling sessions when appropriate, maintain regular and open communication with the child's therapist, and implement any recommendations or strategies suggested by the therapist to support the youth's mental health needs and progress in the home.

Medications

Each foster parent shall ensure that all prescribed and over the counter medication is stored in a **locked area** not readily accessible to youth, according to the following guidelines:

- All prescribed medication shall be stored in the original container labeled by the pharmacy.
- The label shall include the name of the youth, the name of the medication, the name of the prescribing physician, the date the prescription was filled, instructions for usage, and special instructions or precautions, and the name and telephone number of the pharmacy.
- All over the counter medication shall be stored in the original container.
- All unused medication will be destroyed by returning them to the pharmacist for destruction. Destruction of medication needs to be documented on the Medication Sheet.

The **EIGHT RIGHTS** of proper administration of medication will be observed by foster parents and respite providers any time they are administering medications. These **EIGHT RIGHTS** are:

1. the **Right Drug** must be administered
2. to the **Right Person**
3. at the **Right Time**
4. in the **Right Amount**
5. using the **Right Dosage Form**
6. and the **Right Route of Administration**
7. to bring about a **Right (or desired) Response**
8. and a **Right Record** must be made of the administration.

The Foster Parent(s) needs to be knowledgeable of all medication instructions on the container label and will document on the Medication Sheet the youth's name, youth's allergies to medication (if known), the name of the medication given, the prescribed medication schedule, the route of administration, any youth refusals to consume the medication, the name of the person dispensing the medication, and the prescribed dosage. Prior to dispensing the medication, the Foster Parent should check the medication sheet. This insures that the youth has not already been given the dosage. The medication sheet is kept in the youth's file and must be filled out with complete information. This includes all prescription and non-prescription medications. PRN (as needed), non-prescription or over the counter, medications must have the time(s) recorded as to administration and all PRN medication must be approved by the youth's physician preferably in written form (on a prescription sheet).

Foster Parents should also supervise youth taking medications. It is not uncommon for some youth to "appear" to take the medication and spit it out later. If you have a youth with a history of this behavior, it may be appropriate for you to have the child open his/her mouth to ensure you that the medication was swallowed appropriately.

A Home Visit/Respite Visit Medication Sheet will accompany the youth on all visits where medication administration will occur. This sheet must be filled out and kept with the youth's medication records. The Foster Parent will indicate on the youth's monthly Medication Sheet that dosages were sent home or with the respite provider.

All CEDARS Foster Parents must be trained in medication administration and kept current on this training.

CEDARS recognizes that a number of treatment modalities and options need to be considered in the treatment of emotionally and behaviorally challenged children and adolescents. The use of psychotropic medication is, at times, an important additional therapeutic intervention that, **when properly used**, can be the difference between success and failure in dealing with the complex needs of this population. At the same time, it is also recognized that the use of psychotropic medication is associated with risks that may be far more significant and potentially irreversible than other therapeutic interventions at our disposal.

Health and Sex Education

CEDARS Foster Care Specialists will work with foster parents and youth to ensure that youth in care receive developmentally appropriate health support and education, including but not limited to the following areas as appropriate: safe and healthy relationships; sexual development; family planning and effective parenting; and prevention and treatment of STIs, HIV, and AIDS. The youth's case record should include documentation of the support and education provided to youth in these and other health related areas.

CEDARS believes that children should only receive sex education that is appropriate to their age in order to support healthy development and interpersonal relationships, while reducing the likelihood of sexual activity and preventing unwanted pregnancy and sexually transmitted infections. Foster parents, in their role as parents and teachers, are expected to provide the foundation for sex education through discussion and skill teaching. CEDARS foster parents should educate children at home through individual discussion and by providing age-appropriate reading literature and other resources. Foster parents should also support a youth's participation in sex education outside of the home, including those sponsored by school, agencies, and/or churches. Such activities should meet the approval of the Foster Care Specialist and assigned DHHS Case Manager and should provide unbiased counseling to a youth.

Sexual Activity and Pregnancy

If CEDARS foster parents suspect a youth is sexually active, the assigned Foster Care Specialist should be notified. Education around pregnancy or pregnancy prevention will be arranged with local agencies by CEDARS foster parents and the Foster Care Specialist. All pregnancy testing and testing for sexually transmitted infections must be approved with the DHHS Case Manager.

If a youth in foster care becomes pregnant, CEDARS foster parents and the assigned DHHS Case Manager should ensure proper pre-natal care is provided, counseling about options with a qualified professional is arranged, and the young person is emotionally supported.

Health Records

The child's case record should include evidence of all health services provided. The record should also include documentation of any age-appropriate instruction regarding pregnancy prevention, HIV/AIDS prevention, and general information about the prevention and treatment of disease. Immunization records will also be maintained in the youth's CEDARS file and must be current and up to date.

A written summary of each child and family's known medical history, including procedures, illness or injury, and mental health concerns will be maintained securely in the client's record. This information will be shared with health providers, foster parents, and foster children as appropriate. Prior to discharge from services, children and/or their legal guardian, as appropriate, will be provided with the child's health records and medication.

Youth who are being discharged from foster care services will also be assisted by the Foster Care Specialist and/or DHHS Case Manager in obtaining health insurance and any needed healthcare services.

Behavior Support and Discipline Policy

All CEDARS foster parents are expected to develop the skills and learn techniques to approach children in positive, relationship-enhancing ways. The following procedures are to be adhered to completely and consistently. Failure to comply with these regulations places a foster parent in jeopardy of dismissal from the program and invites personal liability for allegations of child abuse.

All children, regardless of age, need limits set for them by parental figures. Most children and adolescents occasionally behave in ways that are unacceptable and undesirable. More often than not, children who have been removed from their own homes and placed in foster care are children who have been too harshly or inconsistently punished by their own parents.

Discipline Policy

The following policies with regards to discipline must be adhered to at all times.

1. Foster children must be directed with techniques that stress praise and encouragement.
2. Foster children may **not** be subjected to verbal abuse, derogatory remarks or threats of removal from foster home.
3. Foster families must remember to teach children, not punish them.
4. The following forms of punishment are **prohibited**:
 - Ridicule, verbal abuse or threats, or derogatory or humiliating remarks;
 - Physical punishment inflicted upon the body;
 - Punishment for bedwetting or actions related to toilet training;
 - Delegation of discipline to another child, group of children or untrained person;
 - Cruel, severe, or humiliating action, such as washing mouth with soap;
 - Taping or obstructing child's mouth;
 - Placing painful or unpleasant tasting or hot substances in the mouth, lips, etc.;
 - Placing a child in dark areas;
 - Humiliation in public;
 - Physical punishment inflicted in any manner, such as hitting, pinching, pulling hair, slapping, kicking, twisting the arms, forced fixed body positions, etc.;
 - Withholding implementation of the case plan (CFS-6010), or any denial of basic rights;
 - Locked isolation of any kind;
 - Denial of food, water, shelter, sufficient sleep, clothing or bedding;
 - Denial of elements of the individual service plan;
 - Denial of communication or family time visitation with the family;
 - Assignment of physically strenuous exercise or work solely as punishment;
 - Requiring a child to remain silent for long periods of time;
 - Group punishment for the misbehavior of an individual child;
5. No method of restraint, isolation, security or physical barriers can be used to prohibit a child's leaving. Locks may be used only as a means of external security to keep persons out or to deny access to a certain area of the home.

When a situation does arise requiring discipline of a foster child, CEDARS recommends alternatives such as:

- Removing the child from the stressful, problem-producing situation.

- Giving a child a “time-out” until he/she has calmed down. A reasonable time-out rule of thumb is one minute for each year of age.
- Having the child take a break by sitting in a “safe spot” or “thinking chair” for a few minutes.
- Taking away certain privileges for a realistic period of time. It becomes ineffective if you take away the TV or a bicycle for a month, for example.
- Avoid being drawn into heated arguments and debates. It is sometimes better for the foster parent to remove themselves from the situation and tell the child they refuse to argue but would be willing to discuss the matter later when everyone is calm.

The intent of this policy is to find better, more positive methods to help foster children learn to cope more effectively within a family setting and in society in general.

If foster parents find themselves dealing with any unusual or concerning behavior on the part of the child, they should contact their Foster Care Specialist. Our staff can be resources, but cannot help if they are unaware of the problems. Calling the Foster Care Specialist does not indicate failure on the part of the foster parent. We all work as a team to achieve what is best for the child. The Foster Care Specialist may call in the child’s therapist or a CEDARS therapist for additional advice or assistance in developing a behavior management plan for the child.

