

CARING FOR OUR KIDS

A Practical "How-To" Guide
for Foster Parents



Orange, Osceola and Seminole Counties



YOU MIGHT
BE TEMPORARY IN THEIR LIVES.

THEY MIGHT
BE TEMPORARY IN YOURS.

BUT THERE
IS NOTHING TEMPORARY ABOUT

THE LOVE
OR THE LESSON.

TONIA CRISTLE

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Dear Foster Parents,

Congratulations! You have now completed the pre-service training to become a Foster Parent and have the awesome responsibility of caring for our children in foster care. Many people, such as case managers, guardians ad litem, judges, and more, come together to do what is right for the child. Your role, as Foster Parent, has the most direct and immediate impact on the children and in shaping generations to come. Thank you for stepping up and accepting this life changing challenge.

As a valuable team member in the child welfare system, we offer this *“Caring for Our Kids”* handbook as an aid to help you meet the needs of our children. It is intended to be a practical “how-to” guide for Foster Parents in Orange, Osceola and Seminole Counties and was developed for use in your day-to-day experience as a Foster Parent.

I hope you find this information to be a useful time saver. As always, your input is invaluable to us. Please provide ongoing feedback via our website at www.EmbraceFamilies.org

Thank you again for accepting the great responsibility of caring for our children in foster care.

Sincerely,

Glen Casel
President & CEO
Embrace Families

OUR VISION

We envision a community that embraces vulnerable children and families with support – so that every child has a safe, stable, loving home and a path to a bright future.

OUR MISSION

The mission of Embrace Families Community Based Care is to ensure the safety, permanency and well-being of children formally in the child welfare system through foster care, adoption, family reunification and prevention services.

To achieve this, Embrace Families is committed to the following values:

We value a family, youth and individual model of practice that recognizes the assets, culture and voice of all, empowering them to reach their unique goals.

- The child, and their family, is our client.
- The safety and well-being of children will be the foremost concern at all times.
- The family is the principal resource we will work with to meet the child's needs.
- Permanency issues will be resolved in accordance with a child's sense of time.
- Services will be provided by community-based providers who are equipped to manage and deliver needed services and supports to meet the needs of children who are victims of, or at risk of, child abuse and neglect, and their families.

We value meaningful and healthy collaboration among our colleagues, partners, stakeholders, and the community. We believe the best solutions originate from diverse talents, temperaments and life experiences.

We value innovation, embracing change and visionary ideas. We believe in pursuing opportunities through prudent risk-taking, developing assets and creating new solutions.

We value integrity and honor our commitments by not compromising our ethics and moral principles. We speak the truth, keep our promises and take responsibility for our actions.

We value accountability and serve as good stewards of all assets entrusted to our organization. We believe in sharing information with ongoing communication and complete transparency.

- Resources will be efficiently managed to achieve better outcomes for children with the ultimate goals being child safety, well-being, and permanency within a twelve-month time frame.
- Financial support will be available from diverse federal, state and local sources and flexibly managed at the local level to meet child and family needs in a timely and appropriate manner.
- The system will collect and use data to accurately forecast what services and supports are needed, at what level of intensity and duration, and at what cost to achieve desired outcomes for each child and family in need.

We value inclusiveness and believe our organization is strengthened by mutual respect for all points of view.

WHAT TO EXPECT AS A FOSTER PARENT: OUR CUSTOMER SERVICE VALUES

*We believe in providing good customer service and you are our customer. As an agency we have **seven service values** that are core to our mission, which we refer to as our values of **RESPECT**. They are as follows:*

You can expect us to be **RESPONSIVE** in writing and speaking. Messages and emails should be answered within 24 business hours. We will listen to you and ask a lot of questions in an effort to get to know you and understand your family circumstances.

You can expect us to be **EMPOWERED** and for us to help you feel EMPOWERED. We will not let bureaucratic red tape get in the way of providing needed services for you or the children in your care. We will ask what you think needs to happen. Your opinion is valued. We may not always agree, but we should listen to one another. It is our job to help you identify the tools needed to be successful.

You can expect us to be **SUPPORTIVE**. We will assist you in accessing needed information and services. Your foster family advocate is available to help provide guidance when you have questions or need advice from an experienced foster parent.

