



**KVC<sup>®</sup> Kansas**

*We all need connection.*

# **Foster Parent Policy & Procedure Manual**

Effective February 2008  
Updated November 2014  
Updated April 2019  
Updated April 2020  
Updated April 2021  
Updated April 2022



**KVC**<sup>®</sup> Kansas

*We all need connection.*

KVC Behavioral HealthCare, Inc.  
Corporate Office  
21350 W. 153<sup>rd</sup> Street  
Olathe, KS 66061  
913.322.4900  
[www.kvc.org](http://www.kvc.org)

**Disclaimer:** This manual reflects KVC's policies and procedures **only**. Policies for other foster care agencies may vary.

## Table of Contents

|  |    |
|--|----|
| <b>Section I: Overview</b> .....   | 7  |
| KVC Mission: .....   | 7  |
| KVC Vision.....  | 7  |
| KVC’s Guiding Values.....  | 7  |
| Bill of Rights for Foster Children .....                                 | 9  |
| Client Rights Children .....   | 10 |
| Statement of Rights.....   | 10 |
| Kansas Foster Parents’ Rights. ....                                      | 11 |
| KVC History .....  | 13 |
| <b>Section II: KVC Child Placing Agency (CPA)</b> .....                  | 15 |
| Program Description.....   | 15 |
| Program Goal .....   | 15 |
| Program Philosophy .....   | 15 |
| Levels of Foster Care Placement.....                                     | 16 |
| Basic 1 Level foster care .....  | 16 |
| Basic + Level foster care.....   | 16 |
| Intensive Level 1 Foster care.....                                       | 17 |
| HCBS Waiver Family Foster homes.....                                     | 17 |
| Police Protective Custody (PPC).....                                     | 18 |
| Non-Related Kinship Care (NRKIN).....                                    | 18 |
| Therapeutic Foster homes .....   | 19 |
| Licensed Day Care Providers with Exceptions to Provide Foster Care ..... | 20 |
| Required Documentation .....   | 20 |
| Role of the CPA Staff Member .....                                       | 22 |
| Responsibilities of the CPA Staff .....                                  | 22 |
| Grievance Process .....  | 23 |
| Compliment and Concern Process .....                                     | 23 |
| Satisfaction Survey .....  | 23 |
| Closure or Withdrawal of Sponsorship.....                                | 24 |
| <b>Section III: Foster Parent Guidelines</b> .....                       | 25 |

|   |           |
|---|-----------|
| Role Description: .....                                     | 25        |
| Non-discrimination Policy for KVC Foster Families .....     | 25        |
| Foster Family Provider Requirements .....                   | 25        |
| Qualifications and Responsibilities.....                    | 25        |
| Foster Family Code of Ethics.....                           | 27        |
| Preamble.....   | 27        |
| Foster Parent Principal Agreements.....                     | 27        |
| Foster Family Resources.....                                | 28        |
| Area Foster Family Support Group.....                       | 28        |
| Resource Family Conference.....                             | 28        |
| Foster Parent Training Opportunities.....                   | 28        |
| New Foster Parent Training Cohort (TSC).....                | 28        |
| Therapy.....  | 29        |
| KVC Recruitment/Finder’s Fee .....                          | 29        |
| <b>Section IV: Foster Family Placement Information.....</b> | <b>30</b> |
| Placement Process Overview.....                             | 30        |
| Placement.....  | 30        |
| How Placement Affects the child/youth.....                  | 31        |
| Placement Stability.....                                    | 31        |
| Case Planning and Administrative Reviews .....              | 31        |
| Visitation.....   | 32        |
| Parent/Child Contacts.....                                  | 32        |
| Permanency Worker/Child Contacts .....                      | 32        |
| CPA staff member/child contacts.....                        | 32        |
| CPA Staff Member/Foster family contacts .....               | 32        |
| Reports to Court.....                                       | 34        |
| Communication and Partnership .....                         | 34        |
| Confidentiality Policy.....                                 | 34        |
| A note on social media usage .....                          | 34        |
| When to Call the CPA worker .....                           | 35        |
| Reporting Critical Incidents.....                           | 35        |
| Runaway/Missing Youth.....                                  | 36        |

|  |    |
|--|----|
| Contacts with Law Enforcement .....                            | 37 |
| Mobile Crisis Response.....                                    | 37 |
| Foster Parents as Mandated Reporters.....                      | 37 |
| Allegations of Abuse Against Foster Parents .....              | 38 |
| What should the foster parent do during an investigation?..... | 38 |
| Access to Placement Provider Files and Information.....        | 39 |
| Discipline Policy.....   | 39 |
| Section V: KVC Policy and Procedures.....                      | 40 |
| Financial Expenses.....  | 40 |
| Youth Bank Accounts.....                                       | 40 |
| Respite Care.....  | 41 |
| SED Waiver Respite .....                                       | 41 |
| Absentee Reimbursement Policy .....                            | 41 |
| Change in Level of Care and Daily Rates of Reimbursement.....  | 42 |
| Federal Tax Income .....                                       | 42 |
| Insurance .....  | 42 |
| Transportation .....   | 42 |
| Use of Child Safety Seats .....                                | 43 |
| Mileage .....  | 43 |
| Daycare.....   | 44 |
| Exceptions for Daycare .....                                   | 45 |
| Medical Care and the Medical Card .....                        | 45 |
| KanBe Healthy/Dental Screen.....                               | 46 |
| Care of Medically Fragile Children .....                       | 46 |
| Storage and Administration of Medication .....                 | 47 |
| Medical Records.....   | 48 |
| Emergency Procedures.....                                      | 48 |
| Fire Safety.....   | 48 |
| Tornado Safety.....  | 49 |
| Education.....   | 49 |
| School enrollment .....  | 49 |
| Enrollment procedures.....                                     | 50 |

|   |    |
|---|----|
| School Withdrawal Procedures .....                              | 50 |
| Educational advocates .....                                     | 50 |
| Home Schooling .....  | 51 |
| Tutoring .....  | 51 |
| Summer Activities and Summer School.....                        | 51 |
| Driver’s Education .....  | 51 |
| Driving and Riding with Other Youth.....                        | 51 |
| Beds .....  | 51 |
| Religious and Faith Based Practices .....                       | 51 |
| Employment.....   | 52 |
| Field Trips, High Risk Sports, and Recreational Activities..... | 52 |
| Swimming .....  | 52 |
| Haircuts.....   | 52 |
| Sleepovers.....   | 53 |
| Vacations .....   | 53 |
| Leaving the Child/Youth Unattended.....                         | 53 |
| Informal Visitations .....                                      | 53 |
| General Safety Plan .....                                       | 54 |
| Outdoor Safety Plan .....                                       | 54 |
| Foster Family Moves .....                                       | 54 |
| Compliance Action Plans (CAP).....                              | 54 |
| Partnership Development Plan (PDP).....                         | 54 |
| Red Books .....   | 55 |
| Life books.....   | 55 |
| Confidentiality of the Lifebook.....                            | 56 |
| Life Skills .....   | 56 |
| Adoption Services.....  | 57 |

## Section I: Overview

### KVC Mission:

It is the mission of KVC to enrich and enhance the lives of children and families by providing medical and behavioral healthcare, social services, and education.

### KVC Vision

KVC's vision is to provide leadership in child welfare and behavioral healthcare industries through the development and provision of effective practices with proven outcomes of safety, permanency, and well-being.

### KVC's Guiding Values

KVC has always operated under a plethora of guiding values or belief statements and "isms" (sayings or quotations – internal or external – that capture the essence of our beliefs). These have been stated in a variety of ways over the past 30 years and therefore some of the following may sound redundant or overlapping. But these are of great importance and form the foundation that guides all work we do, so they are worth repeating in a variety of ways. The most used include:

- With privilege comes responsibility: KVC has the privilege of serving tens of thousands of children and families each day. It is our responsibility to live up to the expectations people have for quality services. Helping families address their needs and helping care for others' children is an awesome responsibility and one never to be taken lightly.
- Excellence is not an act, it's a habit: We should strive to be "excellent" every day in every interaction.
- Every interaction is an intervention: Every single interaction ( with clients, families, staff, and community) is an opportunity for growth, advancement or improvement of some kind. Use every minute wisely and do not waste any opportunity.
- What would you want if this were your child? Your family? How close can we come to identifying services and resources they need and putting a plan in place with them to address these needs?
- How would you want your child/family to be treated?: Treat each child/family as though they were your own. This is how we should treat families in every interaction.
- Placement in the least restrictive environment: If your child can't remain with you, where would you hope they'd be placed? Most families and children are far more comfortable placed with caring relatives or others close to their family. If not available, then another strong, community family setting is the goal. If residential care is needed, it should be for the shortest possible period necessary to initiate treatment and stabilize, then discharge to the family setting for continued treatment as needed.
- Everything in "child time": How long would you want your child away from you? Every day that a child is separated from his/her family can seem like a lifetime. **Timely** permanency is in the best interest of the child.
- Raising the bar: How important is it that we continue to build upon improvements? We're never "there". We can never become content or rest on our laurels. We can always do better for children

and families.

- If you're not growing, you're dying: Healthy organizations continually create new opportunities for positively meeting the needs of those we serve, benefiting more children and families and creating growth opportunities for staff.
- There is no magic answer down the street: If a child and family come to KVC for treatment or service, it is our responsibility to figure out the answer(s) with them, not to refer them elsewhere. KVC has more resources than others, as well as the creativity, energy, and commitment to finding solutions.
- Attack the problem, not the person: We must be able to “check our egos at the door” and be willing to attack internal and external barriers, without attacking individual people. External stakeholders are often more than happy to point out our weaknesses; it is always much better if we proactively identify needs and address them internally.
- Children must be protected: All children have the right to be safe and free from harm, both physically and emotionally, and protected wherever they live; but the best way to protect child in the long run is to strengthen and support their families. There are many aspects of child safety and well-being to be addressed.
- Families know best: Families are the experts concerning their own strengths, needs and resources. They have the right to define their own “family” and to protect their children. Families can make good decisions for their children. Each child and family have the right to be heard concerning their individual needs. All families, whatever the definition, deserve respect and understanding.
- Children grow best in families: Children must have consistency in caregiving and relationships, including ties to their siblings and extended family. The philosophy of “least restrictive environment” prevails; children should not grow up in institutions. If they must be placed in institutions, it should be for the shortest period possible in which to provide safety and stabilization. A constant effort must be made towards placement in a family, preferably that of a relative, pending permanency. A constant effort must be made to ensure a lasting relationship with a caring adult for every child and youth. All children are adoptable.
- Children can't wait: Children must have their needs met in a timely manner. A month, a week, even a day to a child who is separated from family can seem like a lifetime. The possibility of successful reintegration of children placed in out-of-home care decreases in direct correlation to the time they remain away from their families. Significant family visitations and interactions meet the needs of children while increasing the likelihood of reunification. Concurrent case planning can expedite permanency for a child.
- Children and Families are a part of a larger community: Communities are rich with resources that can offer ongoing, naturally occurring support to families. The state (or its grantees) and the courts should not be a part of a family's life for any longer than necessary to assure safety and stability. Children must have equal protection, care and attention, including attention to their needs in the context of their communities and cultures.
- The more desirable place for children to grow up is with their own caring families, when their families are able to provide safe and nurturing relationships intended to last a lifetime.
- All children and families should feel safe in their environments

- All children’s families, however a family is defined ( including nuclear, blended, extended, tribe or clan, or adoptive) are unique and have value, worth, integrity and dignity.
- All families have potential.
- All parents can make good decisions for their families.
- All families have inherent, individual strengths.
- All families deserve respect and understanding for their individual beliefs, cultural differences, and/or value system.
- Crisis situations can present opportunities for change.
- The possibility of successful reintegration of children placed out-of-home decreases in direct correlation to the time they remain out-of-home.
- Children can maintain relationships with their family members whenever possible and appropriate.
- Children, families, staff and stakeholders deserve a well-maintained physical environment-safe, secure, healthy, and clean.
- All staff is accountable for carrying out KVC’s mission.
- KVC recognizes the need for sound financial principles and practices.
- KVC has a commitment to excellence in the quality of its services.
- Community involvement through volunteer participation is of great value to the organization.
- Strong, professional staff is key to service quality and to the success of the organization.

### Bill of Rights for Foster Children

Ratified in Congress Hall, Philadelphia, Saturday, the Twenty-eighth of April, Nineteen hundred and seventy-three; EVEN more than for other children, society has a responsibility along with parents for the well-being of foster children. Citizens are responsible for acting to insure their welfare.

EVERY foster child is endowed with the rights inherently belonging to all children. In addition, because of the temporary or permanent separation from and loss of parents and other family members, the foster child requires special safeguards, resources and care.

#### **Every Foster Child has the Inherent Right:**

*Article the first...*To be cherished by a family of his own, either his family helped by readily available services and supporters to reassume his care or an adoptive family or by plan, a continuing foster family.

*Article the second...*To be nurtured by Foster Parents who have been selected to meet his individual needs and who are provided services and support including specialized education, so that they can grow in their ability to enable the child to reach his potential.

*Article the third...*To receive sensitive, continuing help in understanding and accepting the reasons for his own family’s inability to take care of him, and in developing confidence in his own self-worth.

*Article the fourth...*To receive loving care and respect as a unique human being...a child growing in

trust in himself and others.

*Article the fifth...* to grow up in freedom and dignity in a neighborhood of people who accept him with understanding, respect, and friendship.

*Article the sixth...* To receive help in overcoming deprivation or whatever distortion in his emotional, physical, intellectual, social, and spiritual growth may have resulted from his early experiences.

*Article the seventh...* To receive education, training, and career guidance to prepare him for a useful and satisfying life.

*Article the eighth...* To receive preparation for citizenship and parenthood through interactions with Fostive Parents and other adults who are consistent role models.

*Article the ninth...* To be represented by an attorney at law in administrative or judicial proceedings with access to fair hearings and court review of decisions, so that his best interests are safeguarded.

*Article the tenth...* To receive high quality of child welfare services, including involvement of the natural parents and his own involvement in major decisions that affect his life.

## Client Rights Children

KVC Behavioral Healthcare supports and protects the fundamental human, civil, constitutional, and statutory rights of clients.