A youth's individualized plan will address the skills needed and what types of consequences may be appropriate for the youth. Foster Parent training in crisis intervention should provide specific skills and techniques for working with youth who are in crisis. In the event a youth is acting out and the foster parent needs immediate assistance, they can contact their Foster Care Specialist or the on-call phone number (560-6571). All behavioral issues and discipline strategies used involving program youth must be documented in the Daily Progress Notes.

It is critical that CEDARS foster parents never use corporal punishment with CEDARS youth. Corporal punishment is defined as physical contact for the purpose of retribution. To permit corporal punishment reinforces the child’s belief that physical violence, even at a limited level, is acceptable. Thus, by law and by CEDARS standards, physical punishment is NOT an allowed discipline strategy. This means that foster parents may **never** hit, slap, spank, kick, shake, bite, etc. any foster child. Any such physical punishment by foster parents must be reported to CEDARS immediately.

KEEPING CHILDREN SAFE

A primary responsibility of all CEDARS staff and foster parents is to ensure the safety of the youth and children in care at all times. All foster homes must meet and maintain a high level of safety to prevent harm and minimize risks, and must respond to any crisis or emergencies in a way that promotes and restores safety

FOSTER HOME SAFETY

As is the case with all homes where youth reside, foster parents are responsible for providing a safe environment at all times. The licensing process addresses basic safety issues in the physical, home environment. Foster parents should also be aware of the availability or access that youth may have to their keys to motor

vehicles, locked firearm cabinets, storage areas for valuables, prescription drugs, alcohol, and computer and internet use. These must be kept secure and if possible, inaccessible to youth in the program.

The following practices and procedures must be observed at all times:

- All medications, poisonous chemicals and cleaning supplies must be kept in a locked place, which is inaccessible to the children. All combustible items must be stored away from sources of heat.
- All unloaded firearms and ammunition must be stored **separately** in locked cabinets, and must never be accessible to the children.
- Every foster home must own and maintain:
 - Smoke alarms in each sleeping area, which are fully operational. Batteries must be replaced every six months.
 - Foster Care residences shall have 1 (one) fire extinguisher located in the kitchen. It is recommended, but not required, that additional fire extinguishers be located on each level of the residence.
- Foster Parents must have a posted fire evacuation plan and will share the plan with all children entering the home. In order to ensure everyone understands the procedure, frequent fire drills must be conducted.
- Each Foster Care residence shall maintain first aid supplies located for easy access. Foster Parents should inventory supplies annually. Foster Parents will replenish supplies on an as needed basis.

The first aid kit shall contain the following items:

- Alcohol or antiseptic wound wipes
- Ace bandage
- Antibiotic ointment
- Assorted adhesive bandages
- Calamine lotion or hydrocortisone cream
- Cotton balls and swabs
- Hand Sanitizing wet wipes
- Instant cold pack
- Scissors
- Tweezers
- Thermometer
- All fireplaces, space heaters, and hot surfaces must be shielded against accidental contact and secured to the wall, floor or ceiling.
- Pets in the home must be vaccinated and their vaccinations must be kept up to date. Other pets such as turtles, that often carry salmonella, need to be maintained in ways that prevent the possible transference of disease. The keeping of any pet that is considered dangerous (i.e. poisonous or vicious and wild animals like raccoons, squirrels, feral cats, etc) is highly discouraged. Where it's required, pets must also be licensed.
- Know and consistently practice universal health precautions with regard to caring for children in placement.
- Each Foster Home shall have a designated tornado safety plan. In order to ensure everyone understands the procedure, frequent tornado drills must be conducted.
- CEDARS recommends homes with swimming pools need to have fences with gates around them, and lifesaving equipment readily available. Youth should be given proper instructions regarding water safety. Never allow youth to be unsupervised in a pool or water area, ponds, lakes, etc.
- Flammable materials, such as matches or lighters must not be accessible to youth.

- Internet safety is an area of concern for foster children as sexual predators look for children who need a friend or to feel special to someone. Please ask your Foster Care Specialist for information on internet safety.
- If the Foster Parents keep alcohol in their home, they need to have a method of determining usage, (watch for substitution of water in liquor bottles) or have the alcohol locked so that youth cannot get into it.

CEDARS Foster Care staff are always aware of safety issues in our foster homes. Every year there is a complete and thorough review of each foster home's status and safety.

Room Searches

If there is reason to believe that program youth are in possession of contraband, cigarettes, drugs, alcohol, or firearms, then there is probable cause to do a room search. Foster children are notified upon admission to the program that their room may be searched at any time and under what circumstances this may occur. Room searches are done preferably when the youth is not at home to avoid confrontations and distress for the youth.

When conducting a room search, foster parents should thoroughly look through clothing pockets, under mattresses, in light fixtures, and anywhere else in the room that might be a good hiding place. Hollowed out books, statues and boxes are also popular hiding places. Contact the assigned DHHS Case Manager if any contraband or illegal items are found in the youth's possession. If drugs or firearms are found, the police as well as the DHHS Case Manager should be notified as soon as possible.

DRUGS AND ALCOHOL

CEDARS is opposed to drug and alcohol use and experimentation by youth. It is the goal of the program to prevent substance abuse through ongoing education and to provide the necessary resources to rehabilitate youth who currently abuse substances. Therefore, abuse of alcohol or other drugs by foster parents is unacceptable because of what it teaches youth. Such abuse shall be considered sufficient grounds for termination.

Foster parents should observe and be alert to unusual behaviors that may indicate that a youth has used drugs or alcohol. These include:

- Rapid personality changes (laughing, crying inappropriately)
- Decline in academic performance
- Lack of energy, motivation
- Lots of anonymous phone calls
- Unwilling to discuss friends, where they are going or with whom
- Taking money, missing money
- Drugs found in bedroom, house, car
- Drug paraphernalia (pipes, papers, empty capsules, pills)

Urinalysis

The Foster Care Specialists and Foster Parents do **not** have the authority to order urine testing on program youth for drug screening. If a youth is on probation he or she may be court ordered to participate in

drug/alcohol screenings as a part of their probation order. If this occurs, the necessary information will be provided so that this order is followed and the Foster Care Specialist can assist in the compliance.

TRANSPORTATION SAFETY

All CEDARS foster parents, children, youth and family members are required to wear seat belts or utilize age-appropriate passenger restraint systems when transporting service recipients. It is a requirement of CEDARS Foster Care that all foster parents take Car Seat Safety Training provided by CEDARS.

In vehicles with passenger air bag systems, for maximum safety, children age 12 and younger should ride in the rear seat. In vehicles equipped with passenger side air bags, children and infants in child safety seats should always be placed in the rear seat. Please be aware that it is possible that when an air bag deploys, even in a low speed crash, it can pose some risk of injury to children age 12 and younger, elderly drivers and passengers, and short statured individuals of five feet or less.

The only exception to the above directives regarding passenger restraint systems: Whenever any licensed physician determines, through accepted medical procedures, that use of a child passenger restraint system by a particular child would be harmful by reason of the child's weight, physical condition, or other medical reason, the provisions shall be waived. The driver of any vehicle transporting such a child will carry on his or her person or in the vehicle, a signed written statement of the physician identifying the child and stating the grounds for such waiver. (As required by Nebraska State Law)

Foster parents are to ensure that all passengers remain in their seat when the vehicle is in motion and keep their arms, legs, and head inside of the vehicle. **Under no circumstances** are foster parents to leave any foster youth in the vehicle unattended.

CRISES AND EMERGENCIES

The following CEDARS Foster Care practices apply anytime a youth's health or safety is at risk. In the case of any medical or mental health emergency, runaway situation, or police contact, the CPS Hotline (1-800-652-1999) and the Foster Care Specialist on-call (402-436-5437) should be contacted **immediately**. If the event is life threatening, the 911 operator should be called first, followed by a call to CEDARS. It is important to keep the Foster Care Specialist informed of any situation that appears to be escalating to crisis level. In an emergency medical situation, Foster Parents should take the Medical Consent form as well as the Medicaid form that indicates the youth's insurance provider with them to the medical facility.

CEDARS uses Incident Reports to document serious incidents. Foster Parents will report all incidents according to the Incident Reporting Procedure for CEDARS within one (1) hour of occurring. These include reports of runaway, police contacts, medication errors, injuries, hospital/medical emergencies, suicidal ideations or actions, allegations of abuse, any crisis that involves community support, such as emergency medical attention, police assistance, or paramedic response, or any other significant event. The Foster Care Specialist is responsible for writing the Incident Report after collecting all of the information from the foster parent or whoever is making the report.

