

CHILD PROTECTION SERVICES
STANDARDS FOR EFFECTIVE

STANDARDS FOR OUT-OF-HOME CARE SERVICES

6.2 PLACEMENT OF CHILDREN INTO FOSTER CARE

Council on Accreditation Standards

The Council on Accreditation Standards S21.1 (Access to Services- Foster and Kinship); S21.13 (Treatment Foster Care Access to Services); and S21.17 (Foster Care for Medically Fragile Infants and Children Access to Services) link to and support Standard 6.2 *Placement of Children into Foster Care*.

Administrative Code

The Ohio Administrative Code Rules 5101:2-39-40 (Placing a Child or Arranging the Placement of a Child With Suitable Relatives or Suitable Non-Relatives); 5101:2-39-45 (Selection of Substitute Care Placement Setting); 5101:2-42-18 (Approval of Substitute Care Placement Setting); 5101:2-42-65 (Agency Visits); 5101:2-42-66 (Administrative Procedures for Comprehensive Health Care for Children in Custody); 5101:2-42-90 (Information to be Provided to Caregivers, School Districts, and Juvenile Courts; Information to be Included in Individual Child Care Agreement); 5101:2-47-21 (Foster Care Maintenance Payments Related to the Difficulty of Care Needs of a Child Placed in a Family Foster Home, Relative Home, or Pre-finalized Adoptive Home); 5101:2-5 (Administrative Rules for Public and Private Agencies); and 5101:2-7 (Administrative Rules for Family Foster Homes) address Standard 6.2 *Placement of Children into Foster Care*.

I. Philosophy

CFSA's believe that it is in the best interest of children, who are in need of a foster home placement, to experience one placement until permanency is achieved. Foster home selection should be based on the location of the foster home and the suitability of a family in meeting children's individual needs, particularly their willingness and ability to:

- keep siblings together, when appropriate;
- be responsive to the child's cultural needs;
- become a permanent resource for the child.

When appropriate, selection of a home should involve finding a home as close to the child's birth family as possible.

Agencies and communities should design, implement and evaluate their services and resources to achieve the best match of the child with a foster family. The skills and qualifications of agency staff who provide services to foster caregivers and children and the delivery of services required to maintain the child in placement need to be considered as well.

II. Outcome

Children experience one foster care placement.

The foster family meets the child's identified and future needs.

III. Evaluation

FACSIS events, CPOE and the Federal Health and Human Services outcomes may be considered when evaluating this standard. In addition, the CFSA may consider the following:

- the number of team decision making meetings per family/child case after removal (including a TDM the following day after an emergency removal) until case is closed;
- the number of participants (family, family support, service providers, relatives, staff, etc.) who attend each team decision making meeting;
- the number of children initially placed with relatives, kin, foster families, congregate care settings, residential, group homes, and institutions;
- number of children initially placed in family foster care;
- number of qualified foster parents that provide family foster care;
- number of foster parents that provide family foster care in targeted neighborhoods;
- number of staff with qualifications to assist and serve family foster care placements;
- number of children initially placed in specialized foster care;
- number of qualified foster parents that provide specialized foster care;
- number of foster parents that provide specialized foster care in targeted neighborhoods;
- number of staff with qualifications to assist and serve specialized foster care placements;
- the median length of stay for children in family foster care and in specialized foster care prior to returning home, emancipation or prior to adoption finalization;
- the number of out-of-home placement moves for children in family foster care and in specialized foster care;
- the number of children reunified with their family in family foster care and in specialized foster care;
- the number of children (originally placed in family foster care and in specialized foster care) recidivating within 12 months of exiting care.