## Statement of Rights

A client of KVC has the right to:

1. Adequate and humane treatment regardless of income, race, religion, ethnicity, gender identity, gender expression, sexual orientation, impairment, or disability
2. Recognition of personal dignity in the provision of care and treatment.
3. Services in the least restrictive environment possible.
4. Individualized treatment and planning.
5. Be advised of alternate service options and providers.
6. Be an active participant, along with your parent/guardian, in planning your case services.
7. The periodic review of your case plan.
8. Participate in discharge and aftercare planning.
9. Confidentiality
10. Refuse to participate in any research project without compromising your access to KVC services.
11. Be informed and give consent or denial for special observation and audiovisual techniques and other procedures where consent is required by law.
12. Safe and sanitary housing.
13. Medical care and treatment.
14. A nourishing, well-balanced diet

15. Freedom from verbal and physical abuse.
16. Receive visitors according to your visitation plan.
17. Make phone calls according to phone policy.
18. Speak to legal counsel and/or your social worker within a reasonable amount of time.
19. Send and receive mail. (If clinically indicated, mail may be opened by the person caring for you and checked for contraband. When this becomes necessary, documentation will be included in the client record.)
20. Have visitation, telephone and outdoor restrictions clearly explained to you and your parent/guardian. Such restrictions will be reviewed regularly.
21. Have explained to you and your parent/guardian the nature, rationale, and most common side effects of all medications prescribed.
22. Provision of an adequate number of competent, qualified, and experienced staff to supervise and implement your case plan.
23. Know the names and titles of all staff members involved in your case.
24. Know the nature of the care you will receive.
25. Know the rules of your placement.
26. Wear appropriate personal clothing.
27. Be heard, to identify problems and to express grievances in accordance with written procedures.

### Kansas Foster Parents' Rights.

Foster parents provide care for children who are in the custody of the Kansas Department for Children and Families (DCF). They play an integral, indispensable, and vital role in the State's effort to care for dependent children displaced from their biological families/caregivers. It is in the best interest of Kansas' child welfare system to acknowledge foster parents as active and participating members of this system and they should be supported through the following rights:

1. The right to be treated by DCF, KDOC-JS and/or DCF Case Management Grantees and other partners with dignity, respect, and trust as a primary provider of foster care and a member of the professional team caring for children in the care/custody of the DCF Secretary.
2. The right not to be discriminated against on the basis of religion, race, color, creed, gender, marital status, national origin, age, gender identity, gender expression, sexual orientation, disability or impairment.
3. The right to continue with their own family values and beliefs, so long as the values and beliefs of the foster child and the biological family are respected and not infringed upon. Consideration shall be given to the special needs of children who have experienced trauma and separation from their families.
4. The right to exercise decision making in connection with the child in foster care, consistent with the limits of the policies, procedures, and other directions of DCF, KDOC-JS, and/or DCF grantees and within the limits of state and federal law.
5. The right to receive standardized pre-service training by DCF, KDOC-JS and/or DCF grantees at appropriate intervals to meet mutually assessed needs of the child and to improve foster parents' skills. Training approved by the licensing agency and conducted by foster parent support groups shall be recognized as pertinent, and information about training offered by foster parent support groups

shall be regularly shared with family foster homes licensed within the region served by those support groups.

6. The right to receive timely financial reimbursement according to agreement and applicable law and to be notified of any costs or expenses for which the foster parent may be eligible for reimbursement.
7. The right to receive information regarding services and to reach DCF, KDOC-JS and/or DCF grantee staff during regular business hours and the right to be provided contact information for after business hours emergencies.
8. The right, prior to the placement of a child, to be notified of any issues relative to the child and known to DCF, KDOC-JS and/or DCF Grantees at such time and which may jeopardize the health and safety of the foster family or the child or after the manner in which foster care should be administered.
9. The right to discuss known information regarding the child prior to placement. DCF and/or DCF grantee will provide such information as it becomes available as allowable under state and federal laws.
10. The right to refuse placement of a child in the foster home or to request, upon reasonable notice, the removal of a child from the foster home per applicable law and policy.
11. The right, during the time a child is placed with the foster parent, to receive from DCF, KDOC-JS and/or DCF grantee ongoing information known to DCF and/or grantee, relevant to the care of the child and as allowed per applicable law.
12. The right to be notified of case plan meetings per DCF policy and the right to provide input and participate in the case planning process regarding the child.
13. The right to participate in and be informed about the planning of visitation between the child and the child's biological family, recognizing that visitation with the biological family is important to the child and necessary to the success of timely reintegration if reintegration is the case plan.
14. The right of foster parents to assist and support the birth family in the reintegration efforts.
15. The right to support and encourage the permanency goal of every child in foster care, including transitioning out of foster care.
16. The right to communicate with the child's Child Welfare Case Management Provider (CWCMP) or KDOC-JS and to share and obtain relevant and appropriate information regarding child in placement.
17. The right to communicate related to the case plan of the child with other professionals who work with the child in foster care within the context of the professional team including, but not limited to: Therapists, physicians, and teachers, as allowable by state and federal regulations/statutes.
18. The right to be notified in advance of any court hearing, including periodic reviews held by the court and the right to submit a completed Foster Parent Court Report Form per DCF Policy.
19. The right to be considered, when appropriate, as a placement option when a child who was formerly placed with the foster parents has re-entered the foster care system.
20. The right to be considered, when appropriate, as an adoption resource when a child in care is eligible for adoption.
21. If the child in foster care has been placed in the home for more than six months, statutorily the foster parents have the right to a 30-day disruption notice unless an emergency exists, or the move is to the selected pre-adoptive family for the purpose of facilitating adoption. Moves should be generally planned, and foster parents should be included in the planning process, allowing for the opportunity for closure. The planning process should identify how the child is to be informed of the move, when appropriate to do so.
22. The right to file a grievance or complaint with DCF or DCF grantee. DCF, DCF Grantee and each Child Placement Agency (CPA\_ have the responsibility to inform foster parents of their agency's grievance process. Foster parents have the right to be informed of options for submission of grievances.

23. When in the child's best interests, the right to continue contact and/or communication with child subsequent to the child moving from the foster parents' home, subject to the approval of the child, when age and developmentally appropriate, and the child's biological parent(s) whose rights have not been terminated.
24. The right to direct questions to DCF, KDOC-JS and/or DCF Grantee regarding information, concerns, policy violation and/or a compliance action plan relating to licensure as a foster family home.
25. The right to fair and impartial assessment, evaluation and feedback from the sponsoring CPA.
26. The right to access DCF policy and procedure manual on the website of DCF.
27. The rights and responsibilities enumerated herein above shall be given full consideration when DCF develops and approves policies regarding foster care and adoptive placement.
28. DCF shall offer the Foster Parent Bill of Rights to every foster family at the time of initial licensure and at each renewal.

### KVC History

In 1970 Wyandotte House was established for eight homeless boys by the Junior League of Johnson and Wyandotte County, the Jaycees and the juvenile courts. Through the years not only did the programs grow but the need to expand services to meet the needs of the children and youth, birth to 22, who had been removed from their homes because of abuse, neglect, or abandonment, grew as well. In the mid 1980's the President/CEO and Board of Directors made a decision to undertake not one, but two capital campaigns to build a new facility on a 55-acre site donated by the city of Kansas City, Kansas and the Board of Public Utilities. The site is located near the Kansas River, or as it is locally known, the Kaw River. Following the successful completion of these campaigns and the development of the campus, the name of the organization was changed in 1992 from Wyandotte House to Kaw Valley Center (KVC) because a house was no longer descriptive of the organization. In 2004 the agency name was legally changed to KVC Behavioral Healthcare, Inc.

KVC is a private, not-for-profit agency providing services to children and families and is accredited by the Joint Commission on Accreditation of Healthcare Organizations. KVC represents one of the largest continuums of care in the state of Kansas. Services include, but are not limited to:

- Case Management
- In-home intensive family services
- Parent Management Training Oregon (PMTO)
- Psychiatric Services
- Medical services
- Family Foster Care
- Adoption
- Outpatient Treatment
- Emergency Services
- Residential Care
- Intensive treatment
- Educational programs
- Independent Living programs
- Transitional Living
- Project Rise/Prevention Programs
- Batterers Intervention Program
- Human Trafficking Assessments
- Placement Stability Support
- Substance use programs

Children and youth receive care from trained foster families based on individuals needs youth care attendants, specialists, CPA staff member, Case Managers, master's level therapist, special education

teachers, nurses, pediatricians, psychologists, and psychiatrists. For the most current information regarding programs and services, please visit the KVC website at [www.kvc.org](http://www.kvc.org)

Today, KVC provides foster family services throughout Kansas, from the Nebraska to the Oklahoma borders and from the Missouri to Colorado borders. More than 300 licensed social workers, therapists and case managers provide services to over 6,000 children each year. More than 540 KVC foster families provide homes for children and youth who are separated from their families due to abuse/neglect.

Camber, KVC Health Systems subsidiary, maintains two psychiatric residential treatment facilities in Kansas: Camber Kansas City and Camber Hays. KVC Kansas maintains a Qualified Residential Treatment Program (QRTP) in Kansas City, Kansas. General offices are located in Chanute, Hiawatha, Independence, Kansas City, Lawrence, Olathe, Pittsburg, Topeka, and Wichita. KVC Health Systems' corporate office is located at:

**21350 W 153<sup>rd</sup> Street  
Olathe, KS 66101-5413  
913-322-4900**

Based on the successful model programs KVC developed in Kansas, the agency also provides quality family services in West Virginia, Kentucky, Missouri and Nebraska.

## Section II: KVC Child Placing Agency (CPA)

### Program Description

KVC is a state licensed Child Placing Agency fulfilling all requirements and standards for the State of Kansas. KVC provides foster care services for children and youth that have been removed from their homes due to abuse or neglect. Foster families provide 24-hour care for children and support for their parents while children are separated from their birth family due to physical abuse, sexual abuse, neglect, or other circumstances requiring out-of-home care.

It is the role of the child or youth's foster family to provide a safe, loving, healthy (both physically and emotionally) setting that supports the child or youth and birth family in moving towards permanency. Individual daily needs and structure must be provided so the child or youth progresses in their individual program. The child or youth receives the necessary medical and dental prevention or treatment and continues with as little additional disruption to their lives as possible during this extraordinarily difficult time. Clear expectations and consistency are of the utmost importance in making a child or youth feel safe.

KVC specializes in Basic 1-3, Intensive and Therapeutic levels of care in foster family homes to state grantees, adoption grantees, and other agencies in need of temporary family settings for children and youth.

### Program Goal

KVC's foster family program, also known as KVC Child Placing Agency (CPA), provides safe, supportive family settings in which children and youth may be supervised and cared for as their permanency goals are addressed utilizing a family centered, strengths-based approach.

Children and youth in the foster family program are exposed to values, attitudes and skills that enable them to function successfully in the mainstream of society. The program adheres to the principles of least restrictive environment and experiential learning. A second goal of this intervention is to help children and youth learn new behaviors and ways of viewing their world, allowing the potential for breaking the cycle of abuse and neglect and to promote permanency. Developing a partnership between the foster parent and the birth parents provides an opportunity to share and model the value, attitudes and skills required of foster families sponsored by KVC's CPA.

### Program Philosophy

Child abuse/neglect is a problem that affects children and youth who come into the custody of the Kansas Department for Children and Families (DCF), formerly SRS. By the time this population of children and youth reach adolescence, they have often endured years of abuse and/or neglect. To survive this ordeal, they may have developed many survival skills that are maladaptive in relation to societal values and norm. These behaviors are so entrenched in their lives that the child or youth may need professional help to learn to come to terms with their past and to develop positive behaviors that will enable them to live independently and successfully.

KVC believes that every child and youth deserve a “permanent” family or support system and children and youth should not grow up in foster care. Studies show that once removed from the home, the longer the child or youth remains out of the home, the more difficult it will be to reunify the child or youth successfully with their family.

It is the goal of KVC to provide support to Foster Parents. This allows for the foster family to adequately provide for the child in the least restrictive environment in which the result enhances the child’s social, physical, educational, and psychological well-being. Safety for children within a family setting is the key.

The KVC CPA program is based on the following assumptions:

- Children and youth often come into custody deficient in positive attitudes, skills, and the knowledge necessary for successful independence.
- Foster family care, devoted to modeling success attributes, can lead to better performance by children and youth after leaving the foster care system and is somewhat less restrictive than traditional group home care.
- Foster families will develop partnership with birth parents to support the permanency plan, encourage opportunities to model appropriate parent skills, and values possessed by foster homes sponsored by KVC. KVC sponsored foster homes **will** accept and encourage contacts between the child and their parent(s) and siblings and will provide the child with emotional support even when the contacts with their parent(s) and siblings are disrupting and confusing to the child.

### Levels of Foster Care Placement

The level of care refers to the level of need a child in foster care requires. KVC staff will complete a level of care assessment for each child, based off of behaviors and needs exhibited in the previous 90 days. The descriptions below provide examples of what needs may be exhibited by children.

All Foster homes are recruited, trained and sponsored by a CPA and licensed by DCF Licensing. At minimum, duties of every foster home include providing 24-hour care in a safe, nurturing home and to provide food, shelter, clothing, education, medical care, daily care, supervision and transportation.

#### Basic 1 Level foster care

A basic 1 level family foster home consists of a supportive family-setting, which is designed to maintain and/or improve the child’s development and functioning.

#### Basic + Level foster care

Basic + level foster care homes are those which have been recruited, trained, and sponsored by a CPA, and licensed by DCF Licensing to offer an alternative to group residential facilities or institutional care. Youth served shall be in need of diversion or have transitioned from a shelter, Psychiatric Residential Treatment Facility (PRTF), or a prevention placement from a higher-level facility. Duties include but are not limited to:

- Providing 24-hour care and supportive services to assure each child receives sufficient care and supervision to prevent placement in a more restrictive setting and to facilitate their return to a less

structured, alternative environment. Care and supervision include, but are not limited to: food, shelter, clothing, education, medical care, daily care, supervision and transportation.