Runaways

A missing or runaway youth is at great risk of harm. Foster parents should **immediately** report to the police any youth that has unaccountable time or has run away from the foster home, and then notify the Foster Care Specialist. The Foster Care Specialist will communicate with all other emergency contacts, including the DHHS Case Manager, biological parents, CEDARS supervisor, and others as necessary. The Foster Care Specialist will also contact CEDARS Street Outreach Services (SOS) to assist in making contact with runaway youth.

If a foster youth has a history of runaway behavior, their service plan will include goals directly related to the prevention of runaway behavior. The foster parent will need to keep a list of addresses, phone numbers, and contacts of people and friends that may likely harbor a runaway youth. This information is helpful to law enforcement in returning the youth to placement.

When a youth returns from run, the child may return to the foster home or to an alternative placement (e.g. juvenile detention, CEDARS Emergency Shelter, hospital) depending on the duration of the elopement and the health status of the child upon return. Foster parents should immediately contact CEDARS anytime a runaway youth contacts them while on run or returns to their home. CEDARS staff will coordinate a health check and risk assessment to assess for trauma, sexually transmitted disease, alcohol/drug use, and other safety concerns.

When a child is missing from their foster home a bed hold request can be made. If a bed hold is approved by DHHS this means that the home will continue to receive payment and cannot fill that slot on their license with another youth. Bed holds of 1-5 days can be approved by the case manager and supervisor. Bed holds longer than 5 days need to be approved from DHHS admin.

Suicide

CEDARS has a written policy that describes staff action should a youth talk about, threaten to commit, or attempt to commit suicide while in our care. If a youth talks about, threatens, or attempts suicide, foster parents should contact CEDARS immediately, using the 24-hour emergency on-call cell phone if the event is after 4:30 PM, on weekends, or on holidays. Foster parents must report all suicide verbalizations or actions, whether or not they feel that the child is serious. The Foster Care Specialist will provide guidance in the event of a suicide threat or gestures.

Like all medical emergencies, youth who are actively suicidal should receive emergency services. The CPS Hotline should be called at the earliest possible time to assist you in determining how and where to obtain a psychiatric evaluation of the foster child. The emergency room of your local hospital should be contacted, and staff will provide instruction on the necessary procedures for voluntary and involuntary admission to the hospital.

Weather-Related Emergencies and Natural Disasters

All foster homes must have an identified evacuation plan and tornado safety plan that is posted and practiced frequently. If a weather-related emergency or other natural disaster requires a foster family to relocate, the Foster Care Specialist should be kept informed of the foster youth's location and safety status. The on-call number should be contacted immediately if there is an emergency after hours that involves a foster youth. In the event of a large-scale community disaster, Foster Care Specialists are responsible for contacting each foster home with a placement to ensure the safety and whereabouts of all clients. CEDARS Foster Care maintains a list of all supported foster homes that includes contact information and addresses. The foster home contact list is updated weekly and provided to the on-call Foster Care Specialist and supervisor.

CHILD ABUSE

Foster Parents are morally, ethically, and legally responsible for reporting any and all cases of suspected child abuse. Per Nebraska State Law Section 28-717, any person who willfully fails to make any report required by the provisions of sections 28-710 to 28-717, or knowingly releases confidential information other than as provided by sections 28-710 to 28-717, shall be guilty of a Class III misdemeanor. The Child Protective Service laws define "child abuse" as "serious physical or mental injury which is not explained by the available medical history as being accidental; sexual abuse or sexual exploitation; or serious physical neglect of a child under 19 years of age, if the injury, abuse or neglect was caused by the act or omissions of the child's parents or by a person responsible for the child's welfare, or any individual residing in the same home as the child."

Points to remember when a child is disclosing child abuse:

- It is not unusual for foster children, often after they feel stable and cared for by the foster family, to disclose past episodes of physical, sexual, and/or emotional abuse at the hands of others. Foster parents need to be prepared to respond appropriately to the disclosures of abuse.
- Because children in the childcare system may inadvertently "learn" to make false allegations, it is especially important that foster parents keep accurate and daily documentation. It is equally important that foster parents rely on the Foster Care Specialist in handling allegations.
- The child/youth's privacy is very important and should be respected. Talk with the child in an area that respects their right to privacy.
- Foster parents' own comfort level in talking with children is critical. If a foster parent is uncomfortable with the information the child/youth is disclosing, they should see if the Foster Care Specialist or another CEDARS staff person is available for the child/youth to talk with.
- Foster parents may need to ask some clarifying questions in order to understand what the child/youth is saying; however, avoid contaminating questions by implying a desired response, implying a threat, or associating the questions with individuals or groups who might have an intimidating effect on the child/youth (e.g., "I understand from talking to the other kids that you were involved in . . ."). Neither CEDARS staff nor foster parents are in a position to INVESTIGATE child abuse. Please just listen and ensure the child's safety, and then call the appropriate persons to report an allegation of abuse or neglect.
- Don't influence what the child/youth might say by asking any leading questions (e.g. "Did Mr. Smith hit you?")
- Don't over-react to information given by the child/youth by making statements which may indicate negative feelings about the incident. Watch non-verbal actions.
- Avoid the use of too much empathy. The child/youth may respond to this with untruths or exaggerations in an attempt to receive more empathy.
- Children/youth should be given honest answers about what is likely to happen as a result of their disclosure. Avoid false assurances and don't promise to keep secrets or make other promises that cannot be kept.
- Avoid any comments that would seem to blame or be critical of the child/youth either for their behavior in the situation or during the disclosure. For instance, if it is not clear what the child/youth is trying to communicate, avoid implying that the child/youth is to blame for the lack of understanding.
- Disclosure about sexual abuse is sometimes very embarrassing and difficult for the child/youth. Acknowledge with the child/youth that it is embarrassing and difficult to talk about sex because it is a very private subject. Foster parents and staff should let the child/youth know that it is their job to listen to the child/youth and make sure that they are safe.

Reporting Abuse

All suspected, directly observed, or disclosed abuse must be immediately reported by Foster Parents to CEDARS. The Foster Parent and Foster Care Specialist will contact law enforcement and/or Child Protective Services immediately. The child abuse report is documented on an Incident Report by the Foster Care Specialist.

Failure to report allegations and suspicions in a timely manner will jeopardize foster parent contract status. In the event that a Foster Parent disagrees with a program decision to not report alleged child abuse, or the allegation is of a CEDARS Foster Care staff, the foster parent can contact law enforcement or Child Protective Services directly.

To report an immediate safety threat, call 911 or local law enforcement.

To report abuse, call Statewide Hotline for Child Abuse and Neglect 1-800-652-1999.

The Nebraska Department of Health and Human Services (DHHS) is responsible for investigating reports of alleged child abuse. The CEDARS Foster Care program staff and foster families will cooperate fully with their investigation procedures and requests.

In the event a CEDARS child alleges abuse by someone outside of the CEDARS foster family (e.g., school personnel, neighbor, biological family member, etc.), the CEDARS foster parents are expected to join staff in supporting the child and maintaining close communication with their Foster Care Specialist throughout the investigation process.

Investigations of Foster Homes

CEDARS Foster Care will follow the DHHS Child Abuse Investigation Protocol when responding to allegations of abuse and neglect against a Foster Parent. CEDARS will provide all needed and necessary information for the purposes of the investigation. CEDARS will not attempt to obstruct or guide the direction of the investigation in any way. The Department of Health and Human Services Child Protective Services (DHHS/CPS) is responsible for investigating reports of alleged child abuse. CEDARS and the foster parents will cooperate fully with their investigation procedures.

Whenever CEDARS Foster Care staff members are made aware that a report of suspected child abuse has been made against a foster family member, the following guidelines will apply:

- CEDARS Foster Care prioritizes the right of children to be protected from abuse and victimization and will adhere to the Child Abuse Reporting Policy and Child Abuse Reporting Procedure whenever allegations of abuse are made.
- CEDARS cannot give specific information about the allegations in most cases, as it will interfere with the DHHS investigation.
- If a CEDARS Foster Parent is contacted directly by DHHS Child Protective Services or the police department about an allegation, the Foster Parent must report to the Foster Care Specialist that a contact was made about a possible investigation.
- CPS may choose not to directly contact CEDARS about an investigation of a CEDARS Foster Parent. DHHS maintains the first priority to the safety of the child and may not contact CEDARS if it is believed this information may contaminate their investigation.