You can expect us to be **PROFESSIONAL**. The integrity of our organization is reflected through our individual behavior. You will be made aware of events that require your participation in a timely manner.

You can expect us to be **ENGAGED**. We give and receive feedback to ensure continuous improvement. We are accountable. There is a feedback process and chain of command for you to reach out to if you feel you are not receiving good customer service.

You can expect us to be **COURTEOUS**. We should always be respectful of you. You should have an expectation of confidentiality and self-determination.

You can expect us to be **TRUSTWORTHY**. We will earn your trust through our words, actions and follow through. Sometimes things are overlooked. Please point this out if needed and every effort will be made to resolve the issue.

**We want to hear from you:
Give a compliment. Share a concern.
Offer an improvement. Lead change.**

**www.EmbraceFamilies.org
Click "Give us feedback"**

ROLES & RESPONSIBILITIES

Your Role As A Foster Parent

As a Foster Parent, you are responsible for the temporary care and nurturing of a child while supporting the permanency goal chosen for that child during the time the child is placed in your home. Your role includes working with the Case Manager and the child's family so that the child can return home safely, when appropriate, or move to a permanent home. The role of a Foster Parent is critical to the well being of the child and includes many different responsibilities.

Your Responsibilities As A Foster Parent

- Provide love, care and support for the child as if they were your own.
- Provide temporary care for children, giving them a safe, stable, and nurturing environment.
- Support the legal permanency plan for the child. In most cases, this is reunification and can also be permanent guardianship with a family member or friend or, if neither are available, adoption. Collaborate with the Case Manager and the child's parents in carrying out a permanency plan, including participating in that plan when needed and appropriate. This may include attending staffings, court hearings, medical and therapy appointments, parent visitation, etc.
- Understand the child's need to keep family and cultural connections while in your care, including assisting with parent, sibling and other family visits.
- Help the child cope with the separation from his or her family.
- Provide guidance, structure, discipline, a good example, and as many positive experiences as possible.
- Encourage and supervise school attendance, participate in teacher conferences, and keep the child's Case Manager informed about child's grades, behavior and any special educational needs.
- Arrange for, attend and transport the child to their medical, dental, therapy, extra-curricular activities and family visits.
- Work with the child on creating a Life Book.
- Inform the Case Manager promptly about any problems or concerns so the child's needs can be met through available services. If there are delays in service requests or service delivery, contact networksupport@embracefamilies.org promptly.
- If the child is interested, involve the child in recreational and social activities.
- Hold all information about the child and the child's family confidential. Discuss the information only with an agency staff member or a specialist (i.e., doctor, psychiatrist, therapist) working with the child.
- Utilize My Jump Vault to store important documents/pictures/forms related to the child and the child's case.

FOSTER PARENT STANDARDS

To ensure the safety and well being of our most vulnerable children, Foster Parents in Orange, Osceola and Seminole Counties must meet the Standards for Family Foster Homes, which were established by the Florida Department of Children and Families. These standards are outlined in Florida Statute Chapter 409 and Florida Administrative Rules 65C-13 & 65C-15.

- Florida Statute Chapter 409 – Section 409.175(11)(A) 2
- Florida Administrative Rules
 - Rule 65C-13 – Substitute Care of Children
 - Rule 65C-15 – Child Placing Agencies

Discipline

A big part of parenting in general is managing behaviors. For Foster Parents of a child traumatized by abuse or neglect, discipline is used as a training process through which the child develops self-control, self-reliance and orderly conduct. How a caregiver responds to a behavior versus reacts to a behavior will ultimately define the success of the correction being applied.

Discipline should focus on deterring unacceptable behavior by encouraging the child to develop internal controls. Foster Parents are expected to practice trauma informed parenting, which includes defining rules that establish limits and types of acceptable behavior, and communicate to the child at the child's level of understanding. These rules must be clearly explained to each child. Corporal punishment of foster children is NOT permitted. Disciplinary policies are outlined in Florida Administrative Code 65C-13.