#### Intensive Level 1 Foster care

Intensive level 1 foster care homes are those which have been recruited, trained, and sponsored by a CPA and licensed by DCF Licensing. These homes provide more structure than a family or transitional home but continue to provide it in a homelike environment. Youth served in these homes may be exhibiting moderate to severe aggression, sexualized behaviors, drug/alcohol abuse, school difficulties (including truancy, suspensions, expulsions, special education, etc.). A licensed foster home can provide Basic 1-3 and Intensive 1 foster care at the same time for different children in their home. Duties include but are not limited:

- Providing 24-hour care and supportive services to assure each child receives sufficient care and supervision to prevent placement in a more restrictive setting. Care and supervision include food, shelter, clothing, education, medical care, daily care, and transportation.

#### HCBS Waiver Family Foster homes

HCBS Waiver homes are specialized foster family homes for children who are intellectually disabled (ID), medically fragile, or have other special health care needs. These homes are recruited, trained, and sponsored by a CPA and licensed through DCF Licensing. Based on the needs of the child(ren) placed in HCBS Waiver homes, additional trainings may be required to meet the needs of the child(ren) including but not limited to educational or hospital trainings. There can be no more than a total of two foster placements, including the child on the ID or TA (Technology Assisted) Waiver in the home at one time. However, both children in foster care placement may be on the ID or TA waiver. An exception must be requested and granted from the Community Developmental Disability Organization (CDDO) that services the county where the foster family resides for any additional child(ren) to be placed in the home. Specialized care is provided for children to avoid placement in institutional or other congregate residential settings when they cannot remain with their birth parent(s).

The rate of reimbursement for non-custody youth is determined by the tier rating, established by the assessment completed by the CDDO. KVC and other grantees across the state may reimburse for children in DCF custody who are on the waiver based on the child's CDDO BASIS assessment for higher needs children with more severe disabilities.

Each HSBC Waiver foster home will perform, at the minimum, the following duties:

- Provide 24-hour care and supportive services to assure each child receives sufficient care and supervision to prevent placement in a more restrictive setting and to facilitate their return to a less structured environment. Families, as always, are strongly encouraged to utilize the services children are eligible for through their CDDO. These services are identified on the child's Plan of Care and may include services such as respite care, attendant care, and additional case management services for the child and family.

### Police Protective Custody (PPC)

KVC sponsored homes are approved to accept placement of PPC children as coordinated through the KVC Admissions Department. These homes agree to permit a child to remain in the foster home for the length of PPC status, not to exceed 72 business hours, or until transitioned to another placement. The foster family providing PPC will ensure there is no contact between the child and family members (including email, social media, telephone, correspondence, and face-to-face) unless arranged and approved by DCF. There should be no school attendance by the child and no occasion when the child is not supervised by a responsible adult. Daycare is not provided.

The foster family will notify their CPA staff member of any healthcare concerns/needs *before* seeking medical care except in those cases of extreme emergency.

The PPC documents will be used as a medical consent and medical release in the event medical care is necessary for the youth placed in PPC.

### Non-Related Kinship Care (NRKIN)

Non-related kinship care, or NRKIN, is defined as the placement of a child in the home of another adult with whom the child or the child's parents already has a close emotional attachment. DCF strongly advocates care for children by their kin as the first choice for placement when then child's family cannot provide adequate care. If the kin are not related to the child, they shall be required to meet DCF Licensing regulations to provide out of home services.

To expedite placement of children with NRKIN, the required for the completion of TIPS-MAPP or TIPS-DT and other training required prior to a child being placed in the home is waived. The NRKIN shall be required to complete the TIPS-MAPP curriculum and other pre-service training prior to licensure. If the NR KIN meet requirements for informal care, which does not require licensure, including compliance with background clearances and home assessment, the child may be placed in informal care for the first 30 days of out of home care.

Prior to the child's placement, KVC shall request a Child Abuse/Neglect Central Registry (CANIS) check on all members of the NRKIN family who are over the age of 10. KVC shall also request a Kansas Bureau of Investigation check on all members of the NRKIN family who are over the age of 10. KVC shall also require the members of the family who are over the age of 10 to sign a statement, the Declaration of No Prohibitive Offences, for DCF Licensing. Signing this form indicates a check of the criminal history database required by DCF licensing will not reveal any conviction for any offenses, unless they have been expunged, which would prohibit DCF Licensure. DCF Licensing shall complete a KBI criminal history background check prior to issuing the temporary permit. The DCF Licensing criminal history background check and CANIS checks are required for all licensed foster parents and shall be completed prior to full licensure.

Immediately following placement, KVC Shall complete the family assessment and licensing packet. The packet shall be sent to DCF Licensing no later than 14 days after the child's placement. DCF Licensing shall review the packet and, if all requirements are met, issue a temporary permit within 30 days after child's placement. The temporary permit remains in effect for 90 days from the date of issuance. This

temporary permit may be extended for one additional period not to exceed 90 days, to allow the family time to complete TIPS-MAPP. No further extensions shall be granted. NRKIN placements shall comply with all DCF Licensing requirements prior to a full foster home license being issued.

NR KIN placements receive daily reimbursement based on the level of care for the child and the status of the license, such as prior to receiving a temporary license or after receiving a temporary license. KVC shall also provide the same level of supports and services which are provided to other foster families to ensure the child's needs are met and the placement remains stable.

The duties of all licensed foster homes include but are not limited to:

- Daily living services
- Transportation
- Recreation
- Situational counseling
- Situational training
- Participation in the case planning process
- Assist in planning and working towards concrete and measurable treatment goals.
- Notifying the CPA division within 1 hour of any critical incident
- Crisis intervention
- Follow all developed plans, such as safety plans, compliance action plans and partnership development plans, created for the home and/or specific child in the home
- To assist in maintaining connections while a child is placement out of the home, the placement shall work in partnership with the birth parents as a mentor and role model.

### Therapeutic Foster homes

A therapeutic family foster home is a family home which provides 24-hour care for children and youth with high acuity needs who are in out-of-home placement with a goal to meet their safety and well-being needs in the community. Therapeutic family foster homes must comply with DCF licensure requirements as well as the sponsoring Child Placing Agency (CPA). The Therapeutic Family Foster Home Program is guided by the National Program Standards of the Family Focused Treatment Association. The therapeutic family foster parent(s) are an integral part of the Therapeutic Foster Care (TFC) case team and are viewed as colleagues and primary interventionists working towards achieving stability and timely permanency. The TFC case team supports the therapeutic family and child. The TFC case team is comprised of the following, but not limited to: the therapeutic family foster parent(s), biological parent(s), reintegration home, adoptive parent(s), the CPA workers, CMP workers, therapist, psychiatrist, Tribal staff and any other specialized providers involved in the child's life.

Foster parents providing a therapeutic level of care for a youth in DCF custody are expected to engage in additional trainings each year, in order to ensure they have the knowledge necessary to support the children in their care. In addition, Therapeutic Foster Homes are expected to be very engaged with the entire team, participating in regular check-ins with their family service coordinator and the case

manager. Communication with the entire team is an integral piece to the success of the therapeutic foster home.

### Licensed Day Care Providers with Exceptions to Provide Foster Care

Licensed day care providers can only provide foster care with an exception in place. In addition to the exception, the following shall occur:

- Background checks through the Kansas Bureau of Investigation (KBI) and Child Abuse/Neglect Information Search (CANIS) must be completed for any foster youth 10 and older prior to being placed in a licensed daycare home with an exception to foster. If results indicate a prohibited offense, the youth will not be placed in the licensed day care home. Documentation shall be kept in the family file.
- The CPA may run the KBI internally. The CPA may also work in conjunction with the child's case manager to obtain a CANIS check from the child's DCF worker to expedite proposed placement.
- CPA, Permanency and the foster parent will assess the appropriateness of each placement in a licensed daycare provider's home with an exception to foster care prior to placement in order to determine the family's ability to meet both the foster child and daycare children's needs. Documentation shall be kept in the family file.
- In some instances, the completion of a safety plan may be warranted.
- The CPA staff member will document in the foster parent database under the comment section if a home is a licensed daycare with an exception to foster. This comment will alert Admissions staff to coordinate with the CPA staff and to obtain background checks prior to any placement

### Required Documentation

Refer to DCF Licensing regulation K.A.R. 28-4-808 and K.A.R. 28-4-809

Each foster home must maintain the following documents pertaining to the licensure and operation of the family foster home. Copies of these shall be kept in the home as well as with the sponsoring CPA:

- Family Foster home records;
  - The sponsoring agency's approval for any of the following, if applicable:
    - Approval for the licensee to provide respite care
    - Approval for the use of informal supervision, and
    - An approved outdoor safety plan
  - A copy of the safety rules for the use of swimming, wading pools or hot tubs,
  - Any exceptions that have been granted
  - A copy of the regulations governing family foster homes, which can be found here [Licensing Regulations](#).
  - Documentation of the information submitted for background checks as specified in K.A.R. 28-4-805
  - A copy of the licensee's documentation of each critical incident for each child in foster care
  - A copy of the record of each rabies vaccination for each domesticated dog and each

- domesticated cat owned by an occupant of the family foster home, and
  - Documentation of accident and liability insurance for each vehicle used to transport children in care.
- Caregiver records:
  - Documentation of completed trainings
  - A health assessment that meets the requirements of K.A.R. 28-4-819 and documentation of a negative tuberculosis test or chest x-ray.
  - A copy of a valid driver's license, if applicable. A copy of the license shall also be provided to the CPA
  - All information for the extended family members identified for informal visitation
- Foster family members 16 and older.
  - A health assessment that meets the requirements specified in K.A.R. 28-4-819 and documentation of any negative tuberculosis test or chest x-ray
  - A current immunization record, and
  - A copy of a valid driver's license, if transporting any child in foster care. A copy shall also be provided to the CPA.
- Foster family members under 16 shall have record of a health assessment that meets requirements in K.A.R.28-4-819 and documentation of immunizations as specified in K.A.R.28-4-819.
- Child in foster care
  - The approval of the sponsoring child placing agency
  - Signed medical and surgical consent forms, or in the case of an after-hours emergency placement, a provision for obtaining medical and surgical consent forms
  - A completed placement agreement or a completed emergency placement form
  - A description of the circumstances leading to the current placement and, if known. The reason for referral.
  - A description of the child's recent circumstances, including any medical problems, mental health concerns, and safety concerns, including any assaultive behavior and victimization concerns, if known
  - Information about the child's medication and dietary needs, and the name of each of the child's current health care providers if known
  - Any allergies from which the child suffers, inf known
  - The name, address, and telephone number of the contact individual for the last educational program the child attended.
  - Authorization regarding disclosure of confidential information for the child in foster care.
  - Documentation, if applicable, of a case plan authorizing the use of physical restraint.
  - Documentation, if applicable, of each use of physical restraint on a physical restraint report form
  - Medical and surgical consent forms
  - The name, address, and telephone number of a physician to be called in case of emergency.
  - No later than 14 calendar days after placement, the foster home shall review the following information:

- A copy of the court order or other document authorizing the child-placing agent to place the child in foster care.
- A designation of the race or cultural heritage of the child, including tribal affiliation, if any.
- A completed and signed placement agreement, including emergency contact information, if not received at the time of placement.
- Signed medical and surgical consent forms, if not received at the time of placement.
- The name, address, and telephone number of the child's parents or legal guardian.
- The spiritual or religious affiliation of the child and the child's family.
- The child's placement history summary, including the name, address, and telephone numbers of any advocates.
- A description of positive attributes and characteristics of the child and, if available, any related information from the child, the child's family including siblings, and concerned individuals in the child's life.
- The name, address, telephone number, and, if applicable, the email address of the child placing agent who is responsible for supervising the child's placement.
- A copy of the current case plan, if completed. If this plan has not been completed, the licensee shall obtain a copy within 14 calendar days of the completion of the plan.
- Current copy of the medical records/Kan Be Healthy (KB) conducted by a licensed physician and/or nurse with a current license to practice in Kansas
- Current copy of Immunization and dental records
- Educational enrollment information, school records, Individualized Education Plan( IEP)
- Social security Card
- Birth Certificate
- The name, telephone number and email of the child's Guardian Ad Litem (GAL)
- If the foster home does not have the information specified above, the foster home shall request the information from the sponsoring CPA and shall document the request.

### Role of the CPA Staff Member

The CPA staff member is responsible for coordinating all support needed by a foster parent and acts as a liaison between the foster family and the case management provider. The CPA staff member's primary goal is to provide support to the foster family and assure that children or youth placed in the family's home are safe. The CPA staff member is also responsible for recruiting, training and licensing new foster family homes. They will provide monthly update reports at approximately 30-day intervals and maintain all licensing related activities for the foster family home.

### Responsibilities of the CPA Staff

It is the responsibility of the CPA staff member to provide support to the foster family home through:

- Monthly home visits

- Regular phone calls
- Structured Decision Making (SDM) assessments as required
- Crisis intervention and safety planning as needed
- Monthly walk through of the home including a completion of a Notice of Survey Findings (NOSF)
- Support for the foster family home during a crisis
- Assure the appropriate paperwork for the child is received at the time of placement. If the paperwork was not received, the CPA staff will request such paperwork from the child's case manager.

If needed, assist the foster parent with the following:

- Enrollment in school
- Follow-up with medical appointments, including medical, dental and vision
- Secure therapy appointments
- Initiate training for the foster family
- Assist the family with locating annual training hours
- Attend case plans and court hearings
- Attend IEP meetings or other school meetings as required.
- Attempt to coordinate respite when requested by the foster parent. The foster parent must provide a request seven days prior to the need of respite. If requesting respite around a holiday, providing as much notice as possible will increase the likelihood of a respite provider being located. The foster parent should also inform the case manager of the temporary placement for respite.

### Grievance Process

It is KVC's goal to keep all problems to a minimum. Therefore, it is important that all persons involved with the child/youth communicate clearly and openly. If a foster parent has a disagreement with a KVC CPA staff, for example, the foster parent should discuss their concern with the assigned staff member. If the foster parent is not comfortable addressing the issue with the staff member, they should contact the staff member's supervisor. If there is continued dissatisfaction, the foster parent can contact the CPA director.

### Compliment and Concern Process

Another method of expressing a compliment or concern is filling out a submission on KVC's website, at <https://www.kvc.org/contact-us/>. Submissions are received by a member of KVC's community resource team, who will respond and/or direct the comments to the appropriate department. Alternatively, a compliment or complain can be submitted by calling the KVC customer service line, (888)-497-1219.