- Once a finding has been reported, CEDARS staff and DHHS Case Manager will evaluate the status of the CEDARS foster family. Depending on the nature of the report and the information provided, DHHS will make the determination as to whether or not the child(ren) will remain placed within the foster home. DHHS and/or CEDARS Foster Care Program may place the home on hold. This means no placements will be made into the home and no respite provided within the home.
- Throughout the investigation, all efforts to maintain the foster family's privacy, dignity, and confidentiality will be made by CEDARS.
- Foster Care staff can educate the Foster Parent on the DHHS procedure for Foster Parent investigations, but are unable to release information about the source and nature of the report.
- Foster parents are encouraged to: begin a dated, written journal of events and communications; maintain up-to-date child reports and documentation; maintain a sense of professionalism as Foster Parents with all parties involved; cooperate fully with the investigation
- In the event that the findings of the investigation are founded, CEDARS Foster Care program will not return the child(ren) or subsequently place any new children into the foster home. At this time, the foster parent's contract with CEDARS Foster Care program would be terminated.

Regardless of allegations of abuse being true or false, the investigation process will be carried out the same. CEDARS recognizes that both staff and foster parents are at risk for false allegations of abuse and neglect due to the vulnerable population that we serve. Some children, based on their histories, may behave in such a manner that jeopardizes the security and stability of the family who is striving to help them. Any allegation of abuse and neglect is highly stressful and difficult to experience. Feelings range from anger, mistrust, embarrassment, and fear. Families accused of neglect and abuse may experience the accusation as an assault on their integrity.

Reactions might include:

- **Trauma:** Many foster parents express shock and disbelief.
- **Betrayal:** Foster families feel betrayed when their source of support (CEDARS staff) cannot talk to them about the investigation.
- **Stigma:** Foster parents report feeling shame, humiliation, inadequacy, and a decline in self-esteem.
- **Powerlessness:** The investigation process can be lengthy and complex. Foster families are given little information regarding the allegation.

To avoid accusations of inappropriate touch, sexual misconduct, or similar claims, the foster parent(s) should make every effort to avoid circumstances or situations that might invite such allegations.

- The foster parent(s) should not be in a closed bedroom or bathroom with foster children, if at all possible.
- Any sexual acting out, either physical or verbal, on the part of youth should be documented and reported to the Foster Care Specialist as soon as possible.
- The foster parent(s) should be particularly aware of their own privacy issues as well, and avoid any exposure of youth to adult nudity and sexuality by securing their own bedroom and bathroom areas.

FOSTER PARENT SUPPORT

CEDARS Foster Care promotes the development and retention of foster parents through collaboration and the provision of adequate support to ensure that the needs of foster families and the children they care for are being met. CEDARS Foster Care provides 24/7 on-call support, regular training opportunities, foster parent support groups, foster family engagement activities, therapeutic consultation and support when needed, access

to recreational activities and/or necessary resources in the community, and regular review and assessment of homes in an effort to support, develop, and retain foster families.

24/7 SUPPORT

For foster parenting to be a successful experience, foster parents must have regular communication and easy access to CEDARS and their Foster Care Specialist. If the Foster Care Specialist is absent from the office when a foster parent attempts to contact them, the foster parent's calls will be returned promptly once the Foster Care Specialist is back in the office. If a visit is necessary, it will be scheduled.

A Foster Care Specialist will be available for foster parents to contact in the case of an emergency 24/7, every day of the year. **If foster parents need to contact a Foster Care Specialist for an emergency after hours, they can utilize the foster care on-call number at 402-436-5437. The on-call number is available from 4:30pm-8:30 am the next day and 24 hours on weekends and holidays. The number will direct you to a call tree in which you will have to choose the Lincoln or Omaha service area.**

When To Call Foster Care Staff

Non-Emergency Calls

Foster parents are encouraged to have regular communication with their assigned Foster Care Specialist through email, phone calls or texts during business hours, and in person during home visits. Non-emergency information that should be shared through ongoing communication includes:

- Reporting any changes in a foster family's circumstances, such as a planned move across town, or change in the family composition.
- Reporting any changes in the behavior of the child or any concerns the foster parent might have in regards to the general nature of the child.
- Sharing good news or progress that a child is making.
- Planning ahead calls: Foster parents should notify their Foster Care Specialist in advance for any planned or anticipated changes, such as reporting if a foster parent/family is planning to be away and has arranged for substitute care; if a foster parent plans to take a foster child out of state or before they allow the child to go on a trip; or before making any significant change in the child's life (i.e. a change in schools or a new job).
- Concern calls: If foster parents have concerns regarding their foster child or are worried that a certain situation might become problematic, they should involve the Foster Care Specialist as early on as possible. Foster parents should not wait until the situation has gotten out of hand before involving the Foster Care Specialist.

Emergency Calls

Situations that require **immediate** notification of the assigned Foster Care Specialist, or the on-call Foster Care Specialist if outside of business hours include:

- If the child shows signs of depression, withdrawal from family and friends, talks about suicide, or makes excessive statements about feeling unworthy of life.
- If the child has run away then foster parents should give the child reasonable and age-appropriate leeway to come home, contact friends or other places where he/she might be, and/or contact the police or sheriff's department. When notifying the police department of a runaway youth, the foster parent will

likely have an officer visit the home to file a police report and will want to know the youth's age, description, and possible whereabouts.

- If the child has a sudden serious illness, accident, or medical problem.
- If there is serious trouble with the police, juvenile authorities, or the school; or if the child is skipping school.
- If anyone, including the child's own relatives, tries to take him/her from your home without prior arrangements by the Foster Care Specialist and/or DHHS Case Manager.
- If there is an emergency in your own family making it impossible for you to care for foster children for a period of time.
- Hotline events: Incidents that Foster Care Specialists and either the assigned DHHS Case Manager or DHHS Hotline **always** need to be informed of within 60 minutes of occurring include:
 - Absent without permission
 - Physical aggression
 - Runaway
 - Physical illness or injury
 - Police contact
 - Theft
 - School transfer/suspension/expulsion
 - Drug or alcohol use
 - Suicide threat/gesture
 - Property destruction
 - Search of youth's possessions/clothing
 - Sexual behavior with a child or adult
 - Allegation by a youth

CLINICAL SUPPORT

CEDARS foster parents have access to CEDARS Clinical Services to assist them with any challenges they may face while caring for foster youth, as well as CEDARS Employee Assistance program for individual counseling if needed

Foster Parent Support Group

CEDARS offers foster parent support groups monthly in both Lincoln and Omaha. Therapists will provide resources, encouragement, and suggestions pertaining to common challenges faced by foster parents or questions posed within the group. Continuing education hours will occasionally be available through self-studies and training opportunities shared through the group.

Clinical Consultation

CEDARS therapists can provide brief one-on-one consultation to foster parents in order to offer recommendations, education, and support specific to an individual youth's care. These consultation services are intended to help foster parents understand and respond effectively to a particular behavioral or mental health challenge. CEDARS therapists can also help make appropriate referrals to mental health providers in the community for additional support. Foster parents should notify their Foster Care Specialist if they are interested in consulting directly with a CEDARS therapists regarding a difficult situation.

Counseling for Foster Parents

CEDARS Foster Care Program recognizes and respects that our program's foster families have personal and private lives. During their tenure as CEDARS foster parents, families will have access to counseling and therapeutic services through INSIGHT, the CEDARS Employee Assistance Program. These services are meant to address personal issues or problems caused or exacerbated by their work as a foster parent, such as marital stress or problems with their own children. Foster Care Specialists will work with the foster parent(s) on issues directly involving the care and placement of youth in our program rather than addressing personal counseling issues of the foster parent(s) themselves.

ENGAGEMENT ACTIVITIES AND RESOURCES

All foster and biological families are invited to attend several engagement events hosted by the CEDARS Foster Care program each year. These events provide an opportunity for social and recreational enjoyment, as well as peer support and connection with other foster parents and families. Annual engagement events commonly include a large summer celebration at CEDARS, a fall outing at a local pumpkin patch, and a winter family appreciation event at a local YMCA, along with other smaller gatherings and events throughout the year.