IV. Standards for Implementation

A. Placement of Children in Foster Care-Administrative Responsibilities

- 1) The CFSA should have a policy that defines matching children with foster care services based on:
 - a. the behavioral traits, characteristics and needs of the child including being placed with siblings;
 - b. the caregiver skills and qualifications for providing care to children and their families;
 - c. the location of the caregiver's home in relation to the birth family's home;
 - d. the skills and qualifications of agency staff who provide services to foster caregivers and children;
 - e. the delivery of services needed to maintain the child in placement; and
 - f. the corresponding reimbursement rates.
- 2) When placing a child in foster care, the CFSA should use a standardized assessment process (see Standard 6.1, *Placement of Children in Out-of-Home Care*) as a part of the Team Decision Making meeting to assess and determine the placement needed. This assessment process should be continuous and include the evaluation of services to ensure that the services are meeting the child's needs.

B. Types of Foster Care

Children entering foster care have varying needs, which can require different types of care. CFSAs define the types of care differently. However, a distinction between family foster care and specialized foster care should be made. CFSAs should have policies regarding these two distinct levels of care.

It is in the child's best interest to be placed in a family foster home that is located in the same community as the child's birth family unless it is not safe for the child and foster family. The child is then able to maintain cultural, community and school connections thereby reducing the stress and trauma to child.

1) Family Foster Care

In general, Family Foster Care homes should be able to care for children that have mild to moderate emotional, behavioral, intellectual or physical challenges.

a. The Needs, Behavioral Traits, and Characteristics of the Child For Family Foster Homes

The following needs, behavioral traits and characteristics are taken into account when matching a child with a foster home:

- i. child may need to be placed with their siblings already in care or coming into care;
- ii. child may have mild physical condition or disability;
- iii. child exhibits stronger coping skills, more age-appropriate social behavior and skills, resiliency;
- iv. child may exhibit mild to moderate emotional and/or behavioral problems consistent with a history of abuse and/or neglect or unruliness; and/or
- v. child may have mild retardation or developmental delays.

b. The Caregiver Skills and Qualifications

In general, Family Foster Caregivers should have the following skills and qualifications to care for the children in their home.

- i. Emotional/mental/social skills that include:
 - aa. high level of maturity,
 - bb. demonstrating good decision-making skills, critical thinking skills, and creative problem solving abilities,
 - cc. a good support system,
 - dd. emotional and mental stability,
 - ee. being nurturing and compassionate,
 - ff. good listening and communication skills, and
 - gg. good coping skills.
- ii. Parenting skills that include:
 - aa. enjoying parenting and understanding fundamentals of parenting,
 - bb. demonstrating an interest in advocating for children,
 - cc. maintaining a safe home environment,
 - dd. flexibility to respond to different needs of children,
 - ee. effective parenting strategies for dealing with difficult children,
 - ff. patience in working with children,
 - gg. ability to set appropriate boundaries with children;
 - hh. ability to be a good role model; and
 - ii. realistic expectations of the child.
- iii. Financial skills that include:
 - aa. demonstrating good budget skills, and
 - bb. ability to provide for social, medical and educational needs.
- iv. Openness/Willingness qualities that include:

- aa. working and being a team player with the birth and extended family,
- bb. demonstrating cultural competence,
- cc. a good understanding of normal child development,
- dd. the impact of abuse/neglect on a child,
- ee. recognizing strengths and positives of birth parents,
- ff. supporting religious beliefs of child,
- gg. openness to support services in home, and
- hh. understanding and respecting confidentiality.
- v. Experience that would include:
 - aa. good understanding of systems,
 - bb. basic understanding of symptoms and behaviors of mental illnesses and disorders,
 - cc. basic knowledge of psychotropic medications/interventions.
- vi. Training that would include:
 - aa. completing the minimum agency required training hours, thereby maintaining current certification (see Standard, 6.3, *Combined Certification and Approval for Foster Care and Adoptive Families*).
- c. The Skills and Qualifications of Agency Staff

In general, agency staff that work with family foster caregivers and children should be able to demonstrate the following skills and qualifications:

 - i. Emotional/mental/social skills that include:
 - aa. ability to be nurturing and compassionate,
 - bb. providing support,
 - cc. ability to cope with change,
 - dd. ability to deal with and reduce stress,
 - ee. active listening skills,
 - ff. verbal and written communication skills,
 - gg. accurate reporting,
 - hh. being honest with all involved,
 - ii. ability to be realistic, and
 - jj. patience in working as a team.
 - ii. Professional Skills that include:
 - aa. demonstrating cultural competence,
 - bb. flexibility in responding to the different needs of children,
 - cc. ability to think creatively,
 - dd. being a good role model,
 - ee. recognizing strengths of the birth parent, foster child and foster parent,
 - ff. ability to communicate with foster parents regarding birth family issues,
 - gg. understanding that the birth/foster family will have an active role in case planning, decision making and reunification,
 - hh. ability to set appropriate boundaries,
 - ii. a willingness to be an active and supportive part of a team with the birth family and caregiver,
 - jj. respecting confidentiality and understanding its parameters,
 - kk. demonstrating good decision-making skills, strength based critical thinking skills, and creative problem solving abilities, and
 - ll. an interest in advocating for children.

- iii. Experience and Training that include:
 - aa. a good understanding of child serving systems,
 - bb. an understanding and knowledge of impact of abuse and neglect for children,
 - cc. an understanding of child development,
 - dd. knowledge of effective parenting skills, and
 - ee. knowledge of diagnosis and use of psychotropic medications/interventions.
 - d. The Delivery of Services Needed to Maintain the Child in Placement
 - i. Agencies need to work with service providers to ensure that needed services are delivered in a timely, appropriate and culturally responsive manner to maintain the child in placement. Once the child and family's needs have been assessed (see Standard 3.1, *Child and Family Assessment*), agencies must locate and advocate for service providers, in or close to the family's community, who will be able to respond to the needs of the family and/or child. Agencies should continually evaluate and measure the effectiveness, timeliness and quality of service delivery.
 - ii. After an initial assessment, children who are placed in family foster care may exhibit additional behaviors that would require specialized care. It is the agency's responsibility to assess what resources (e.g., training, services, respite) are needed for the foster family and the child that will support and maintain the placement. Providing/locating identified resources will assist in maintaining the placement so that the child experiences only one placement while in care.
 - e. The Corresponding Reimbursement Rates
 - i. Agencies should have a policy for assessing, implementing, measuring and evaluating the reimbursement rates for foster families. Policy should define expenses that are or are not reimbursable (e.g. transportation, respite, clothing, medical, school supplies, damage not covered by homeowner's insurance).
 - ii. Foster parents should receive information on the agency's reimbursement schedule and grievance process. The policy should clearly specify reimbursement changes if level of care changes occur and foster families should receive information of the reimbursement changes.
 - f. Occupancy Rate
 - i. Occupancy Rate should be based on the individual needs of the child in care and ability and skills of the foster family to meet those needs.
- 2) Specialized Foster Care
Specialized Foster Care homes should be able to care for children who have moderate to severe emotional, behavioral, intellectual or physical challenges.
- a. The Needs, Behavioral Traits, and Characteristics of the Child for Specialized Foster Homes
The following needs, behavioral traits and characteristics are taken into account when matching a child with a foster home:
 - i. child to be placed with their siblings already in care or coming into care;
 - ii. child may have moderate to severe physical condition or disability;
 - iii. child exhibits minimum coping skills, social behavior and skills that are inappropriate or are not appropriate for their age;