### Satisfaction Survey

KVC's Development and Communications department sends out customer experience surveys to all KVC foster parents at various points throughout the year. The survey requests information regarding the family's overall satisfaction with KVC, as well as satisfaction with trainings, professionalism, and communication.

## Closure or Withdrawal of Sponsorship

Refer to DCF Licensing Regulation K.A.R. 28-4-804 (f)

“Any applicant may withdrawal the application for a license. Any licensee may submit, at any time, a request to close the family foster home operated by the licensee. If an applicant is withdrawn or a family foster home is closed, the current temporary permit or license granted to the applicant or licensee for that foster family shall become void.”

In addition, KVC can also choose to withdrawal sponsorship of a foster family’s license ay any time. Generally, this occurs when a family fails to meet the KVC requirements set out in the Foster Care Provider Requirements, or the policies and guidelines outlined the Foster Family Placement Agreement and/or the Foster Family Policy and Procedure manual.

It is the expectation that KVC foster homes provide either long term placement or a minimum of four respites per year, or one per quarter. Each respite should be a minimum of 24 hours. Should a family not meet this expectation, KVC may decide to withdrawal sponsorship of the home.

## Section III: Foster Parent Guidelines

### Role Description:

The KVC Foster Parent is a trained adult who volunteers to assume the responsibility and high expectations related to caring for the special needs of children/youth involved in the foster care system. Foster Parents are licensed by DCF licensing. The foster parent(s) provide nurturing, supportive family settings for children and youth in need of out-of-home placement.

### Non-discrimination Policy for KVC Foster Families

KVC does not discriminate against prospective or licensed families based on race, color, religion, gender, national origin, age, disability, or any other characteristic protected by the law. Further, KVC does not discriminate against prospective or licensed families based on gender identity, gender expression or sexual orientation. Foster families must be able to provide the child or youth with a safe environment that recognizes their cultural and religious beliefs and heritage.

### Foster Family Provider Requirements

The Foster Family Provider Requirements (refer to the document library) were designed to outline the very basic expectations of foster families. They can be used as guidelines and reminders for Foster Parents. The requirements are reviewed and signed by each family upon initial licensing and annually thereafter. The family is given a copy and the original is maintained in the master file located in the local office.

### Qualifications and Responsibilities

1. A Foster Parent is required to complete the 30-hour Trauma Informed Partnering for Safety and Permanency-Model Approach to Partnership in Parenting (TIPPS-MAPP) class or Deciding Together (DT) prior to receiving a temporary license. A different pre-service program, such as STARS, PRIDE, NTDC or an equivalent may be substituted if permission is granted by the Foster Care Program Manager. Three hours of face-to-face First Aid, Universal Precautions, and Medication Management Training must be completed before a full license may be issued. Subsequently, foster parents are responsible for completing annual continuing education hours. Foster parents providing only Basic 1 level care are responsible for completing eight hours each, or 16 for a two-parent household, per renewal period. For homes providing Basic + care, each foster parent is responsible for completing 10 hours each, or 20 hours for a two-parent household, per renewal period. For homes providing Intensive 1 level care, each foster parent is responsible for completing 12 hours, or 24 hours for a two-parent household, per renewal period. The training must be a topic related to children or youth served in foster care. Of the needed training hours, each foster parent in the home must complete a minimum of eight hours of training, which must include two hours of face-to-face training.
2. Each foster family is required to provide a minimum of three individuals who have known the family for at least one year and who will be contacted as references for the family. One reference may be a family member and two shall be non-family members. A KVC Foster Family

Reference Questionnaire will be sent to each reference. The reference will be asked to complete the entire questionnaire to the best of their knowledge. Information gathered on the prospective home will be used by KVC in determining sponsorship of the prospective foster family. Each KVC Foster family must have at least three positive references on file and complete all licensing requirements prior to accepting placement of a child. It is the responsibility of KVC CPA staff and their supervisor to review the reference questionnaire for each family before KVC decides to sponsor.

3. Foster parents should have knowledge of state and local laws, regulations, and codes pertaining to licensing and providing foster care. A copy of the licensing regulations should be maintained at the foster home. A copy can be found on the document library.
4. When a child is screened for psychiatric hospitalization and meets criteria, the foster parent is required to stay with the child until transportation arrives. If the child does not meet criteria, it is the foster parent's responsibility to maintain the child in their care.
5. If the child is reported missing and located within 24 hours the foster parent is required to maintain the youth in their home.
6. IF the child is detained by law enforcement or Juvenile Intake facility and released within 24 hours, the foster parent is required to pick up the youth and maintain them in the foster home.
7. The foster parent is required to provide arrangements for care when a child is sick, suspended, or expelled from school/daycare.
8. Foster parents should have knowledge of positive parenting and child development.
  - a. Provide supervision, protection, and care in accordance with the identified need(s) of the children and youth placed in the home.
  - b. Provide situational counseling and crisis intervention as needed.
9. Foster parents will follow the Foster Family Provider Requirements as they are written.
10. Foster Parents will follow the Placement Agreement Requirements as they are written.
11. Foster parents will have the ability to establish and maintain a working relationship with KVC, the children/youth in care and their birth parents, schools, community, courts, and DCF>
12. Foster parent(s) will accept and encourage contacts between the child and their parent(s) ad siblings and cooperate by:
  - a. Participating in Icebreaker meetings, when applicable,
  - b. Supporting the child's contact with their parents and siblings.
  - c. Having the child ready for each contact
  - d. Having clothing packed for overnight visits
  - e. Providing the medication to the parent(s) to administer as prescribed and in the original containers
    - i. If the KVC transportation department is providing transportation, the medication should be handed directly to the transportation driver.
  - f. If the KVC Transportation department is providing transportation for a visit and that transport is during mealtime, either a meal or money for a meal shall be provided.
  - g. Helping the child accept each separation from their parent(s) following each interaction.
  - h. Reporting to the CPA staff the child's reactions after interactions with their family.
  - i. Notifying KVC of any unplanned contacts between the child and their parent(s), or

between the foster parent and the parent.

13. Foster parent(s) will notify the KVC CPA staff or call the after-hours emergency phone within one hour of any contact from a child/youth who is currently or was formerly in the foster placement (e.g. child/youth informs foster parent(s) of current or intended behavior such as missing/running away, needing a place to stay, school difficulties, family conflict, etc.)
14. Foster Parents should have the ability to communicate effectively.
15. Foster Parents are mandated reporters. This requires **all** foster parents to report any suspected abuse or neglect to the authorities or DCF Child Abuse Hotline: 1-800-922-5330
16. Foster parents will maintain a copy of the DCF Licensing regulations in the home.
17. Foster Parents will participate in the development of the child's case plan.

## Foster Family Code of Ethics

### Preamble

Family foster care for children and youth is based on the theory that no unit in our society, other than the family, has ever been able to provide the special qualities needed to nurture children or youth to their fullest mental, emotional and spiritual development. If, for a certain period, a family ceases to provide these special qualities, substitute care must be used. Ideally, it is recognized that foster care is temporary in nature. Foster parents must have commitment, compassion, and faith in the dignity and worth of children/youth, recognize and respect the rights of parents, and be willing to work in partnership with the CPA to develop and carry out a plan of care for the child/youth and family.

Foster care is a public trust that requires the foster parents be dedicated to service for the welfare of children/youth and utilize a recognized body of knowledge about human beings. Foster parents' interactions must be committed to gaining knowledge of community resources that promotes the well-being of all without discrimination.

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

### Foster Parent Principal Agreements

1. I shall regard as my primary obligation the welfare of the child(ren) or youth served.
2. I shall work objectively with the agency in providing effective planning for the child(ren)/youth in my care.
3. I hold myself responsible for the quality and extent of services performed.
4. I accept the reluctance of the child or youth to discuss their past.
5. I shall adhere to all confidential information pertaining to any child/youth placed in my home.
6. I will treat with respect the findings, views, and actions of fellow foster parents and use appropriate channels, such as a foster parent organization, to express my concerns or opinions.
7. I shall take advantage of available opportunities for educating and training designated to improve my abilities as a foster parent.
8. I respect the worth of all individuals regardless of race, religion, sex, or national heritage in my capacity as a foster parent.

9. I agree to abide by all state laws, rules, and regulations for foster parents.

## Foster Family Resources

### Area Foster Family Support Group

KVC hosts a number of support groups across the state for foster families. The purpose of the meeting is to learn new skills that will better accommodate the needs of child(ren)/youth and to provide the families support needed to meet this challenge. The topics of the support groups range from discipline to building self-esteem. Each foster family is encouraged to make suggestions of topics that would best benefit them.

### Resource Family Conference

Every 18 months, KVC hosts an event for KVC foster families. Families may receive training hours by attending the conference.

### Foster Parent Training Opportunities

Children's Alliance of Kansas has developed a training department that offers classes to foster families. These classes are dispersed across the state and are typically free of charge. Foster parents can make an account and then register for trainings at [www.childally.org](http://www.childally.org). Often, KVC will post trainings on the Children's Alliance website for foster parents. The Child Welfare League of America (CWLA) is another resource for trainings. Their website is [www.cwla.org](http://www.cwla.org).

DCF PPS and DCF Licensing have established guidelines for granting Foster Parent Training hours. As a reminder, the number of hours you are required to obtain each renewal period is determined by the level of care you provide to the children in your home (Basic 1, Basic +, etc.).

Foster families are required to submit copies of their training certificates, as they complete them, to their CPA staff. Families are also responsible for keeping track of their training hours. This can be done by keeping the certificates and completing the Continued Education Record form (refer to the document library).

KVC employs Foster Parent Training Specialists to support foster parents and their training needs. Trainings facilitated by the Foster Parent Training Specialists can be found on the Children's Alliance Website. Foster parents can also refer themselves for individualized trainings by filling out the referral form.

### New Foster Parent Training Cohort (TSC)

In this model, new foster parents will be assigned to a cohort of other new foster parents to go through a twelve-month program designed to provide additional training, as well as agency and peer support. Training will include such foundational topics as partnering with bio parents, permanency, behavior and discipline, medical and mental health diagnoses, fostering teens, respite, advocacy, school and daycare issues, grief and loss, and more. The program's focus is aimed at increasing foster parent efficacy, foster parent retention, and placement stability for children in care.

While TIPS-MAPP, DT, and NTDC all cover these foundational topics to an extent, the TSC program will

enrich and deepen foster parents' understanding as they encounter real situations with the foster children in their homes.

Each cohort will attend a 2-hour training/support meeting (90 min. training/30 min. support group) once a month during their first year of fostering. Participants should be able to meet the minimum training requirements by their first re-licensure period by regularly attending TSC sessions.

If interested, you may contact your licensing worker or Family Service Coordinator (FSC).

### Therapy

Our brains are built to learn from past experiences and to store those experiences in our memory, so that the next time a threat occurs, we can respond even faster. Memory depends on the pattern of events, the strength of our feeling about those events, and how often those things happen. The more often an event occurs and the more powerful the feelings, the more difficult the memories of the experience are to replace. With this knowledge, the children who have had repeated, intense, and pattern abuse or neglect means that children's reactions time and response pattern to a sensed threat will be automatic. The response may occur so fast that the child may not be able to stop and even study if what they are feeling is truly a threat. Therefore, KVC utilizes a variety of modalities that provide our clients with trauma informed care.

Youth who are served by KVC can receive therapy through a KVC outpatient therapist, when/where available. In addition to outpatient therapy, KVC also offers medication management, and substance use disorder treatment. If KVC outpatient services are not available due to therapist availability or location, KVC can refer youth to a community mental health center for services.

KVC also employs Foster Parent therapists, who are able to provide another level of support for foster families. This can come in many forms, including individual and family therapy. If you feel this would be beneficial, talk to your CPA worker and ask for a referral.

### KVC Recruitment/Finder's Fee

A monetary award of \$300 will be made to an eligible foster parent who refers a potential foster family candidate to KVC. The award will be paid once a family has successfully completed all of the following:

- TIPS MAPP, TIPS DT or other approved initial training
- The licensing process through KVC and
- Has a long-term placement in their home for at least 90 days.

Foster parents should inform their worker if they referred another home to KVC. When the referred home has completed the above-mentioned steps, the CPA supervisor will inform the CRS team so payment may be issued.

Former KVC foster families who left the agency in good standing but are not currently licensed as a foster home are also eligible for the finder's fee.

## Section IV: Foster Family Placement Information

### Placement Process Overview

When a child/youth is referred for placement by KCV, KVC will always attempt to match the child/youth's needs to the appropriate family. All DCF grantees utilize DCF's CareMatch System to locate placement for children in the custody of the Secretary. All licensed foster homes in the state of Kansas are entered into the CareMatch system. When a child needs placement, our admissions department will utilize CareMatch to locate a home that is both in proximity to the child's home county and can meet the needs of the child. The CPA staff or an Intake Coordinator from the Admissions Department will review with the foster parent ALL information that has been received about the child/youth. If the foster parent and the referring agency each accept placement and agree that the identified foster family can best meet the needs of the child/youth, they will be placed in that home.

### Placement

When determining the most suitable placement for a child/youth in out-of-home care, KVC adheres to several core beliefs:

- It is KVC's ongoing effort to locate a relative or kinship placement. KVC strives to have children placed in the most family-like and least restrictive placement. This placement needs to be able to support the child/youth's success in placement and in coping with the emotional demands of major life changes, visitations, and feelings of loneliness, guilt, anger, fear, and happiness. This placement should be culturally responsive to the children and family.
- It is KVC's ongoing effort to place siblings together. The sibling connection is the strongest connection a child in foster care may have.
- When a relative or kinship placement is not available, it is KVC's ongoing effort to place a child with non-related kin (NRKIN). NRKIN connections can be one of the strongest connections a child may have to their family or community.
- KVC strives to maintain children in the same school boundaries in which their parent(s) reside. When that is not possible, we strive to maintain the children in their home county. It is our hope this will facilitate frequent visitations, a key component to successful reintegration.

KVC maintains a comprehensive database of information about their licensed foster homes in order to adhere to these core beliefs. The database query can be completed taking into consideration several variables. These variables include but are not limited to:

- Foster Family school
- Home community
- Number of openings and the ability to accommodate sibling groups.
- Licensed age range of the home
- Other children in the home
- Ability/willingness to care for children experiencing challenges in the areas of education, physical health, mental health, developmental delays, emotional health, and behaviors.
- Level of challenges accepted

- Desire for fostering, foster-to-adopt, or adopting
- Family pets.