In addition to these CEDARS facilitated engagement opportunities, CEDARS foster youth and families have access to various activities in the community for free or discounted prices throughout the year (i.e. Children's Museum, zoo, swim lessons, etc). Foster parents are encouraged to talk with their Foster Care Specialists about the various activities available to them and the foster youth in their homes. Additional community resources that may be helpful for foster families include:

- CEDARS provides foster families in need of assistance and/or additional services with a list of community resources to help meet their needs.
- Foster families can access this information at <https://www.thecenterforpeopleinneed.org/resource-book/> or through the mobile app "MYLNK" that is available on both Android and iOS systems. Foster Care Specialists can also provide foster families with a printed copy of this resource guide if desired.
- Foster families can request use of One Simple Wish. CEDARS is a community partner with One Simple Wish and can submit wishes for youth that come in the form of items, gift cards, checks, etc.

RESPIRE CARE SERVICES

The use of respite helps alleviate the stress related to living and working with foster youth and thus, is an important resource to prevent foster parent "burn out" and promote the stability of placements. Respite is provided for relative caregivers or foster parents who need a break. This respite can be planned or may be needed on an emergency basis. Within the CEDARS Foster Care program, respite services are provided to foster parents by other certified CEDARS parents and providers, or by members of a foster parent or youth's extended family or support network. A foster care license is not required of respite providers, but background checks, a home walkthrough, and discipline policy review must be completed. Foster parents are encouraged to network with each other to develop respite providers.

The use of an approved parent ensures the continued, consistent treatment from one family setting to another and it also increases the support network for the family receiving respite. CEDARS foster parents who have a

youth placed in their home are eligible to provide respite for other families only if the foster youth placed with them is stable. Foster parents on some form of corrective action or who are on hold with DHHS may not provide respite.

CEDAR encourages foster parents to use regular, planned respite throughout the month. CEDARS Foster Care Specialists will assist foster families in making arrangements for respite care, and CEDARS will also coordinate the payment of the respite provider. Foster parents who have a youth placed in their home at an Intensive (Level 3) or Professional Foster Care level will receive three (3) full days of paid respite each month. This means that they will continue to be paid for the days (up to three per month) that they utilized respite, as well as the respite provider. If a foster family is earning paid respite each month due to the intensive needs of the youth they are supporting, CEDARS does not allow them to accumulate that time or carry it over into another month.

Respite providers will be informed of all historical information, previous treatment records, and current behaviors of the youth in the foster home. Respite providers have the right to turn down any child for consideration. CEDARS does request foster families' cooperation by quickly responding when contacted regarding a possible youth in need of respite care.

UTILIZING RESPITE

CEDARS abides by the following respite guidelines and requirements:

- Respite care for youth in Agency Supported Foster Care shall be provided at no additional cost to the Department
- Respite care is not considered a placement
- Respite that exceeds 10 days must be approved in writing by the DHHS Service Area Administrator or designee
- Intermittent respite care provided by relatives or friends of the foster family or youth does not require licensure of the provider, but background checks and a walk through of the home are to be completed

Identifying Respite Care Options with Foster Families

When a foster family first becomes licensed, they list individuals that they can utilize as supports for respite and other potential needs within their home study. Additionally, when a youth is first placed in a foster home, the Foster Care Specialist will go over respite options with the foster parents and list individuals who could be utilized as needed, pending completion of approved background checks.

Guidelines for Arranging Respite and Matching Children with Respite Providers

When respite is being arranged, the Foster Care Specialist will work with the foster parents to ensure that the children are matched with respite caregivers who can meet their needs, are familiar with their daily routines, preferred foods and activities, any therapeutic or medical care needed, and respect their culture, race, ethnicity, language, religion, gender identity, and sexual orientation.

The following protocol should be used when making arrangements for respite care:

1. Foster parents desiring respite care are asked to notify their Foster Care Specialist at least **two** weeks prior to the day for which respite care is requested. If Foster Parents make their own arrangements with a respite care provider, they must still contact Foster Care Specialists well in advance to advise them of the arrangement and ensure that the respite care is approved.

2. Foster parents desiring respite care on a regular basis (i.e. last weekend of the month) must contact their Foster Care Specialist at least **two** weeks in advance in order to set the schedule and arrange for a respite care provider. Again, if foster parents are making their own arrangements, they must still notify their Foster Care Specialist for final approval.
3. Foster parents are responsible for informing the youth of the respite care plan which includes: explaining the reason for the respite care, and providing information and opportunities to meet and spend time with the respite caregiver prior to the actual respite visit.
4. Foster Care Specialists will assist in this respite relationship and informing the youth if necessary. Youth should be informed of respite preparations well in advance and feel comfortable with the respite caregivers and the respite stay.

Respite needs to be pre-approved by the DHHS Case Manager. It is important that they give permission and notify any other team members or family time workers. For any new licensed homes background checks will be ran as well as a walkthrough of the home to ensure safety. Once background checks are back and a walkthrough is complete the family will be approved to do respite.

Respite Services in Response to a Crisis

When respite care is provided in response to a crisis, CEDARS offers developmentally, culturally, and age-appropriate interventions as needed to help children cope with the trauma or stress associated with the crisis. If an incident occurs with a youth and either CEDARS or DHHS request for a youth(s) to be placed in emergency respite, CEDARS will work to find an immediate respite provider that can meet the needs of the youth. CEDARS will work with DHHS to ensure that proper services are implemented during the duration that the youth remains in respite. If needed, CEDARS will consult and utilize a CEDARS therapist to provide additional support.

RESPONSIBILITIES OF RESPITE CARE PROVIDERS

Respite care providers are responsible for adhering to many of the same expectations and requirements of foster parents, as addressed throughout this manual. This includes, but is not limited to: following the service plan for the youth in their care; documenting medications administered; following through with any behavior or service plan goals or objectives; and providing the youth with needed support and supervision. Respite care providers may be responsible for providing transportation to appointments, school, counseling, etc. while a child is in their care. Respite providers are not responsible for providing any rewards or allowances that the child and his/her CEDARS foster parents may have contracted for. Respite caregivers offer enriching activities appropriate to the interests, age, development, physical abilities, interpersonal characteristics, culture, and special needs of children.

Respite Home Safety

As is the case with all homes with youth in them, foster parents and respite providers are responsible for providing a safe environment at all times. Foster parents and respite providers should also be aware of the availability or access that youth may have to their keys to motor vehicles, locked firearm cabinets, storage areas for valuables, prescription drugs, alcohol, and computer and internet use. These must be kept secure and if possible, inaccessible to youth in the program.

When children in respite care experience accidents, health problems, or changes in appearance or behavior, information is promptly recorded and reported to the foster parents and administration, and follow-up occurs,

as needed. Respite caregivers return children only to the foster parents, or another person approved by the foster parents, and follow guidelines for situations that pose a safety risk or when a child requires protection.

All foster and respite homes must meet and maintain a high level of safety, as outlined in the safety section of this manual.

CALCULATION AND COMPENSATION OF RESPITE

Calculation of Respite

The number of respite days used is determined by time periods. A full day of respite is 8-24 hours of respite care. A half day of respite is anything less than 8 hours of respite care. Children who are at an Intensive (Level 3) or Professional level of care based on the NCR shall receive (3) full days of paid respite per month, meaning both they and the respite provider will be paid for that time. Any additional respite over the (3) full days per month will be deducted from the foster parents reimbursement and paid to the respite provider. For any child at the Essential (Level 1) and Enhanced (Level 2) levels of care, any time they spend in respite shall be deducted from the foster parents reimbursement and paid to the respite provider. If a foster parent has questions about how much respite will be used during a time period, they should contact their Foster Care Specialist.

Compensation of Respite Providers

Respite providers will receive a contracted per diem rate per night per youth for care provided in their home. This rate is determined by the level of care a youth is assessed at using the Nebraska Caregiver Responsibility (NCR) tool. CEDARS will facilitate all payment of respite providers, thus foster parents are not expected to directly pay any respite providers that they utilize. Respite payment will be sent by the 10th of the month following service provision. It is imperative that the Foster Care Specialist is always aware of the respite prior to its occurrence, so that respite providers are reimbursed in a timely manner.

REQUEST FOR REMOVAL OF CHILD

CEDARS Foster Care believes that changes in placement are disruptive to the child and violate our commitment to providing stable, nurturing care for children placed with us. **Placement changes, therefore, should only occur to support the best interest of children and their permanency goals.**

Preventing Placement Changes

CEDARS makes every effort to prevent placement changes through coordinated placement planning that ensures children, families, and foster families are aware of the placement process and receive support and information throughout, and that prospective foster families are provided all legally permissible information about children's characteristics, behaviors, histories, and permanency goals, and have opportunities to meet with foster child(ren) in advance, when possible. In addition, CEDARS will respond proactively to any placement challenges as they arise, assess the need for additional services and supports, and coordinate for the assigned Foster Care Specialist to spend more time with children and foster parents following a new placement or when challenges are present.