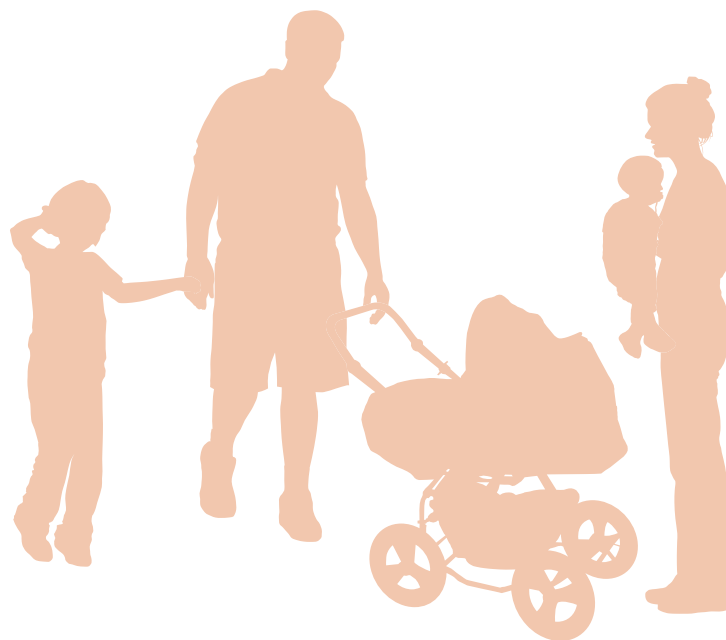
Prohibited disciplinary practices include:

- Group punishments for misbehavior of individuals
- Withholding of meals, mail, family visits, phone calls with bio family and/or visits to Case Manager, Guardian Ad Litem, or mentor
- Hitting a child with an object or spanking a child
- Physical, sexual, emotional and/or verbal abuse
- Humiliating or degrading punishment which subjects the child to ridicule
- Placing child in a locked room
- Delegation of authority for discipline to other children or persons not known to the child
- Withholding of allowance

Training Resources

There are many different parenting techniques and resources to help refine and learn new skills. Below are a few suggestions:

- Ask your licensing specialist about trainings available through Embrace Families and your Child Placing Agency.
- Join the Orange/Seminole County Foster Children's Association:
Contact Jerry Pitzer at 321.299.2295; like them on Facebook:
www.facebook.com/Orange-Seminole-Foster-Childrens-Association-581064308700755
- Join the Osceola County Foster and Adoptive Children's Association:
Contact Jerry Pitzer at 321.299.2295; like them on Facebook: www.facebook.com/myofaca
- Take an online training course through the Quality Parenting Initiative website at:
www.qpiflorida.org
- Like the Florida State Foster/Adoptive Parent Association on Facebook:
www.facebook.com/FSFAPA
- Find more information through Florida Department of Children and Families:
www.myflfamilies.com/service-programs/foster-care/links



WHO TO CALL FOR HELP AND ADVICE

There are many people involved in meeting the needs of our children in care. Each person has a different role and set of responsibilities. It can be frustrating to call one person and be told you should call someone else.

In general, your primary point of contact should be your Licensing Specialist for any questions regarding the status or changes to your foster care license. This may include, but not be limited to: changes within your home, family composition, health, finances, etc. This is also your point of contact for needs or questions you may have regarding the child placed in your home.

The child’s Case Manager can be and should be contacted for questions or issues that may involve the foster child’s legal case or permanency goal, but there may be times they are not immediately available. So remember, if you are not receiving a call back or are confused about what to do, no matter how simple the question may be, call your Licensing Specialist.

The matrix below is designed to assist in answering the question “Who do I call?” In some cases, two or three people may need to be notified. The following chart is only a partial list of who to call when certain situations arise. If all else fails, contact your Licensing Specialist. This cannot be emphasized enough.