CPA staff work in collaboration with the case manager and the Admissions department to locate the most appropriate placement for children based upon our core placement philosophy, the child's strengths and needs, and the foster families who fit criteria for a possible match to a child. The CPA staff and the child's case manager determine if the child and family are a match and then facilitate placement into the home as appropriate.

### How Placement Affects the child/youth

Placement in a foster family can be a traumatic event causing the child/youth to experience a wide range of emotions. Children and youth in care are likely to be affected by any or all of the following emotions:

- **Fear** ...“What will happen to me and my parents?” Youth don't know when or if they will go home, and if this new family will be nice to them.
- **Loneliness**...Everything familiar has been taken away: loss of friends, family, surroundings, routines, objects of importance.
- **Anger**...Angry with self, parents, the agency, DCF and the foster parents
- **Guilt and Shame**... Often feeling responsible for being unable to live at home. The child/youth feels they are a bad person
- **Powerlessness**...the child/youth has been uprooted without any choice and has lost all sense of control.

### Placement Stability

Placement stability, or having fewer, high-quality placements contributes greatly to the well-being of youth in foster care. Research has shown that the more moves a child experience in care, the more trauma the child experiences, the more affected their behaviors are, and the more subsequent moves the child is likely to experience. National outcome measures set a standard of 4.44 moves per 1,000 days in foster care. The goal of KVC, DCF and all case management providers and child placing agencies is to reduce the number of moves a child experience while in foster care. KVC is working towards this goal by implementing such programs as Family findings, Placement Stability Wrap arounds and utilizing Team Decision Making (TDM) meetings.

### Case Planning and Administrative Reviews

Refer to DCF Licensing regulation K.A.R.28-4.810

When a child is brought into out-of-home placement, one of the many meetings that must be held is called a case plan. In addition to being a meeting, a case plan also refers to a document. This document is developed in collaboration with DCF, the birth family, the placement and any key members of the service team. The initial case plan meeting is held within the first 30 days of referral to DCF custody.

During the meeting, the entire team will discuss the strengths and needs of the family, determine

services, and supports that will contribute to the child's safety, permanency, and well-being. The team will determine specific objectives and activities that need to be completed as well as how progress will be measured.

Case plans are reviewed on a regular basis, approximately every 170 days for the life of a case. The purpose of a review case plan is to review the assigned tasks and determine if any adjustments to the plan are needed for the family to achieve permanency. Foster parents are strongly encouraged to attend the case plan meetings. The foster parents will receive completed copies of each case plan to place in the child's red book.

## Visitation

### Parent/Child Contacts

A visitation plan is part of the case plan. The child's case manager will supply the foster parent with a written visitation plan which identifies the frequency, duration, location and who will be involved with the visits. Every child in KVC's care is expected to have at least one naturally occurring interaction (visit) each week with parent(s). If foster families include birth parents in activities with the child, these interactions will be documented with the child's case manager and added to the child's file. When appropriate, visits may be supervised by the foster parents. Parent/child visitation may occur in a foster home, relative home, or NR KIN home. Guidelines for this interaction shall be reviewed, included identifying everyone's roles and responsibilities, in advance. Visits may be held in other pre-designated locations.

### Permanency Worker/Child Contacts

A member of the child's case management team is required to have face-to-face contact with the child a minimum of once a month. During worker/child contacts, case managers should be spending time with the youth independently. Case managers will also complete a placement safety assessment each visit, walking through the common areas of the home as well as the child's room. If the case manager is not the one seeing the child the case manager must have at least one telephone contact with the child or placement provider that month. Approved members of the case management team may include the case manager, family support worker or paraprofessional that has direct knowledge and is part of the case planning team.

### CPA staff member/child contacts

Face-to-face worker and child contacts should occur at a minimum of once a month by CPA staff. The visit should occur in the family foster home. Only rarely should the visit occur outside the home as the visits provide an opportunity to assess the foster family home and to assess the child's interactions with the family in the home.

### CPA Staff Member/Foster family contacts

Face-to-Face CPA staff/foster parent contacts shall occur a minimum of once per month in the foster home when a child is placed in the home. A minimum of one face-to-face contact in the foster home shall occur quarterly when a child is not placed in the family foster home. Whenever this occurs, phone or email contact between the CPA staff and the foster parent shall occur each month. In order to

continually educated foster parents more thoroughly on DCF licensing regulations, ensure safety and well-being of children placed in the homes, and maintain a positive and supportive working relationship between the foster family, KVC and DCF, KVC will follow these procedures:

- On a monthly basis, during a scheduled home visit, CPA staff member will complete a walkthrough of the foster family home.
- A DCF licensing survey tool does not need to be completed during this walkthrough, but the worker will need to complete a Notice of Survey Findings (NOSF) and cite any areas of non-compliance. The worker will discuss with the home how to rectify any areas of non-compliance. A compliance action plan (CAP) may be developed if deemed necessary. If compliance is observed, that will be noted on the NOSF as well.
- At the next consecutive month's walk through, if the worker again cites the same noncompliance issue, that item should again be listed on the NOSF. If the citation is not corrected by the third consecutive monthly walkthrough, the worker will cite the issues on the NOSF as a citation, not a consultation, along with a notation it is the third consecutive incident. Again, a compliance action plan may be developed with the family.
- A copy of each NOSF will be provided to the family. A copy of the NOSFT indicating three consecutive months of the same noncompliance issue will be provided to DCF licensing via the regional DCF Licensing administrator. The foster home and the CPA worker will partner with DCF Licensing to resolve the area of noncompliance as directed by DCF Licensing.
- The NOSFT will be signed by the CPA staff and the foster parent present. A copy of the NOSFT will be provided to the family after the walk through at each monthly visit. KVC will retain a copy of any NOSF completed in the foster family file.
- The compliance procedure is only completed once a month, though a worker may be in the home more frequently. Should a worker cite areas of noncompliance during a visit to a foster home, that worker must follow up with the family within five days to ensure that the issue has been rectified, or that a plan to rectify the issue is in place. The worker will also follow up with the family the following month, even if there are no placements in the home during the month of follow-up. Any corrections to the previous month's citations will be noted on the NOSF. If the issue is not resolved the second month, the worker will be required to follow up with the family the third consecutive month, regardless of whether the home has placement. Depending on the non-compliance issue, the CPA worker may elect to place the home on hold from taking placements until the home is back in compliance.
- All foster homes scoring high on the Support Assessment tool from Structured Decision Making will be staffed with the CPA supervisor. Supervision and support level (including the number of home visits and drop-ins) will be documented to address concerns.
- If there are general concerns with chronic clutter or cleanliness (and the home does not score High on the support assessment), the CPA staff and supervisor will complete a drop-in visit. Following this drop-in, increased home visits or a drop-in schedule will be discussed and put in writing if appropriate.

## Reports to Court

Kansas Statute K.S.A. 38-2261 provides the right of foster parents and parents to submit a report to the court at the time of each court hearing. The report made by foster parents shall be made in a specified format, which can be located [here](#), and on the foster parent document library. The report submitted by the foster parent and/or parent shall be available to all parties.

The case manager shall inform the child's parents and foster parents of the right to submit a report directly to the court. The case manager shall provide the parents and foster parents with the name and address of the Judge to whom the report may be sent as well as the date of court hearings. Documentation of this task shall be placed in the child's file.

## Communication and Partnership

It is KVC's goal that all persons involved with the child/youth communicate clearly and appropriately. In a positive partnership, KVC encourages foster parents to cultivate an interactive relationship with all other professionals.

The child's case planning team consists of the child/youth, birth parents or relatives, a representative from DCF, foster parents, and contracting agency staff. Any member of the case planning team may request a formal review of the case plan at any time. The purpose is to re-evaluate the case plan and modify it as needed to better meet the family and the child(ren)'s needs.

## Confidentiality Policy

Refer to DCF licensing regulation K.A.R.28-4-808(f)

Records necessary for the delivery of services for each child/youth in care shall be kept for at least five years after the child is released by the contracting agency. It is important that all evaluation material accumulated for each child/youth is kept confidential. The material is only for use by the referring agency, KVC, DCF, and the court. Otherwise, it may be detrimental to the child/youth when they return to the community. Confidential information includes material in the child/youth's life and behavior of the child/youth.

Disclosure of specific information relevant to a child/youth or their family is prohibited without written consent of the recipient of services, their parent/guardian, or upon the order of an appropriate court. Likewise, downgrading or criticizing other involved professionals to someone in the community is not only detrimental to that person, but to the entire foster parent program at KVC. Any grievances one may have about another professional should be brought to the attention of that person who will mediate the situation. Violation of confidentiality may result in KVC's decision to withdraw sponsorship of a foster family's license.

A note on social media usage:

DCF and its partners recognize that foster homes may use social media accounts in their daily lives. Prior to posting a picture or video of a child in the custody of the Secretary, a number of factors should be considered. These include:

- Will posting a photograph or video of the child/youth pose a safety threat?
- Does the picture or video have an embedded location of the youth?
- Has there been a discussion with the youth and/or the youth's parent of removal regarding consent to post the photograph or video?
- Have the privacy settings of the foster parent's social media profile been set to restrict the public from viewing their profile.

If you're considering posting pictures or videos on social media, it is recommended that you have a discussion with your CPA worker and the child's case manager first to review these considerations. In addition to the above considerations, please remember the following:

- Youth **should not** be identified as being in foster care
- Information such as reason for referral and state of the case should not be shared on any social media platform.

### When to Call the CPA worker

Do not wait until a major problem arises before contacting your CPA staff member or the referring agency case manager. The foster parent, CPA staff, and case manager will work closely together sharing information, problems, and successes.

When you have a problem or need help, the first person to contact is your CPA staff. If you are unable to reach your CPA staff and it is an after-hours emergency, contact the KVC on-call number for assistance. Some examples of when to call might include, but are not limited to:

- Help with facilitating visitation arrangements with birth family
- Information about the child/youth or foster parenting and answers to specific questions
- Critical or significant incidents, such as an accident, suspension from school, missing/runaway youth, etc.
- Problem solving and help with decision making
- Crisis intervention
- Encouragement
- Advocating for child/youth or self

If you have disagreements with the CPA staff member, discuss the disagreements with that CPA staff directly. If after meeting with the CPA staff you do not feel the issue is resolved, contact the CPA staff's supervisor.

### Reporting Critical Incidents

Refer to DCF licensing regulation K.A.R. 28-4-807

All critical incidents **must** be reported to CPA staff as soon as possible or within one hour of the incident occurring. If it is after hours (5 pm or on the weekend) contact the on-call number and report the incident. Critical incidents are defined as those actions that include, but are not limited to:

- Fire damage or other damage to the dwelling or damage to the property that affects the structure of the dwelling or the safety of the child in foster care.
- A vehicle accident involving any child in foster care.
- A missing or runaway child in foster care.
- The physical restraint of a child in foster care.
- The injury of a child in foster care that requires medical attention.
- The death of a child or any other resident of the family foster home.
- The arrest of a child in foster care.
- Any incident involving the presence of law enforcement.
- All complain investigations by DCF
- Any other incident that jeopardizes the safety of a child in foster care.

Foster parents are required to report critical incidents immediately to the child's case manager and to CPA. This can be done verbally/by phone. In addition, foster parents **must** also submit a [written report](#) for each critical incident to CPA by the next business day. The report should contain the following:

- Child's name and date of birth
- The date and time of the incident
- The factual summary of the incident, including the names of those involved,
- Summary of actions taken
- Name of responding Law enforcement officer (LEO)
- Police report number (if applicable)
- Signature of the foster parent
- Date of the report

A copy of each critical incident report shall be kept on file in the foster family home.

### Runaway/Missing Youth

If a child/youth runs away or is missing from your home for more than 1 hour, immediately notify local law enforcement and then call your CPA staff and the child/youth's case manager. While speaking with law enforcement, be sure to ask for a report number to provide to the case management team. If you are unable to reach your CPA staff or case manager, call the on-call number. Be prepared to give a description of the child/youth, what they were wearing and, if known, where the child/youth may be going. Provide a recent picture of the child/youth to aid in the process of locating them. Also, check any of the child/youth's social media sites; contact their friends and the child/youth's school, coaches and therapists, or any other persons with whom the child/youth may have a connection. Be prepared to provide any information that may lead to locating the child to law enforcement or to the child's case manager.

KVC employs two Missing Youth Specialists who work with KVC and Law enforcement to locate and recover youth. If a youth in your home goes missing, you will likely be contacted by a Missing youth specialist to discuss what happened prior to the run, and to see if you have had any contact with the

youth since they went missing. Once a youth is recovered, one of the Missing Youth Specialists will complete an assessment with the youth to learn about what prompted the run and to work to prevent future runs.

### Contacts with Law Enforcement

Foster families should only call law enforcement if a child is at imminent or extreme risk of self-harm, at risk of harming someone else, to report a crime or to report the runaway status of a child. Law enforcement should not be used for assistance with disciplinary or truancy issues. If a child/youth is behaviorally dysregulated, the following may be utilized for assistance:

- Calm down plan if one has been implemented
- During business hours contact the CPA worker or case manager
- After regular business hours, including weekends and holidays, contact the on-call emergency phone
- Contact the mental health crisis line in our area.

### Mobile Crisis Response

In February 2021, DCF awarded an agency contract to Beacon Health Options to offer state-wide family crisis response and support services. As of October 1, 2021, families are able to call the crisis helpline 24 hours a day, 7 days a week, 365 days a year to speak with a qualified professional that can help them navigate their children's mental health issues. This crisis line serves Kansans ages 20 years old or younger, including anyone in foster care or formerly in foster care who is experiencing an emotional, psychiatric or behavioral health crisis. The phone number for the crisis line is 1-833-441-2240. More information about this service can be found [here](#).

### Foster Parents as Mandated Reporters

See DCF Regulation K.A.R 28-4-807 and Kansas Child in Need of Care Statute K.S.A. 38-2223

As a foster parent, you are considered a mandated reporter by Kansas statute. This means that if, at any point in time, you suspect the abuse or neglect of a child, you **must** make a report to DCF or local law enforcement within 24 hours of discovery. If the report involves a child in foster care, please note that informing your CPA worker or the child's worker does not meet the requirements of mandated reporting. A report must be made to DCF or law enforcement.