Additionally, the following services and practices are implemented as appropriate, in an effort to prevent placement changes:

- For youth referred through DHHS, CEDARS will request or actively participate in any one of their practices utilized to stabilize placements and prevent disruptions, including “placement stability calls,” “transition calls,” or family team meetings.
- Foster Care staff will consult with CEDARS Clinical Services. An identified CEDARS Therapist will be available to support Foster Care staff and families in the provision of consultation and clinical support. The CEDARS Therapist/Clinical Consultant may provide foster parents with individual trauma trainings, participate in home visits, or review cases with Foster Care Specialists and offer recommendations as needed.
- CEDARS will encourage foster parents to attend trainings on specific topics that either CEDARS or another agency offers.

Managing Placement Changes

CEDARS foster parents who wish to request the removal of a foster youth from their home must discuss the reasons they desire the placement change as soon as it becomes a concern. When a placement change cannot be prevented, then children and foster families will receive additional support during placement changes that include sufficient advanced notice prior to a placement change, discussions of the reasons for a placement move or disruption, each party’s feelings about the change, and as needed, interventions to address the reasons for the change. When applicable, reassessments of children’s needs, referral to additional services, and identification of a foster family or other placement settings that can best achieve safety, well-being, and permanency will be implemented prior to or during a change of placement.

Foster parents are asked to provide CEDARS with at least **14 days** to find an appropriate alternative home from the time the request for a placement change is made. During the agreed upon transition period before a youth is removed from the home, CEDARS foster parents are expected to continue their commitment to providing for the health, safety, and treatment needs of the foster child. Foster parents are also expected to cooperate fully with CEDARS during this time and participate in a transition plan in order to minimize the disruption to the child and increase the chances of a smooth transition to a new placement.

If a youth must be moved from their current placement, CEDARS also works with DHHS or the referring agency to facilitate a successful transition to the youth’s new placement location. CEDARS does this by actively seeking out other placement options for the youth, placing youth into emergency respite only when necessary, regularly communicating with the team to ensure that all parties are aware of the transition plan, and helping to facilitate the move of the youth’s belongings.

Termination of a CEDARS foster family’s commitment to a child should NEVER be used as a threat or punishment against a child. Foster parents who do not adhere to these expectations or the process identified above will jeopardize their foster parent contract status.

FOSTER PARENT COMPENSATION

Foster parent compensation is considered a nontaxable reimbursement for expenses that they incur in caring properly for youth placed with them, rather than wages. CEDARS foster parents will earn a per diem rate for each "parenting day" they provide for one child. This rate is determined by the level of care a youth is assessed on the Nebraska Caregiver Report [NCR]. The Foster Care Specialist and DHHS Case Manager will discuss these levels of care with the foster parent at the time of placement.

The contracted amount is paid directly to the foster parents by the 8th of the month, following service. Foster parents are highly encouraged to participate in direct deposit in order to receive reimbursement. Licensed foster parent(s) may also be paid for days that the youth is on home visits, is on runaway status, or is in another facility such as inpatient hospitalization, (to a maximum of five days) if approved by the DHHS Case Manager. Parents do not receive payment for pre-placement visits (day or overnight) for youth who are not currently in the CEDARS program.

Foster parents are responsible for providing all basic necessities to the youth including food, clothing, transportation, school supplies, recreation opportunities, and minor medical supplies. Medical, dental, mental health, and vision care expenses will be paid through the youth's insurance with the exception of over-the-counter medications. Medicaid will only pay for over-the-counter medications with a prescription. Incidentals such as allowance, special lessons or instruction (such as dance, music, sports), or special behavior incentives will also be the responsibility of foster parents and are paid for through their monthly reimbursement.

Parents who recruit new parents will receive a \$250 dollar bonus when the new foster parents are licensed. They will receive this reimbursement on the next billing cycle.

Taxes

Tax laws are complex and subject to change. CEDARS recommends foster parents seek professional advice on reporting reimbursement payments to the Internal Revenue Service. As a general rule, foster care payments are considered reimbursement for what the foster parent has paid for the actual care of the child in their home. Please note that payments made to foster families for foster care will continue to be excluded from taxable income.

Taxes on Respite Care Income

Respite over \$600 annually is seen as income. Section 131 of the IRS Code states that payments made to respite care providers for respite foster care are not excluded from taxable income. CEDARS will issue IRS Form 1099 to anyone who receives more than \$600 in respite care payments for the year.

Insurance and Liability

CEDARS Foster Care program does not provide insurance for foster parent(s) against risks associated with care or placement of youth in their home. CEDARS Youth Services will not be held responsible or liable for any loss, damage, or injury resulting from placement of the youth in the home of the foster parent(s). The foster parent(s) will need to purchase and maintain adequate insurance coverage on their place of residence as well as their vehicle(s).

CONCERNS AND TERMINATION

The success of foster care relies heavily on all involved parties – the youth, foster family, biological family, DHHS Case Manager, and CEDARS Foster Care program – working together positively and collaboratively in serving the best interest of the child. When conflict or concerns arise, it is important that they are addressed quickly and that everyone involved works together to find a solution. All concerns should be handled in a way that maintains professionalism and respect for others.

FOSTER YOUTH AND BIOLOGICAL FAMILY CONCERNS

Youth in the foster care program and their families are encouraged to be involved in the design and implementation of the child's service plan and care. Feedback and collaboration from the youth is an essential component of an effective program. To ensure that this cooperation is maintained, there are several avenues for youth to air any grievances. Children in the foster care program have the right to voice their dissent or dispute any practice of the foster care program.

The first step to a youth's grievance is for the youth to discuss his/her issues with the foster family. Solving family-related matters within the family unit is a fundamental goal for family-based care.

If a youth's grievance is not successfully resolved with the family, the Foster Care Specialist supervising the foster family should be contacted by the youth or the foster family. A meeting should take place to discuss and try to resolve the grievance, which may need to involve the CEDARS Foster Care Program Director or DHHS Case Manager. The final level of appeal is the CEDARS President/CEO, who is available to mediate any difficulties that have not been resolved by any of the previous steps in the process.

FOSTER PARENT CONCERNS

Conflict Resolutions

If the foster parent disagrees or has a conflict with their Foster Care Specialist or the child's assigned DHHS Case Manager, communication of the concern is important. The foster parent should first attempt to resolve the problem with the Foster Care Specialist or DHHS Case Manager whenever appropriate and possible. If the problem cannot be solved between the foster parent and Foster Care Specialist or DHHS Case Manager, the foster parent should contact the supervisor of either the Foster Care Specialist or DHHS Case Manager to report the concerns. If the foster parent still does not feel that the matter has been adequately resolved, the CEDARS Service Director and/or the DHHS Service Area Administrator will be involved.

Grievance Procedure for Foster Parents

If a foster parent has a complaint regarding the policies or procedures of the CEDARS Foster Care program, or any other problem regarding their association with CEDARS, the foster parent may file a grievance. Prior to filing a grievance, though, foster parents are encouraged to request an informal discussion of the problem with the Foster Care Specialist and the immediate supervisor. If the problem is not resolved at this point then the foster parent may file a grievance according to the process outlined below:

- If, after the foster parent has discussed their grievance with the Foster Care Specialist and the supervisor/Program Director, they still believe that CEDARS Foster Care has failed to uphold its policies and philosophies, then they must state their grievance in writing and submit it to the Program Director thirty (30) days from the date the grievous action occurred. The Program Director will schedule a meeting with the foster parent within ten (10) working days of the receipt of the written grievance and attempt to resolve the problem.
- If the foster parent is not satisfied with the results of this meeting, a copy of the grievance and written reports of the previous two (2) meetings will be forwarded to the CEDARS Service Director.
- The Service Director will submit their findings and recommendation(s) within twenty (20) working days from the date the letter of grievance is received.
- The foster parent will be informed of the decision within ten (10) working days from the date that the findings and recommendation(s), in response to the grievance, are submitted in writing.
- If corrective action is required by the CEDARS Service Director or the Foster Care Program Director, the corrective action will begin no later than ten (10) working days after the Foster Care Specialist and the foster parent are notified of the decision. If a corrective action has not been finalized within the 30-day time frame, the Foster Care Specialist will submit an interim report every 30 days until completed.
- If CEDARS employees or foster parents are placed on a corrective action status, they must indicate the steps necessary to correct the deficiency within ten (10) days, after notification from the appropriate decision-making personnel. This corrective action plan must receive the approval of the Foster Care Program Director.
- The decision of the appropriate decision-making personnel will be considered final.