Situation	1st Point of contact	2nd Point of Contact	Other Source
Foster child behavior problems	LS	CM	Therapist, if assigned
Child care; after school care; daycare	CM	LS	Nikki Ludwig for 1st time placements
Case Manager’s monthly visit to see child	CM	LS	
Foster child clothing needs	LS	CM	Clothing Closets; Foster Family Advocate
Concern with the child’s parents	CM	LS	
Critical incident, such as death, serious injury or illness, suicide attempt, or arrest of a child	LS	CM	AH*
Doctors that take Medicaid	LS		Embrace Families CBC Nursing Coordinator
Emergency medical care needed	LS		Doctor; ER/Hospital; AH*
Foster child runs away	CM	LS	AH*; Police
Visits between the foster child and his/her family	CM	LS	

Situation	1st Point of contact	2nd Point of Contact	Other Source
Foster child's records – Social Security #, Medicaid #, MyJumpVault (MJV), medical history, school enrollment, etc.	CM	LS	I&E; Foster Family Advocates
Medicaid	CM	LS	I&E; CBCIH rep
School enrollment/school problems	CM	LS	
Travel with foster child	CM	LS	Please email requests to: <i>FPVacation@embracefamilies.org</i>
Board rate late, lost, incorrect, etc.	LS		Embrace Families Finance – Client Payment Manager: 321.441.2060
Foster Home Quarterly Visit	LS		
Foster Home Moving	LS	CM	
Questions about foster home license	LS		
Relative or other person moving in with you	LS		
Remodeling or structural changes in your home	LS		
Respite Care	LS	CM	
Rest needed before accepting more children	LS		
Serious illness of Foster Parent or family member	LS	CM (only if child is placed in the home)	
Support group schedule	LS		
Training requirements for Foster Parents	LS		
Vacations	LS	CM	Please email requests to: <i>FPVacation@embracefamilies.org</i>

KEY: AH* – After Hours. **EF** – Embrace Families.

CBCIH – Community Based Care Integrated Health. **CM** - Case Manager. **I&E** – Intake and Eligibility. **LS** – Licensing Specialist.

**Each agency has their own after hours number to call in case of an emergency.
These numbers are available through your Licensing Specialist.*

FOSTER FAMILY ADVOCATES

Embrace Families recognizes that there is a lot that goes into understanding the role of a Foster Parent, and it takes time to learn. A wide range of feelings can be experienced, whether a child is placed in your home for a few days or for a long period of time.

A team of experts is available to help you throughout this journey, so you can focus on meeting the emotional and physical needs of your foster child and your family. Foster Family Advocates are current or previous foster and adoptive parents, who are available to assist Embrace Families Foster Parents navigate through the complex system of care. The Foster Family Advocates are skilled in answering basic “how to” questions related to Medicaid and other health related system of care questions; ensuring prompt service referrals; understanding the types of staffings; engaging the biological family; Dependency Court and visitation. Simply put, the Foster Family Advocates have direct experience in fostering and are another resource available to assist in alleviating and celebrating the ups and downs of fostering.

A synopsis of the Foster Family Advocate’s essential roles and responsibilities is as follows:

- Serve as system navigator between Foster Parents, Child Placing Agencies (CPA), Case Management Agencies (CMA), Embrace Families and other providers when issues arise that require resolution. This may include, but is not limited to: attending various staffings with the Foster Parent(s); attendance at court hearings; assistance with arranging respite, mentoring and various other support, etc. The advocate works to mitigate conflict between parties.
- Attend, when needed, Placement Support Staffings (PSS), placement transition meetings and Family Support Team (FST) staffings to provide support to a Foster Parent and act as a link to assist them in understanding permanency and case goals of the child, as well as to navigate the system of care.
- Support the identified goal of the child and work with the Foster Parent to aid in understanding how best to support those identified goals.
- Available on call 24 hours a day/7 days a week. Timely follow-up of emails and telephone calls in accordance with Embrace Families Customer Service Values.
- Contact all newly licensed foster homes within 72 hours of licensure to provide support and guidance.
- After initial contact, contact each Foster Parent on a quarterly basis to ensure regular communication is taking place and to re-emphasize the Foster Family Advocate’s availability and role.
- Contact all foster homes with new placements within 24 hours after transfer from the initial placement.