If any person suspects abuse or neglect of any kind:

1. The foster parent will call the DCF reporting center at 1-800-922-5330 or law enforcement. Mandated reporters are able to submit a report using the online form, which can be found at: <http://www.dcf.ks.gov/services/PPS/Pages/Mandated-Reporter-Portal.aspx>
2. The foster parent should provide as much information as possible in the report, such as name, address, child/youth's parent(s), and individuals responsible for care, location, alleged perpetrators, and any other information. However, if the information is unknown that can be noted.
3. As a mandated reporter, you are required to provide your name for the report. However, your name will not be given to the family should an investigation occur.

4. After making a report to DCF, foster parents should inform their worker and the child's case manager of the need for the report. Please note that informing the case manager or home worker is not sufficient to meet mandated reporting standards.

It is a class B misdemeanor for persons who willfully and knowingly fail to make a report of suspected abuse or neglect and/or prevent or interfere with an investigation. Failure of a mandated reporter to make a report is a crime which could result in a \$1,000 fine or up to six months in jail. K.S.A. 38-2223

### Allegations of Abuse Against Foster Parents

In the event that allegations of abuse/neglect are made toward a KVC sponsored Foster Parent, several steps will occur. Upon notification of an investigation of the home, KVC will place the home on "inactive" status. This means that a home is unable to accept additional placements until their status returns to active. This typically happens upon the closing of an investigation.

The concern will be directed to the local DCF office. DCF Intake and Assessment will review the concern and will determine if an investigation is warranted. If DCF determines there is due cause for an investigation, they will notify the family that there is a concern and begin the interview process. This may occur in the form of a phone call or an unannounced drop in. DCF protection services will refer the concern to DCF Licensing for review, who may also decide to move forward with an investigation. If the family is informed of the investigation they should immediately notify their KVC CPA staff member.

DCF Licensing will screen the complaint and determine if there are regulatory issues that require an investigation. DCF Licensing may make an unannounced visit to the foster home and may ask to conduct a walk through at that time. DCF Licensing has the right to enter the home. During this investigation process, DCF Licensing will determine if there are regulatory violations in the home. A Notice of Survey Findings (NOSF) will be completed and sent to the family. IN the event of an emergency, DCF Licensing may suspend the foster home license.

If there are regulatory violations or citations noted on the NOSF, KVC will develop a compliance action plan (CAP) with the family to correct the violations. KVC will further work with the family to document the corrections and provide proof of correction to DCF Licensing.

Please note: **The CPA staff member cannot discuss the details of the incident with the foster family until the investigations are completed. The foster home will be placed on "inactive" status until the final NOSFs showing full compliance are received.**

**KVC reserves the right to remove any child/youth in care placed in the foster home if it is determined to be in the best interest of the child/youth while an investigation is being conducted and place the home on hold.**

What should the foster parent do during an investigation?

- Remain calm
- Do not try to investigate the allegations yourself, this could compromise DCF's investigation
- Comfort the child/youth in care if they come to you for help and ensure they are safe

- Provide fact-based information to the DCF Licensing surveyor regarding what happened.
- Read the foster home regulation book to review the regulations related to the concern.
- Maintain a copy of the critical incident report for the Licensing Surveyor to review.

### Access to Placement Provider Files and Information

For the purpose of quality assurance and performance improvement activities, files of children and youth referred to KVC for services and the placement provider files of those families providing care may be reviewed at any time. KVC is responsible for understanding the agency's duty to inform placement providers when their file has been selected for review as outlined below:

- A placement provider file may be reviewed for the purpose of quality assurance by DCF and/or an accrediting body, such as The Joint Commission.
- During the licensing process, the KVC worker will review this policy and complete the File Review form with the family.
- When the provider file for any placement, including but not limited to a foster family, adoptive placement, relative placement, or NRKIN home is requested for review, the assigned case manager, CPA worker or kinship worker will:
  - Prepare the file for review
  - Inform the family which organization has asked to review its provider file.
- Document in the file that the placement provider was informed that the file was reviewed and list any concerns that the family may have had related to the process.

### Discipline Policy

Refer to DCF Licensing regulation K.A.R. 28-4-815

Since many children/youth in care have been neglected and/or abused, it is important that alternative discipline methods be developed. Foster Parents should also be aware DCF Licensing regulations prohibit striking or any physical punishment, threatening, use of derogatory remarks, making the child/youth feel fear, and others.

KVC supports this viewpoint and encourages families to utilize discipline as a means of education and consequence. Discipline that is harming, humiliating, frightening, or physically harmful shall not be used at any time. The child/youth shall be protected against all forms of neglect, exploitation, or degrading forms of discipline. No child/youth shall be confined in a locked or dark area, or have food, water, or toilet facilities withheld.

The KVC Discipline Policy is signed at initial licensing and annually thereafter. The foster family will receive a copy of the signed policy while the original will be maintained in the mast file. A copy of the discipline policy can be found on the KVC document library.

## **KVC DOES NOT CONDONE THE USE OF PHYSICAL RESTRAINT OF A CHILD/YOUTH IN FOSTER CARE**

## Section V: KVC Policy and Procedures

### Financial Expenses

Foster families are not required to submit timesheets, except under certain circumstances, such as providing SED Waiver respite. Families are encouraged to keep track of days a child/youth is in their home for their own records. Reimbursements are generated through a database that tracks the foster placements. The CPA staff will be provided a reconciliation report that details placements by home, they have two business days to review and submit any corrections.

Foster parents will be reimbursed for each night the child/youth is in the foster home. KVC reimburses for the first day a child/youth is placed in the home but not the day the child/youth leaves. **No reimbursement is made for the day the child/youth leaves the home.** Foster families who have placed a child/youth in a respite home should notify their CPA staff prior to doing so. Reimbursements are processed twice a month, on approximately the 10<sup>th</sup> and 25<sup>th</sup> of the month. The dates may change slightly due to bank holidays that fall on those dates. Payment is provided through direct deposit into a bank account or via a pre-paid card.

The foster parent is expected to provide for the child/youth's basic needs with the reimbursement received each month. Guidelines for reimbursement should be used to meet those needs are as follows:

- Allowances: each family is encouraged to offer a fair allowance to the youth placed in their home
- Personal Enrichment: this might include participation in music or dance lessons, class ring, band, senior pictures, graduation related items, etc. (This does not apply to emergency placements)
- Recreational activities: YMCA, football, basketball, gymnastics, baseball, cheerleading, etc.
- Independent living needs: If a youth is 14 or older, it is likely they will be receiving independent living services. If so, the foster parent will assist the youth in collecting items (such as dishes, bedding, furniture, etc.) that will be needed when the youth is released from the foster care program.

KVC will make every effort to assist in locating additional funding sources to support the child/youth in participating in extracurricular activities and attending school and church sponsored events. The foster parent should contact the Community Resource Specialist in their area to determine if additional funding can be located to assist.

### Youth Bank Accounts

Youth in foster care are entitled to earn income through employment, allowances, and monetary gifts. This income should be stored in a bank account. Generally, youth under the age of 18 are required to have an adult listed as a co-owner of a bank account. As a foster parent, you may assist the youth in opening an account and may be listed as the co-owner. As a co-owner of the account, you are responsible in assisting in educating the youth on how to manage an account and budget money appropriately. While you may be listed as a co-owner of the account, funds in the account are the property of the youth, not of the foster parent. Should the youth move placements, the funds will need to follow them. This could occur by closing the account and providing the case manager with a check of

the funds, made out to the youth for safe keeping until a new account can be opened. If you have questions regarding this policy, please reach out to your CPA worker for assistance.

## Respite Care

Refer to DCF licensing regulation K.A.R. 28-4-800

Respite care is defined as temporary care of a child in foster care in a foster home other than the family foster home in which the child is placed. This does not include an activity that is solely for the purpose of socialization of a child in foster care.

Foster parents are able to use respite for a number of situations, such as a needed reprieve from the daily demands of parenting, due to a personal need such as a family emergency, a medical stay, etc. The sponsoring child placing agency. Respite is available to any licensed foster home or approved relative. Up to two days per calendar month are paid to the placement if the respite starts after the first 30 days of placement. If you are in need of respite, submit a request to your CPA worker and the child's case manager seven days in advance. In the case of respites that fall on or near holidays, as much notice as possible is greatly appreciated due to the volume of respites needed at those times. Exceptions to the seven-day rule are granted in the case of emergencies. Respite providers are selected based on similar criteria to long-term placements, such as ability to meet the needs for the child, proximity to school (if respite occurs on school days). The KVC accounting department is responsible for issuing payment to the respite provider. If you are interested or willing to provide respite placements, please reach out to your CPA worker in order to discuss details, such as capacity and age range.

## SED Waiver Respite

SED waiver respite is short term respite care that provides temporary, direct care and supervision for a youth receiving SED waiver services. The primary purpose is to provide relief to families/caregivers of a youth with serious emotional disturbance. Normal activities of daily living are considered content of the service when providing respite care. In order to provide SED Waiver respite care, licensed foster parents must be certified in First Aid, CRP and Crisis Prevention/Management (SCM, CPT, Mandt, etc.) and must complete a state approved training according to a curriculum approved by DCF. These trainings must be completed prior to providing this kind of services.

## Absentee Reimbursement Policy

When a child is staying somewhere other than the foster home due to an extended visit, hospitalization, or the child has run away, it is the decision of the agency responsible for the child placed in the KVC home to determine if the placement will be held and paid for in order for the child to return to the foster home. The CPA staff should confirm with the foster family if they are interested in accepting the child back into the home. If the foster family is interested in the child returning to their home, the CPA staff should contact the child's case manager to confirm the family's willingness to hold the placement and the agency's willingness to pay for the bed hold. If the child's agency is unable to pay for the placement while the child is not staying in the home and the family wishes to take the child back, the foster family can make the decision not to accept other children in the home in the hopes the child will soon return.

## Change in Level of Care and Daily Rates of Reimbursement

The following levels of care and daily rates of reimbursement information pertains to children referred to KVC for out of home services. Other agencies may have different policies. Please inform your CPA worker if you have any questions pertaining to a child whose case is managed by another case management provider.

A Level of Care (LOC) evaluation is completed by the child's Case manager to determine the rate of reimbursement, based upon the child's needs and behaviors. The case manager is required to submit LOC re-assessments every 90 days for all children/youth. The information submitted for consideration on the LOC is based on the information provided to the case manager by the foster parent.

If a child's LOC has improved, meaning the needs of the child have lessened based on support they have received, the rate of reimbursement could decrease. Therefore, the amount of services may decrease, indicating the rate of reimbursement should decrease as well. Foster parents should be commended when child's LOC improves. It demonstrates the home's ability to provide a safe and stable environment for children who have been removed from unsafe and unstable situations.

## Federal Tax Income

Foster parents should consult with their local IRS office or a tax professional for information regarding taxes.

## Insurance

Refer to DCF licensing regulation K.A.R. 28-4-808(a)(8)

Foster families are strongly encouraged to maintain appropriate renters or homeowner's insurance to cover any physical damages that might occur as a result of a child/youth being placed in the home. Although KVC maintains professional liability insurance for negligence involving licensed foster parents, this insurance does not cover losses caused as a result of a foster child's behaviors or actions. DCF licensing regulation K.A.R. 28-4-808 (a)(8) require foster families to maintain accident and liability car insurance. The foster parent understands the agency takes no responsibility for replacing or repairing any items damaged by the child/youth in care.

If a foster parent files an insurance claim due to property damage caused by a youth in care, KVC will consider reimbursing the foster parent up to \$1000 towards the insurance deductible, if funds are available, up to one time per year. This decision will be made by KVC leadership on a case by case basis, taking into consideration the rate the child was placed at and the circumstances surrounding the placement and the event that occurred.

## Transportation

Refer to DCF Licensing Regulation K.A.R. 28-4-816

KVC Foster Parents are responsible for transporting KVC children/youth in their home within the first 20 mile radius, or a 40 mile round trip. This includes children/youth that are served through other case management providers. Foster parents are responsible for transporting children/youth in care to school,

medical appointments, therapy, employment, visits, case plans, court, respite, and any extra-curricular activities. Daily reimbursement rates should be used for transportation costs. Please note that other contractors may have different policies regarding transportation. You should always check with your worker and the youth's case manager.

DCF Licensing regulations require the person who transports a child/youth in car to be at least 18 years of age, have a valid driver's license, and proper insurance. The vehicle must be in good working condition and have working seatbelts. Seatbelts or car seats must be used when transporting. DCF Licensing regulations also prohibit smoking in a vehicle whether or not a child in foster care is present.

### Use of Child Safety Seats

Please refer to the Kansas Department of Transportation's website or [the Kansas Highway Patrol](#) website for the latest information regarding child safety seat laws. Please ensure that car seats and booster seats are properly secured into the vehicle. If the expiration date on the car seat or booster seat has passed, or the car seat or booster seat was involved in an accident, the seat should be properly disposed of. The foster parent must get a current car seat or booster seat. KVC discourages purchasing used car seats or boosters based on the criteria outlined above.

This law applies to:

- All drivers transporting children/youth
- Residents and non-residents alike
- All seating positions
- Passenger cars
- Vans designed for carrying 10 or fewer passengers
- Pickup trucks registered for 12,000 pounds or less
- Farm trucks registered for 16,000 pounds or less.

The Child Passenger Safety law is a primary law, meaning a driver may be stopped and cited for violating this law alone.

Foster parents are responsible for obtaining child safety seats for children/youth in their care. If a foster parent has concerns about their ability to properly install a child safety seat or would like a professional to inspect the seat for safety, the Foster Parent should ask the child's Case Manager to inspect the seat for proper installation or contact local fire stations and police departments to determine if their location provides that service.

Foster parents should refuse to release a child to any person providing transportation without a federally approved child safety seat. The foster parent is required to report any such incident to the appropriate KVC supervisor immediately.

### Mileage

Foster parents will be reimbursed for transporting the child/youth to family visitation, case plans, and court hearings. KVC does not reimburse mileage for day-to-day transportation such as school, school

activities, daycare, etc. Please check with the child/youth's Managed Care Organization(MCO) to see if transportation for medical purposes can be arranged. This is for transportation arrangements only. A change in MCO must be done by the case manager.