Any time frame specified within the grievance procedures may be modified by mutual consent and notification to all involved parties.

AGENCY CONCERNS AND CORRECTIVE ACTION

CEDARS is committed to the success of each foster home, and makes every effort to provide foster parents with the knowledge, skills, and support necessary for foster parents to fulfill their responsibilities and provide nurturing care for children. In the event that a foster parent fails to meet their responsibilities in caring for a child's best interest, or CEDARS or DHHS has any concerns regarding a foster home, the CEDARS Foster Care Specialist and/or DHHS Case Manager will communicate these concerns with the foster home whenever appropriate. Additional training, education, or a review of foster care procedures and expectations will likely be facilitated with the foster parent to rectify the situation. At times, DHHS and/or CEDARS may place a foster home "on hold," meaning that the home will not be able to provide respite care or receive any additional placements until any areas of concern are resolved. It is also possible that the Foster Care Specialist may begin visiting the home more frequently to ensure that the foster home has the support needed and that foster parents are following through with any requested action steps to ameliorate a concern.

Types of concerns that may result in a foster home being placed on hold and a corrective action plan put in place, include but are not limited to:

- not abiding by CEDARS policies
- lack of a collaborative relationship with CEDARS Foster Care
- not acting in the best interest of children
- personal conduct that interferes with the foster parent's ability to provide a safe and secure environment

In the event that any of the above concerns are especially egregious or are unresolved, CEDARS may elect to terminate the foster parent's contract.

TERMINATION OF FOSTER PARENT CONTRACT

It is unlikely that it will be necessary for CEDARS to terminate with any CEDARS foster parents since applicants have been screened carefully and are provided comprehensive training, as well as 24-hour a day emergency consultation and assistance. However, should termination of a foster parent become necessary, it will be for one or more of the following reasons:

- Repeated failure to meet renewal of license criteria during yearly evaluations following certification and licensure
- Abuse of any youth or adult
- Any sexually inappropriate or abusive behavior toward a youth
- Wanton or willful neglect or carelessness in the performance of duties as a foster parent
- Falsifying or refusing to give testimony when incidents are being investigated; or falsifying or assisting in falsification of youth's records, personnel records, or any other Foster Care records, or giving false information in completing an application with the Foster Care program
- Unwillingness or inability to apply sound care, supervision, and parenting skills for the Foster Care program youth
- Use of non-approved and/or inappropriate discipline strategies
- Unauthorized possession of weapons
- Attempting to or causing bodily injury, or threatening a Foster Care staff person or CEDARS youth
- Abuse of alcohol or prescription drugs; use of illicit drugs
- Conviction of a felony and/or assault or violent behavior
- Violations of Nebraska State Foster Care Regulations or CEDARS policies and procedures
- Insufficient continuity of service, due to long leaves of absence
- Repeated failure to exercise good judgment regarding the foster youth's safety, health, care, or development
- Failure to provide nutritious diets, adequate clothing, or other accommodations in a family environment
- Failure to report the abuse and/or neglect of a child

The Foster Parent(s) will be notified in writing of their termination from the CEDARS Foster Care program.

Foster Parent Resignation

CEDARS hopes to maintain foster parents' participation for many years. CEDARS encourages any foster parent(s) who may wish to resign from the Foster Care program to discuss this with CEDARS well in advance of any final decision. While avoidance of disruption in the lives of youth in placements is of primary concern to CEDARS, we do recognize that occasionally resignation may be necessary for some foster parents. If the foster

parent wishes to terminate his/her commitment to the Foster Care program while a child is placed in their home, the foster parent(s) would be expected to:

- Discuss the reasons for the desire to withdraw their commitment.
- Provide a 3-week notice in writing.
- Participate in the transition plan for the youth to be placed in an alternative placement.

ADOPTION SERVICES

CEDARS Foster Care does not actively recruit adoptive parents. When people call to inquire about foster care and/or adoption, they are interviewed to gauge their intentions of providing foster care and/or adoption. If it is determined after this initial interview that they are only interested in adoption, they are referred to www.adoptionnebraska.com for additional resources. If they are interested in doing foster care with the possibility of providing permanency, CEDARS will conduct an initial prescreening on the home, determine if they have satisfactory background checks, and determine if they are suitable to start training classes. If the home meets all these initial requirements, they will be invited to attend our foster parent training, TIPS-MAPP. TIPS-MAPP is a mutual selection process in which CEDARS will spend ten weeks getting to know the families and determining if they meet our standards for providing foster care. This will also allow the foster parent to finalize their desire as a family to provide foster care.

CEDARS Foster Care program writes adoption home studies for:

- Youth who have resided in the CEDARS foster home for at least six (6) months; **and**
- Families who are foster parents with CEDARS and are currently being served in our program.

CEDARS will not complete home studies for families seeking to complete adoptions for children not currently placed in a foster home through CEDARS. This is subject to change based on policy changes within DHHS.

CEDARS Foster Care program will not:

- Participate in relinquishments or termination of parental rights as this is the responsibility of DHHS.
- Complete ICPC's or be in charge of monitoring ICPC's completed with other agencies as this is the responsibility of DHHS.
- Participate in conversations about adoption subsidies or promise the foster parents that they will receive a subsidy as this is the responsibility of DHHS. All questions about subsidies will be directed to the assigned DHHS Case Manager.

PRE-ADOPTION SERVICES

CEDARS pre-adoption services are designed to prepare children and prospective adoptive parents for adoption. Pre-adoption services will begin when custody of the child is clearly established and the parental rights have been terminated. CEDARS Foster Care will only provide adoption services to a child or children placed in a CEDARS foster/adoptive home.

Assistance Provided During Placement

When CEDARS Foster Care and Adoption Services places a foster child in a prospective adoptive home, the following services and supports are provided to ensure a suitable match and successful integration of the child into the family home.

- The CEDARS Placement Coordinator will share all available information about the referred youth with a foster/adoptive family interested in placement.

- Following the initial licensure training, and annually thereafter, foster/adoptive parents complete a placement characteristic preference form to indicate the various child characteristics they would or would not prefer to care for in their home. These preferences are kept as a part of the parent file maintained by CEDARS.
- If time allows, pre-placement visits will be coordinated between the foster or adoptive parents and the youth. In conjunction with the DHHS Case manager, CEDARS will develop a family time plan to include visits that are progressive in their frequency and duration. The CEDARS Foster Care Specialist will be a part of the initial visit between the youth and the family to assist in the introduction and will remain involved in the visits as warranted.
- During the pre-placement visit, the foster or adoptive parents will be able to learn about the child's:
 - Strengths, interests, and personality
 - Social, genetic, medical, psychological and educational backgrounds
 - Current development, and any special needs
 - Current and past behavior
 - Anticipated future needs
 - Requests or expectations regarding openness of a potential adoption
- When discussing adoption with potential placements CEDARS will ensure:
 - Accurate information is provided regarding the needs of the child and that the foster home is able and willing to meet the child's needs
 - The foster home can advance the child's best interests
 - The child's and family's religious, cultural, racial, linguistic, and ethnic identities are considered in congruence with MEPA and will not delay placement of the child for adoption.
 - When a child is placed with a potential adoptive home prior to termination of parental rights CEDARS will inform the prospective adoptive parents of the risks involved
- Once a child has been placed in a foster/adoptive home, the foster parents will be provided an orientation checklist to help facilitate a positive and welcoming introduction of the child into the home.
- Following placement, the CEDARS Foster Care Specialist will check-in frequently to offer any support needed and assist with a smooth transition.

Preparing the Child for Adoption

Youth who are in the adoption process have a right to express their feelings about being adopted. They have the right to be notified of the process in an age-appropriate manner as openly and honestly as possible. Adoption can often be a stressful time for a child, and it is important that all adults and caregivers are patient and understanding. CEDARS will work closely with the potential adoptive family and the child to ensure that age-appropriate services prepare the child for adoption and include:

- Opportunities to visit prospective adoptive parents if they are not currently placed with an adoptive home, and preparation and support for these visits;
- Counseling to help the child understand the adoption and cope with separation, loss, and birth family loyalty issues;
- Consideration of continued contact with the birth parents and siblings when appropriate;
- The development of a Life Book that describes the child's personal history.