Embrace Families Foster Family Advocates

Nikki Ludwig*

Initial Placement (Tri-County)
407.493.9526
nikkifpl@yahoo.com

Dania Guzman

Orange/Osceola County
407.401.3244
daniafpl@yahoo.com

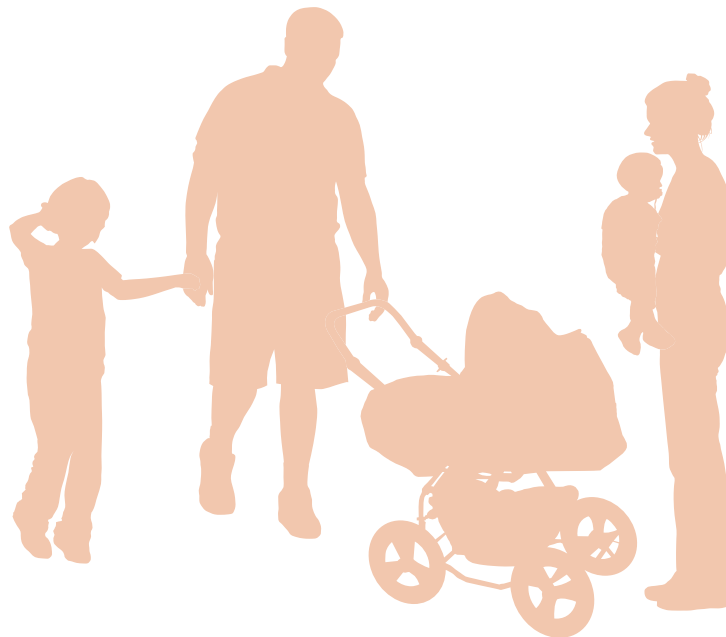
Jennifer Cardinal

Orange/Osceola County
407.694.9954
jenfpl@hotmail.com

Kelli Bock

Seminole County
407.637.0482
kellifpl@gmail.com

**Note:* Nikki will assist all Foster Parents for the first two weeks after they receive a new placement, ensuring educational, medical, daycare and other immediate needs are met. Nikki then hands off to the Foster Family Advocate assigned to the county of residence of the Foster Parent.



WHAT TO DO WHEN . . . YOU ARE CALLED TO TAKE A CHILD

When a child must be placed in foster care, we try to look for the least restrictive placement that is closest to the child's home and that can best meet the child's needs. If possible, the child will be placed with someone they already know, such as a relative or family friend.

When a child has to be placed in foster care, your home may be considered based on your ability to meet the specific needs of that child. Before placement, you will be contacted and given background information on the child and family. Things you will want to ask when you are called to have a child placed with you include:

- Child's name, age, school grade, any notable issues
- Reason for placement and anticipated length of stay
- Medical information and Medicaid #
- Previous placements and the child's history – behaviors, health, school, etc.
- Are there siblings? If so, where are they placed? (with relatives, another foster home, group care, etc.)
- Any known allergies to foods, medicines, etc.
- Any known behavior issues
- Is there anything I've forgotten to ask that could be important in parenting this child?
- Child Protective Investigator's name; Child Protective Investigator Supervisor's name and phone number; On-call information and/or Case Manager's name; Case Manager Supervisor's name, phone number(s), and on-call information

It is important for you to have as much information as possible to make the decision about accepting this child into your home. Your entire family will need to accept this child and should participate in the decision. However, if the child was removed quickly or in the middle of the night as an emergency, information may be limited and the Child Protective Investigator or Case Manager may not have answers to all of your questions. Please be conscious of this as we will rely on you to help us better understand the needs of the child. Contact your Licensing Specialist the next day for further follow-up information.

What if I Can't Accept a Placement?

Always remember you have the right to say "no" if you feel a child will not fit into your family; if you cannot accept or cope with a child's specific needs; or if you need a break from fostering for personal or professional reasons. Saying "no" to a placement is understood and we encourage you to review with your Licensing Specialist.

Your Licensing Specialist or someone from your Child Placing Agency will contact you when placement is needed. It is important to note there will be times when capacity is at a peak in our system of care, thus you may receive calls for placement that go outside your usual preference and placement profile. We ask that you keep an open mind and are patient with us as we try our best to find the most appropriate placement for the children coming into foster care. If we can keep siblings together or prevent placing children in a group care setting, we will contact each and every foster home for consideration and work with you to accommodate a child or sibling group in your home.

When you accept a child for placement in your home, make a commitment to the child by having them remain in your home, even during challenging times. Moving from home to home is not healthy for children and can be emotionally damaging. Ensuring that services are promptly in place is everyone's goal.