Aetna: 1-855-221-5656  
Sunflower: 1-877-644-4626  
United Healthcare: 1-877-796-5847

The purpose for the mileage reimbursement should be indicated for each trip along with the name of the family member who transports. The foster parent mileage report form ( see document library) should be completed monthly and mailed directly to KVC Accounting at :

21350 W 153<sup>rd</sup> Street  
Olathe, KS 66061

Reimbursement rates may vary from agency to agency. The variations include, but are not limited to distance the foster family is responsible to transport, a pre-authorization code requirement, etc. As KVC is a service provider for many agencies throughout the state, and as many agencies are continuously development criteria for reimbursement, the CPA staff should request information as needed from the responsible grantee.

### Daycare

Each individual grantee is responsible for determine their daycare guidelines for children/youth whose case is managed by that agency. Foster parents who work full time outside the home or are full time students may be eligible for daycare assistance.

The following policy is for children/youth whose case is managed only by KVC:

If daycare is needed for a child to be placed in a foster home, the foster parent should have a discussion with their worker in order to verify the need for day care (i.e. full time work or school schedule). After the need for daycare is verified, the home can fill out the necessary DCF Foster Care-Child Care application and submit it to their worker. The worker will submit the application to dcf at [DCF.FosterCareCC@ks.gov](mailto:DCF.FosterCareCC@ks.gov). Once the application is approved, the benefit is issued using the Kansas Electronic Benefit Transfer (EBT) card. This card can be used at the approved day care, and only one card will be issued per foster home. Should a foster home not initially qualify for foster care-child care, an exception can be requested.

KVC does not pay for deposits, enrollment fees, application fees, any rate over DCF rate, or transportation charged by the daycare. These additional charges are the responsibility of the Foster Parents and should be paid from the daily reimbursement rate received by the Foster Parents. If a child is in daycare for more than the approved hours, the foster family will be responsible for payment of the extra time. KVC will pay a maximum of three absent days per month for full time daycare during the usual hours per day a child is approved for daycare. KVC will not pay for an absent day on a holiday the foster parents are not scheduled to work and/or attend school. KVC will not pay for daycare hours when a child is attending school and is not present at the day care. The foster parents are responsible for

signing each child in and out. KVC is not responsible for giving the daycare provider notice when a child leaves KVC's care or changes daycare providers. This is the responsibility of the foster parents. KVC does not pay notice days when a child leaves the care of the provider. In the event a child/youth needs emergency daycare (i.e. suspension from school, family emergency, etc.) KVC may be able to assist the foster parents in obtaining temporary arrangements. The primary responsibility to arrange for emergency daycare, including transportation, rests with the foster parents. KVC must approve all emergency daycare providers and requires a CANIS and KBI screen for each emergency daycare provider. A foster parent who operates a full-time licensed daycare in their home must utilize the daycare slot for a foster child in their home. Daycare payments are not provided by KVC for children/youth in residential settings. Daycare providers must be licensed through KDHE, A copy of the daycare license and a W-9 form is required by KVC. Please call 913-322-4900 and ask to be directed to the Accounting Department if you have any questions. Please contact your CPA staff to discuss the number of daycare hours for which you may be eligible.

### Exceptions for Daycare

#### *School Aged-Children*

Spring break, in-service days, and other school related days off including closures due to inclement weather are taken into account. The foster family will be covered for daycare on these days up to ten hours for two foster parents who are employed full-time. Families with one foster parent employed part-time will receive the number of hours the foster parent works plus one hour, up to ten hours.

#### *Special Needs Children*

KVC realizes special needs children may require extra daycare to relieve the foster family. Foster families that have a parent employed outside of the home part-time or a stay at home parent may qualify for extra daycare. Those families with two full time workers will not qualify for extra daycare.

Specialized daycare may only be authorized for children/youth needing additional services beyond regular daycare and who have been evaluated by a qualified professional such as a licensed mental health worker or MR/DD provider. Staff must have completed specialized training to deal with the difficult needs of the child/youth. Specialized daycare rates are only available for centers that are licensed as specialized daycare providers.

#### *Foster Parents in College*

For foster parents who attend college, KVC will consider twelve credit hours of college courses full-time employment. Foster parents who attend school on a part-time basis should inquire with their CPA staff regarding daycare payments. Night classes will only be considered if the Foster parent is a single person. If the foster parent is employed and attending school, the foster family will receive 50 hours of daycare a week. If the foster parent is employed part-time (20) and attending school part-time (six credit hours) the family will receive a maximum of 50 hours of daycare a week.

### Medical Care and the Medical Card

Children/youth in the custody of the Department for Children and Families (DCF) are issued a medical card. The medical card covers medical and dental expenses for the children/youth. Some medical

procedures may need prior approval. Check with the youth's assigned MCO. There are three MCOs assigned to children in DCF Custody. If a change in the MCO is needed, please contact the child/youth's case manager.

Aetna: 1-855-221-5656

Sunflower: 1-877-644-4626

United Healthcare: 1-877-796-5847

KVC is not responsible for medical bills accrued due to a failure to comply with the MCO's procedures. Foster parents should not sign as the responsible party. Signing as the responsible party may result in the bill being sent to the foster parent. Foster parents cannot change the MCO, this must be done by the case manager.

### KanBe Healthy/Dental Screen

It is the responsibility of the foster parent to arrange for an initial KanBe Healthy exam within 30 days of the child/youth's placement and a dental exam within 60 days of the child/youth's placement in the foster home. The American Pediatric Association and KVC recommend the KBH be completed within 72 hours of a child/youth's placement. These can be done locally by any doctor/dentist who accepts the child/youth's assigned MCO. In addition, the foster parent is responsible for arranging any doctor's appointments due to injury/illness, medication checks, and therapy appointments.

Once the youth has had the initial KBH screening within 30 days of placement, there are required age increments in which a child is required to complete a well-child check. The KBH is a thorough medical check-up usually conducted at the health department or local doctor's office. If neither provides this, the foster parent should contact a physician to complete the assessment. The dental screen is required annually. Compliance with screening guidelines will be checked when the home is relicensed. Foster parents should request a complete exam form for the KBH and dental screen at the time of the appointment. A copy of the completed forms should be provided to the CPA staff and Case manager as well as maintained in the child/youth's file (red book) located in the foster home. Refer to the KBH fact sheet in the document library. DCF Licensing forms required for the KBH and Dental exams may be found in the document library.

### Care of Medically Fragile Children

KVC defines medically fragile children as any child receiving Attendant Care for Independent Living (ACIL) waiver services. Children receiving ACIL waiver services are Medicaid eligible and technology dependent. Any child who may not be receiving ACIL waiver services who experience the following life threatening medical needs or conditions:

- Oxygen 24 hours a day
- Tracheotomy
- Hemophilia
- Any respiratory problems or active chronic infections disease requiring a complete sterile environment or complete sterile procedures
- Seizures uncontrolled by medication, requiring hospitalizations 3 to 4 times per year

- Tube feedings
- Heart monitor

KVC requires any foster family caring for a medically fragile child to have CPR certification. Medical doctors, nurses, paramedics, and emergency medical technicians may substitute specialized training for CPR.

- All families who care for medically fragile children must complete twenty four training hours per year.
- In addition, families who take placement of children upon discharge from a medical hospital are required to complete any training required by the child's physician and/or hospital personnel.
- Foster families use clean or sterile techniques and maintain a clean area for preparing medication.
- During preparation, the person administering the medication will visually inspect the medication for particulates, discoloration, or other loss of integrity.
- When determining the placement of a medically fragile child in a KVC foster home, the experience of the family and the family composition are considered.
- It is the responsibility of the CPA employee to ensure the foster parent understands this policy.
- It is the responsibility of the permanency employee to ensure that the mother, father, relative placements and non-related kin placements understand this policy.
- If a child is hospitalized, KVC requires the foster parents to stay with the child and/or make arrangements for another approved adult to stay with the child.

A placement that is a registered nurse may not provide both types of care for reimbursement. This means that a registered nurse may not bill for medical services for a child placed in the home.

### Storage and Administration of Medication

Refer to DCF Licensing Regulation K.A.R. 28-4-818 (a)

Each licensee shall ensure that all prescription and non-prescription medication is kept in the original container at the recommended temperature in accordance with the instructions on the label and, except as specified in paragraph (e)(4), in locked storage and inaccessible to children.

DCF Licensing requires that accurate records be kept of all medications given to the child/youth in foster care, including prescription and over-the-counter medications, in accordance with regulation K.A.R. 28-4-818(d)(2)(A). Prescription medications must be dispensed from the bottle with the label noting the medication name, dosage, physician name, child/youth's name, and date filled. Medicine must be labeled in the prescription bottle when it is to be dispensed at school, daycare, or other sites. Most schools require a doctor's note prior to administering medications. The pharmacy where the prescription is filled can prepare a separate bottle for school if requested in advance. The CPA staff will review the records of medication administration during monthly visits and copies of the medication records must be given to the CPA staff and copies placed in the child/youth's Redbook. The Medication administration forms are available in the document library of this manual.

## Medical Records

KVC policy requires foster parents to keep updated medical records on file for each child/youth placed in the home. These records should follow the child/youth throughout his/her placements while in custody.

Medical records that must be maintained in the child/youth's file include:

- DCF Licensing KBH exam forms and dental forms
- Daily Medication logs
- Medical treatment is documented on the State of Kansas's Medical Care for Children form. This form must accompany the child/youth on every medical visit.
- Dental treatment is documented on the state of the Kansas's Dental form. This form must accompany the child/youth on every dental visit.
- Over the counter medication approval form signed by a physician
- Current Medical Consent form
- Current medical card
- Documentation and warning of any and all allergies to medications and/or food
- Emergency medical procedures for health needs such as asthma, severe allergic reactions, seizures, diabetes, etc.

## Emergency Procedures

Foster families must inform the CPA staff and the child's case manager within one hour if any of the following occurs:

- Death or serious injury or illness of a child/youth
- Suicide attempt
- Communicable diseases in accordance with DCF Licensing Regulation K.A.R. 28-4-807
- Any other instance that is critical to the child/youth's health

Foster families must inform DCF licensing within one hour if either of the following occurs:

- Death of a child/youth
- Communicable diseases in accordance with DCF Licensing regulation K.A.R. 28-4-807

In cases of emergency, the foster parent will transport the child/youth to the nearest hospital. The foster parent will need the Consent to Medical Care, the child/youth's medical card, in addition to the placement agreement. The foster parent will refer questions concerning payment and billing to the child/youth's case manager. The child's legal guardian, case manager, or dcf social worker must give medical consent for transfusions, surgery, and other invasive procedures. It is highly recommended that foster parents make copies of the Consent to Medical Care and the child/youth's medical card to keep locked in the family's vehicle in case an emergency should occur. Please remember to always maintain confidentiality.

## Fire Safety

Foster parents are responsible for conducting and documenting fire drills each month. Foster parents

will also review fire drill procedures with children, youth and child care providers in the home on a monthly basis. Foster parents will be responsible for ensuring fire extinguishers and smoke detectors are in working order. There must be a smoke detector on each floor and in each bedroom. Each floor must have a carbon monoxide detector. A copy of the floor plans with the escape route will be posted on each floor. In case of an actual fire, foster parents must use common sense to ensure everyone's safety. Foster parents should verify everyone is out of the home before they leave the premises. The following procedures should be used and taught to children/youth. Depending on the children/youth in their care, not all steps may be possible or practical:

- Close windows
- Wear a coat and hard sole-shoes
- Grab a wet towel and place over the face in case of smoke
- Foster parents will ensure all doors are closed after checking to ensure everyone is out
- Go to the nearest exit. Do not run or push
- Once outside, meet at the designated area and face away from the house. Do not return to the house until so instructed by authorities.

## Tornado Safety

Foster parents are responsible for conducting and documenting tornado drills once a month between March and October, the months in which tornados are most likely to occur. Foster parents will also review tornado drill procedures with children, youth, and child care providers on a monthly basis. The route to the shelter must be posted on each floor. Foster parents will ensure everyone else has taken cover before they go to the shelter. Foster parents must use common sense in any given situation to keep everyone as safe as possible. The following procedures should be used in drills and taught to children/youth in case of an actual tornado warning. However, not all steps will be possible for all children/youth in care and not all steps will be logical in certain situations. Foster parents must use good judgement in these situations.

- Keep doors and windows closed (according to the National weather service)
- Wear a coat and shoes
- Grab a blanket and radio if possible
- Go to designated shelter without running or pushing
- Do not leave the shelter until instructed by the National Weather Service.

## Education

### School enrollment

It is the responsibility of the foster parent to enroll the child/youth in an appropriate educational program. Each child/youth enrolled in public school should be eligible for free lunches and free textbook rentals. It is the responsibility of the foster parent to complete the lunch forms and to inform the school the child/youth is in foster care so they receive textbook rentals free of charge. The daily reimbursement rate should be used to pay for any items such as vocational and educational supplies, school lab fees, etc.)

## Enrollment procedures

When preparing to enroll a child/youth in school, the foster parent should call the school in advance to schedule an appointment. Some schools do not enroll every day and it may be necessary to meet with specific school personnel to complete the enrollment process. The following documents are required by many school districts:

- Completed Education Enrollment Information Form (EEIF). This is school to school and can be updated by the school or assigned case manager.
- Withdrawal from last school attended
- Immunization records
- Copy of birth certificate
- Proof of residency
- Copy of last grade card
- Medication in a prescription labeled container
- IEP

If the foster parent has any questions about enrollment or documents are not available, the foster parent should ask a school official. School officials may be able to assist in obtaining school records and other documents necessary to complete the enrollment process. If the foster parent has difficulties enrolling the child/youth in school, the family's CPA worker or the child/youth's case manager should be contacted to assist.

## School Withdrawal Procedures

It is the foster parent's responsibility to properly withdrawal a child/youth from school. It is important to handle moves and withdrawals from school with care. Most schools require several days' notice to gather grades and prepare withdrawal papers. It is also very important for the students and school staff to have an opportunity to say goodbye. When students do not get to say goodbye, new grief issues can be created. One of the biggest concerns of school authorities is students disappearing without any warning or planning. The foster parent should consider this when a child is leaving the home. Improper withdrawal from school can greatly affect the child/youth's overall school progress. Credits can easily be lost in the shuffle.