Youth who are in the process of being adopted should be talked with openly and honestly about what their plan is. The following guidelines can be helpful in framing these discussions:

- Plan the conversation. Decide in advance the best way to discuss the plan with the child and be prepared to answer their questions.
- Help the child talk about the perceived difference in his or her own words. Ask open ended questions such as “How do you think being adopted will be different from being in foster care?”
- Help the child draw connections to something in their own life or prior experiences. A Foster Parent might say, “This is like the time when...”

If the child has a therapist, it will be important to discuss these ideas with the therapist to ensure that they are appropriate given the child’s development and cognitive abilities. A CEDARS therapist can be accessed to offer suggestions, consultation, and support in regards to youth who are moving towards adoption.

During this time, CEDARS will continue to support the foster youth and home by completing home visits and ensuring that things are running smoothly. Home visits between the Foster Care Specialist assigned to the home and the foster child are conducted at least one time per month in the foster home. Depending on the youth and family’s need, home visits may occur as often as 4-5 times per month.

Life Book

Life Books are a compilation of the youth’s life including but not limited to their birth information, placement information and dates, and pictures. The Life Book is completed by the foster and adoptive parent and youth in order to help them understand where they have come from and help them to deal with separation and loss. All CEDARS foster and adoptive parents are expected to assist children who are placed in their home with completing their Life Book.

Preparing the Adoptive Parents for Adoption

Prospective adoptive parents will participate in an orientation with their assigned CEDARS Foster Care Specialist as well as the DHHS Case Manager that will include the following:

- An overview of the lifelong process of adoption and its meaning;
- The process for completing an adoption;
- The needs of children awaiting adoption;
- Benefits and responsibilities of openness in adoption and the range of openness as discussed in TIPS-MAPP;
- The DHHS Case Manager will discuss the availability of adoption subsidies.

Prospective adoptive parents are prepared for adoption through education, training, information, and support provided by the CEDARS Foster Care Specialist in conjunction with the DHHS Case Manager that address the following:

- Attachment and bonding;
- Possible impacts of adoption on the family;
- Changing roles and relationships from foster youth to adopted youth;
- Maintaining connections with the child’s community;
- Child development and parenting techniques;
- Raising a child of a different race, ethnicity, culture, or religion;
- Caring for a child with special needs if applicable;
- Helping a child cope with separation and loss.

Much of this information is provided during the initial TIPS-MAPP training to prepare families for foster care and adoption. Additional training and information is available on an ongoing basis. The CEDARS Foster Care licensing specialist who completes the adoption home study will also train each prospective adoptive home on the Seven Core Issues of Adoption during the adoption home study process. This training covers the concepts of loss, rejection, guilt and shame, grief, identity, intimacy, and mastery and control. A CEDARS therapist can also help facilitate this training or be available for additional counseling and consultation if needed or requested. When a child is placed with a potential adoptive home prior to termination of parental rights and CEDARS is aware that the foster home would like to adopt, CEDARS will:

- Inform the prospective adoptive parents of the risks involved;
- Assist with the child's transition into the home by offering pre-placement visits;
- Provide accurate information on the needs of the child.

Adoption Home Study

An adoption home study will be completed when a youth's parental rights have been relinquished or terminated and the CEDARS foster parents are interested in adopting the youth currently placed in their home. The adoption home study will focus on the family, the youth they are adopting, and how they will continue to meet the child and family's needs after the adoption is complete. The home study is viewed as an integral part of the client's care and is completed according to timelines dictated by the service provided. CEDARS Foster Care and Adoption Services will only complete adoption home studies for foster families who are currently supported through CEDARS.

An individualized home study will be developed with each family through the analysis of the family profile, and with the full participation of the foster family, to create desired outcomes. The home study assessment should include all adults and children living in the home, including the identification of roles and an assessment of each person's ability to contribute positively to the child's healthy development. Assessments are conducted in a culturally responsive manner and identify strengths and opportunities to promote service participation and success. The home study is a collaborative process that helps the family decide if adoption is an appropriate goal and includes the preparation of a home study report with a recommendation regarding the family's ability to meet the needs of an adopted child.

Before completing the adoption home study, CEDARS will ensure that necessary criminal background and child abuse and neglect registry checks have been completed for all members of the household age 13 and older within the prior year of the adoption occurring.

When completing an adoption home study, CEDARS will include the following information in the assessment process:

- One or more visits to the home will include a tour of the home, meeting all family members or anyone else residing in the home, a written description of the home environment, and general licensing compliance;
- The Foster Care Specialist assigned to complete the adoption home study will assess the family's relationships and functioning, interest in and motivation for adoption, cultural sensitivity and willingness to support the child's cultural ties, how the family will integrate the youth into their home as an adopted child, and contact between the parents and the biological family;
- Demographics of the family will be recorded to include age, race, gender, education, occupation, financial status, religion, and family culture and lifestyle, which are obtained from the Family Profile.

- Family history, parenting philosophy, experience with children, techniques of discipline, social supports, leisure activities, legal history, financial history, and fertility history will be obtained from the Family Profile as well as during interviews with the family;
- Medical and mental health information is reviewed to assess for any new information since the last home study renewal

The Foster Care Specialist will compile all of the information from the foster parent interviews and prior home studies to complete the adoption home study. CEDARS will also maintain the following in each family's file: an application for foster care, three personal references (one of which must be from an employer), and completed background checks on all members of the household age 13 or older. CEDARS will also provide a recommendation on the approval status of the family and the adoption of the child in a cover letter attached to the adoption home study. These materials will be reviewed and approved by a CEDARS Foster Care Supervisor and then provided to the assigned Department of Health and Human Services staff member to add to the adoption packet.

DHHS has the authority to accept or reject the recommendations of the adoption home study. If DHHS approves the adoption home study and moves forward with the adoption, CEDARS will continue to support the youth and family throughout the adoption process.

OPENNESS IN ADOPTION

Foster and adoptive parents are informed of the difference between open and closed adoptions during their initial TIPS-MAPP training. This training curriculum emphasizes the importance of partnership between the biological and foster/adoptive families whenever possible. The degree of "openness" is discussed to encourage foster families to consider what they will be comfortable with in regards to biological family contact and involvement. Involvement can range from sending a yearly holiday card to having regular face-to-face contact. The TIPS-MAPP trainers will encourage foster/adoptive parents to make an informed decision based on what would be best for their family and the foster or adopted youth.

When a foster family is moving toward adoption with a foster child, it is important that all family and team members agree on the level of "openness" that will work best for everyone involved, and ultimately be in the best interest of the adopted child. This will be addressed and clarified through team meetings and ongoing communication between the foster/adoptive parents, CEDARS Foster Care Specialist, DHHS Case Manager, biological parents, and other team members as appropriate.

POST-ADOPTION SERVICES

Case Closure

When the adoption of a CEDARS foster youth has been finalized in court and the youth's case with DHHS is closed, the youth's case will be closed with CEDARS Foster Care and Adoption Services as well.

Once the adoption has occurred and the youth's case is closed:

- Adoptive parents will take on full legal responsibility for the adopted youth.
- Adoptive parents will have full financial responsibility for the adopted youth. Even if the family receives a subsidy on behalf of the child, families are still responsible financially for the youth.

- Adoptive parents will have full decision-making responsibility regarding physical care, education, and emotional well-being for the youth.
- The relationship between the adoptive parents and CEDARS will change in regards to regular and ongoing involvement; however, CEDARS remains committed to the family and the success of the adoption. Adoptive families can continue to access the on-call number if needed, as well as participate in any aftercare services that may be helpful to the family.
- If there are other foster children who remain in the home and who have not been adopted, CEDARS will continue to support those children until their case is closed.

Aftercare

CEDARS works to connect adoptive families with post-adoptive services by linking them with services in their local community as well as their own personal supports. Prospective adoptive families are encouraged to explore their options in advance for ongoing respite utilizing their informal supports. The family is provided with information about Nebraska Children's Home Society, which provides extensive post-adoption services and support. The CEDARS Foster Care Specialist educates the family about available therapeutic services in their community that could also be utilized post-adoption. Additionally, CEDARS offers aftercare services and has a wide array of programs that could be utilized for additional support by the family post-adoption outside of the Foster Care program.

CEDARS may offer any of the following aftercare services to the family:

- Respite on an as needed basis
- Access to emergency on-call staff support
- Referrals to community resources such as Nebraska Children's Home Society
- Information on how to access other available CEDARS services if needed

Aftercare services provided by CEDARS can be used as long as needed by the family.