- iv. child may exhibit moderate to severe emotional and/or behavioral problems consistent with a history of abuse and/or neglect or delinquency and/or unruliness; and/or
 - v. child may have moderate to severe retardation or developmental delays.
- b. **The Caregiver Skills and Qualifications**
Specialized Foster Caregivers should demonstrate the skills and qualifications described under Family Foster Care in addition to the following:
- i. ability to provide a safe environment through the knowledge and use of de-escalation and crisis intervention techniques;
 - ii. willingness and ability to work with birth family and be a professional contributor on a treatment team;
 - iii. ability to respond to and cope effectively with the more severe and frequent crisis needs of the child and provide special individualized intervention based on the child's treatment plan;
 - iv. interact and advocate effectively within a multi-system environment;
 - v. advanced knowledge of skills around parenting strategies to address child's mental health issues;
 - vi. specific knowledge of child's diagnosis and possible use of psychotropic medications/interventions; and
 - vii. willingness to restructure home.
- Specialized Foster Caregivers will complete the minimum agency required training hours to maintain their current certification (see Standard 6.3, *Combined Certification and Approval for Foster Care and Adoptive Families*). In addition, specialized Foster Caregivers will receive training specific to the needs of the child placed in their home.
- c. **The Skills and Qualifications of Agency Staff**
Agency staff should demonstrate the skills and qualifications described under Family Foster Care in addition to the following:
- i. advanced knowledge of child development, the impact of child abuse and/or neglect, mental health issues, juvenile delinquency;
 - ii. advanced knowledge of effective parenting strategies as related to child's mental health issues;
 - iii. advanced knowledge of diagnosis and use of psychotropic medications/interventions; and
 - iv. knowledge of and demonstration of intensive case management.
- d. **The Delivery of Services Needed to Maintain the Child in Placement**
- i. Agencies need to work with service providers to ensure that needed services are delivered in a timely, appropriate and culturally responsive manner to maintain the child in placement. Once the child and family's needs have been assessed (see Standard 3.1, *Child and Family Assessment*), agencies should locate and advocate for service providers, in or as close to the family's community, that will be able to respond to the needs of the family and/or child. Agencies should evaluate services to measure effectiveness, timeliness, and quality of service providers.

- ii. After an initial assessment, children who are placed in specialized foster care may exhibit behaviors requiring more/less therapeutic care. It is the agency's responsibility to assess what resources (e.g., training, services, respite) are needed for the foster family and the child that will support and maintain the placement and to provide/locate/decrease those resources so that the child will experience only one placement while in care.
 - iii. The frequency and intensity of contact should be in direct proportion to what the family and child are experiencing, but no less than weekly contact with caregiver and child and face-to-face contact once every two weeks.
- e. **The Corresponding Reimbursement Rates**
 Agencies should have a policy for assessing, implementing, measuring and evaluating the reimbursement rates for foster families. Policy should define expenses that are or are not reimbursable (e.g., transportation, respite, clothing, medical, school supplies, damage not covered by homeowner's insurance).
 Foster parents should receive information of the agency's reimbursement schedule and grievance process. The policy should clearly specify reimbursement changes if level of care changes occur and foster families should receive information of the reimbursement changes.
- f. **Occupancy Rate**
 Occupancy Rate should be based on the individual needs of the child in care and ability and skills of the foster family to meet those needs.

V. Financial Implications

Costs associated with Standard 6.2, *Placement of Children into Foster Care*, include assessment, treatment plan agreement, weekly contact, treatment team staffings, respite care, and foster caregiver training for a total of:

- a. Overall policy development: 80 hours x \$71/hour = \$5,680
- b. Child Assessment (psychological, medical, social history, education): 40 hours x \$89.25/hour = \$3,570 per child, plus any costs associated with services purchased to complete assessment
- c. Quarterly Reassessment of Child's Needs: see Standard 3.1, *The Child and Family Assessment*
- d. Development and Negotiation of Treatment Plan Agreement: 10 hours x \$89.25/hour = \$892.50 per child
- e. Weekly Contact with Foster Family Home and Child:
 2 hours x \$89.25/hour = \$178.50/week
 Annual Cost: \$178.50/week x 52 weeks = \$9,282
- f. Treatment team quarterly review of plan: \$240/hour of review plus any costs associated with paid professional consultation.
- g. Respite Care: \$30/day x 2 days per month = \$60/month/child or \$720 annually
- h. Foster Caregiver Training:
 - i. Family Foster Care: 12 hours per year x \$89.25/hour x 2 workers = \$2,142 per annual training class (20 hours)
 - ii. Specialized Foster Care: 18 hours/year x \$89.25/hour x 2 workers = \$3,213 per annual training class

Additional costs may include the rate per training session paid to foster parents to compensate for their attendance at the training sessions and the board, clothing, and other costs associated with maintaining the child in care.