## Educational advocates

Educational advocates are volunteers assigned by the State of Kansas through Families Together. Students who receive special education services and whose parental rights have been terminated or parental whereabouts are unknown should have an Educational Advocate. The DCF worker or case manager must request an advocate and a liaison can assist in this process. The advocate is trained in special education issues and should attend Individual Educational Plan (IEP) meetings. The Educational Advocate is the only person who can legally sign an IEP, Consents for Evaluation, and Educational Placement. If parental rights have not been terminated, the child/youth's parent must sign these documents. If the parents are not available, the signatures may be obtained through the child's Case Manager.

## Home Schooling

It is the policy of KVC that children in the custody of the State of Kansas must attend a public or private school that is licensed or accredited. Children in foster care may not be home school. KVC does not pay for private education. If the placement provider would like to utilize a private school at their expense, KVC must approve the private school or obtain parental permission.

## Tutoring

KVC strongly encourages foster parents to utilize school services, and especially advocate for those services to be provided by the school through the child/youth's IEP. In some areas, local scholarships or fee waivers are available for children/youth in foster care. Contact your CPA staff to obtain information about scholarship programs.

## Summer Activities and Summer School

KVC strongly encourages Foster Parents to utilize free summer activities. In some areas local scholarships or fee waivers are available for children/youth in foster care. Contact your CPA staff to obtain information about scholarship programs. Foster parents who qualify for KVC daycare due to both parents working full time (35 hours or more per week) may discuss with their CPA staff the possibility of exchanging daycare for a summer camp program. Foster parents must continue to work full time and the cost for the summer camp program must not exceed the daycare rates paid by KVC. The foster home is responsible for any amount due over the approved DCF rate.

## Driver's Education

A youth must have approval from their birth parent(s), guardian, and/or case manager to participate in driver's education. The foster parent should ask the CPA staff and the Case Manager for information regarding financial assistance. If all members of the child/youth's team agree, a tasks for Driver's education should be included on the youth's case plan.

## Driving and Riding with Other Youth

Refer to DCF Licensing Regulation K.A.R. 28-4-816

Before a youth in foster care may drive, permission must be obtained from the child's parent or legal guardian. Permission to drive must be included in the youth's case plan, and the youth must have a valid driver's license and insurance.

## Beds

Foster parents must provide beds for the capacity in which they are licensed. DCF Licensing does not allow futons, trundle beds, rollaway beds, or hide-a-beds for children/youth in foster care. Bunk beds are acceptable. The top bunk is only to be used by children six years of age and older and shall be protected on all sides by rails. Headboards and footboards may substitute for rails on the ends of the bed. Waterbeds are only permitted with approval from the child's case manager for older children.

## Religious and Faith Based Practices

It is the right of the birth parent(s) to determine their child/youth's religion and to request their

child/youth be placed in a foster home of the same religious faith. If it is not possible to place the child/youth in a home of the same faith, it is the responsibility of the foster parent to ensure the child/youth attends services and appropriate programs in accordance with the mandates of their religious faith.

### Employment

A teenager should be encouraged to work outside the home. Employment allows the youth a greater opportunity to become self-sufficient and also encourages a higher sense of self-worth, helping the youth grow towards maturity and independence.

A youth in foster care is permitted to save up to \$1000 of their money for “future identifiable needs”. A portion of their earnings may be used for day-to-day expenses. Foster parents should encourage and assist youths in securing a savings account.

### Field Trips, High Risk Sports, and Recreational Activities

The CPA staff should notify the case manager if a child/youth in care wishes to participate in school, church, or community events such as field trips. Prior approval should be obtained from the birth parent(s) or the child/youth’s case manager.

Foster parents may permit children in foster care to engage in certain high-risk sport or recreational activities if certain conditions are met. The child/youth’s parent(s), legal guardian, and/or Case manager must sign a high risk activity form in order for the child/youth to participate in the specific activity. It is important to assess the child specific risk factors associated with the activities. These include, but are not limited to the child/youth’s age and maturity level, impulsive behaviors, or developmental delays. If required for the activity, protective safety gear must be used. Adult supervision must be provided. High Risk Activity Forms can be found in the document library. Licensed foster homes may not have trampolines.

### Swimming

Refer to DCF Licensing Regulation K.A.R. 28-4-824

The DCF Licensing regulations require a certified lifeguard be on duty wherever a child/youth is taken swimming. If a lifeguard is not present, an adult certified in first aid and CPR who can swim must also be present. The location must be approved for swimming per licensing regulations. Refer to the DCF Licensing regulations for requirements regarding home swimming pools. A child under the age of six is not permitted to swim in ponds or lakes.

### Haircuts

Routine “trimming” of original hairstyles is appropriate by anything drastic, such as the use of chemicals for coloring, perms, cutting very long hair short, mohawks, etc., requires permission from the birth parents. This may be requested through the child/youth’s case manager or by working in partnership directly with the birth family. The foster parent should be mindful that the child may have never had a haircut before. Also consider some cultures and religions do not permit haircuts or have specific

traditions surrounding haircuts.

## Sleepovers

Refer to DCF Licensing Regulation K.A.R. 28-4-814 (h)

When a child/youth is placed in a foster home, the foster parent(s) should establish guidelines/expectations concerning overnights with friends curfews, and other house rules. The birth parent(s) or legal guardian, the DCF social worker, CPA staff, child/youths case manager and the foster parents should document the guidelines so they are clear to all persons involved with the child/youth. The case plan should also reflect this. In the case of overnight visits with friends, the foster family must confirm with the CPA staff who will be providing supervision to the child/youth during the overnight visit, and provide background information on the overnight host. The foster parent must communicate with the person who will monitor the children during the sleepover. DCF Licensing regulations regarding transportation of the child/youth also apply to overnight visits.

## Vacations

Foster parents are encouraged to take the child/youth in care on family vacations. Prior approval from the child/youth's case manager is required for any out of state travel. The court, GAL, and county or district attorney shall be notified a minimum of 10 days prior to departure of all interstate and international travel. The foster parent is required to take the child/youth's medical consent form, placement agreement, medical card, and any medications the child/youth is currently taking.

## Leaving the Child/Youth Unattended.

Refer to DCF Licensing Regulation K.A.R. 28-4-811 (d)

Any child/youth that is in foster care that is at least 12 years of age may be permitted to stay at home without adult supervision for certain periods of time between the hours of 6 a.m. and midnight if certain requirements are met. The potential for self-care must be identified and approval must be written in the child/youth's case plan. When developing the child/youth's self-care plan, each child/youth's maturity level, behavioral, and emotional needs, impulsive behaviors, self-harming behaviors, and developmental delays should be considered. IN addition, the foster home environment, including the number of other children in the home, and neighborhood safety issues should be taken into consideration. Self-care plans must be signed by the child/youth's case manager. Refer to the licensing regulations for specific details.

## Informal Visitations

Refer to DCF Licensing Regulation K.A.R. 28-4-814 (g)

Foster parents may identify extended family members ages 18 and older as resources for informal visitation. For extended families identified as resources, Foster Parents should submit an Informal Visitation Plan packet to their CPA staff. The relationship of the individual to the foster family must be documented. Background checks must be completed, and copies of current driver's licenses and car insurance must be obtained. Identified individuals must read, agreed to, and sign the discipline and confidentiality policies. The Foster Parent must ensure that the individuals have access to emergency

contact numbers and a crisis plan has been developed in case of emergency. KVC must approve all information visitation plans and have knowledge of dates on which informal visitations will occur as well as the identified individual's name and address.

### General Safety Plan

If a safety plan is necessary for a child/youth and/or foster family's well-being and safety, the CPA staff will review with the Foster Parents on a regular basis to ensure the plan is being followed. In most instances the KVC CPA staff will complete a safety plan with the child/youth and the foster family then will provide a copy to the case manager. There may be occasions during which the Case Manager, therapist, or CPA staff member must complete a safety plan with the child/youth and foster family.

### Outdoor Safety Plan

Prior to initial licensing, the CPA staff and the foster Parent must develop and maintain a written outdoor safety plan before a child/youth in care can be outdoors in an unfenced area of the foster home. The plan should be developed with and approval by the CPA staff. A copy of the Outdoor Safety Plan can be found in the Document Library of the manual.

### Foster Family Moves

Foster families must notify their CPA staff prior to moving to a new location and a new initial licensing will need to be completed with 14 days of the move. The CPA staff will complete a walk-through of the new home to determine any possible concerns with licensure. A new licensing packet must be completed and submitted to DCF Licensing. Only children currently placed in the home may move into the new location with the family until DCF Licensing has approved the new residence. The family is placed on inactive status until a new temporary permit for the new address is issued by DCF Licensing. During the inactive period, no new placements can occur.

### Compliance Action Plans (CAP)

KVC foster families will be asked to complete a Compliance Action Plan any time there is a citation on a Notice of Survey Finding form. This could occur during a licensing visit, an investigation or during a monthly walk-through.

Compliance Actions Plans are completed on a specific DCF form. They will identify any licensing violations as well as a plan for correcting those violations. This plan will include the time frame for completion, who is responsible for each step, how progress and completion will be monitored and any preventative actions taken. Compliance Actions Plans should be a collaborative plan between the home and the agency. It is important to note that homes may be listed as inactive until all steps in the plan are completed. It is possible that a failure to complete the compliance action plan may result in KVC withdrawing sponsorship of the home.

### Partnership Development Plan (PDP)

KVC foster families may be asked to complete Partnership Development plans at various times. Partnership development Plans may be done during license renewal as a way to focus on what training opportunities may be beneficial for the family over the next year. Partnership development plans may

also be done when there is a concern but not necessarily a licensing violation or compliance issue. Partnership development plans are used to help grow the home's knowledge, resources and abilities as foster homes. These are different from Compliance action plans, which are used to raise the home's compliance level to match licensing standards.

### Red Books

Red books are binders that contain and maintain legal documents, school records, medical records, etc., that are pertinent to the child. The red book must be maintained by the foster parent and must go with the child when they leave the foster home for another placement. A life book should be included in the red book. The life book consists of pictures and documentation of experiences. Redbooks must be kept where others do not have access to the confidential information. The child/youth should not be allowed to read the Redbook without approval from the case manager. Each agency uses different colors for their binders. If you have a child from another agency placed in your home, you may have a blue book or an orange book, for example. They are the same as the red book.

### Life books

Each child placed in DCF custody in out of home placement should have a life book. The life book is included in the red book. The life book should travel with the child from one placement to the next. The foster family should encourage the child/youth to work on their Lifebook. If the child/youth refuses, is too young, or unable, the foster parent is required to provide information for the Lifebook on a monthly basis. Items to include are: pictures, school awards, mementos, etc.

A life book is a very important visual record for the child. It is a tool and a process to help the child better understand their past life experiences, examine the present and explore the future. It incorporates a collection of physical and social histories that most children normally would receive from their family of origin and otherwise would be lost as the child moves through the foster care system. A Lifebook can increase the child's understanding of past events, provide chronological continuity, and serve as a vehicle for the child to share their experiences with others.

The Lifebook should be stated when a child/youth enters out of home care and remains with them until permanency is reached. While the KVC case manager is responsible for ensuring the Lifebook is initiated and updated during the entire length of out of home placement, the birth parents, foster family, child/youth and CPA staff should facilitate it together. Each person brings important information to the child/youth's Lifebook. It is essential that the child/youth participate in the development and maintenance of their own Lifebook. The book belongs to the child/youth and they determine with whom this book is shared. Each child/youth's Lifebook is an original and information from the original format can be added and taken away as appropriate.

Remember, the Lifebook belongs to the child/youth and is their book to record past, present, and future life experiences. Adults should assist the child/youth in completing their Lifebook. However, caution must be taken to allow to the child/youth to share their memories, dreams, hopes, feelings, and expectations.

## Confidentiality of the Lifebook

The Lifebook is the property of the child/youth named within. Confidential information has been provided and recorded to help the child/youth better understand their past experiences, examine their present circumstances, and explore the future. The Lifebook and the information contained within are confidential and are not for public disclosure.

## Life Skills

During childhood, every child/youth gradually moves toward self-sufficiency. Children in care need support and guidance in order to develop and enhance a range of life skills. These skills are not unique to children in foster care, but are the tasks and developmental stages faced by all children. The skills training services shall be made available to all eligible children/youth that are four years of age or older and referred to KVC. This type of training is preparation for leaving foster care and should begin on the child/youth's first day of care. The child/youth's support system and foster parent play a key role in helping a child develop and enhance their daily life skills. It is the responsibility of those involved in a child/youth's life to work with the child/youth to better prepare them for making the transition to self-sufficiency by focusing their efforts on achieving outcomes that are known to lead to a greater success for these children/youth.

Foster families are expected to support and integrate life skills services into daily living activities with children/youth. Children/youth shall be given opportunities to learn these life skills through daily living activities in their placements. KVC case managers will provide direction regarding life skills training through the Casey Life Skills Assessment, for youth 14 and older. These activities will be specifically documented for the child/youth's file each month.

As children/youth gain proficiency in life skills, new skills should be added over time. IN addition, skills should be reflective of the child/youth's age and abilities.

CPA staff will work with case managers and foster parents to ensure that children/youth are provided resources and training in the competencies identified in the following age-appropriate life skill domains:

- Personal hygiene
- Career Planning
- Communication
- Daily living
- Home life
- Housing and Money Management
- Self-care
- Social relationships
- Work and study skills
- Transitional planning
- Lifelong connections.

## Adoption Services

KVC's CPA department is responsible for completing adoption home studies for KVC licensed foster home who wish to pursue adoption of KVC kids. The CPA staff should advocate for foster families and support them through the adoption process. CPA is also responsible for making the family's home study available on the statewide adoption exchange ([www.usakids.org](http://www.usakids.org)) at the foster family's request.

The KVC CPA staff can assist families who wish to adopt by helping them navigate through KVC's adoption website. The CPA staff member is also responsible for submitting a family's home study for consideration at Best Interest Staffings (BIS).

Foster families who wish to pursue adoption through KVC must complete an adoption application packet. In most instances, the KVC CPA staff may complete an adoption home study for KVC foster parents who have identified a child managed by another agency. In these instances KVC must receive a referral and contractual agreement from the child's agency to move forward with the home study process.

**KVC welcomes you, our foster parents, to the family.**

**Thank you for your dedication to helping children in need!**