WHAT TO DO WHEN . . .

A CHILD COMES TO YOUR HOME

When a child enters your home, he or she will need time to adjust. Each child may act differently and will need to move at his/her own pace and comfort level. This will be an exciting time for you, whether it's your first placement or your 50th. Be conscious of your enthusiasm. Remember, for the child, it is a traumatic event to be removed from everything he or she knows. Below are some tips to help the child adjust to your home and a list of requirements that must be met within specific time frames.

Tips on welcoming the child

- Welcome the child with some kind of activity, if appropriate.
- Take the child to the grocery store to pick out some favorite foods, cereals, snacks, etc.
- Show the child their place to keep personal possessions. Let them unpack in their own time.
- Within reason, encourage the child to make the room their own. Let them pick out posters to hang on the walls that reflect their interests and personality.
- Let them know it is alright to put pictures of their family or previous foster families in their room, and that you understand how important these people are to them.
- Be sensitive to their feelings. Ask permission before hugging or touching them.
- Don't try to change their hair or clothing, or do anything that says, "You're not OK the way you are."
- Take pictures of the child to have around the home and add to their life book.
- Explain the family routine, such as dinner time, homework time, bed time, etc.
- Go over the family rules. Rules should be clear and concise. Provide a printed copy, if age appropriate, or post on the refrigerator to prevent misunderstandings.
- Ask the child if there is anything he or she needs or would like to have.

Don't overwhelm the child with the above outlined tips. There is no time frame. Assist and let the child choose the time frame.

Time sensitive requirements: Schedule medical appointments

The following appointments are for initial placements. If the child is already in licensed care and this is a subsequent placement for him/her, ask the Case Manager for the last date of the below appointments so you can stay on schedule for their annual appointments. The Case Manager will ask you for dates and updates on these appointments.

- EPSDT (Child Well-Being Exam) – Within the first five (5) days of placement, after receiving the child into your care. To schedule, you can call your own pediatrician or the local Health Department in your area. In Seminole County, EPSDTs are also available through Kids House of Seminole.
- Immunizations – Updated within the first 30 days after receiving the child into your care. (All ages)
- Dental Appointment – Within the first 60 days after receiving the child into your care, then every 6 months thereafter. (Children 3 and above)
- Vision Appointment – Within the first 90 days after receiving the child into your care, then once a year thereafter. (Children 6 and above)

- Enrollment of child in school. If you need assistance, contact the child's Case Manager. Enrollment of the child in your school zone may not be allowed due to the Every Student Succeeds Act (ESSA). ESSA provides all children and youth in foster care with core protections for school stability. Under the new law, state education agencies must assure that students in foster care remain in their school of origin, unless it is not in their best interest. If you have questions regarding school enrollment of the child, please call your Licensing Specialist for assistance.
- Enrollment of the child in daycare or before-and-after school care (if needed). If you need assistance with daycare, contact the child's Case Manager. Be sure to let your CPA know you will need day care when they call you for placement. This can assist in the timeliness of the daycare enrollment.

Child's Records – My Jump Vault (MJV)

When a child first comes to your home, you will receive a placement confirmation email and information on how to access MJV. MJV is an online record management system where youth, Case Managers and caregivers can store important information and documents about the child. The documents can be accessed from any computer or mobile device with internet access. The Foster Parent scans the document to MJV for storage. You only have to enter documents once, regardless if the child's Case Manager changes.

After you have registered, save the MJV link to your desktop, laptop and/or phone: floridamyjumpvault.org. For assistance, contact your Licensing Specialist or a Foster Family Advocate.

The Foster Parent is expected to keep MJV current and include items such as:

- School records (i.e. report cards, Individual Education Plans (IEP), FCAT scores, etc.)
- Medical, dental, and immunization records
- Psychological and psychiatric records
- Mental Health/Behavioral records
- Daycare information and records
- Any child evaluations
- Any information that would help a future caregiver care for the child
- Pictures, pictures, pictures! Please upload pictures of the child. This may be the only record of the child's childhood. This can include school pictures, pictures of the child with your family, their friends, their family, etc. Let's keep their memories alive!

Life Books

A Life Book is a child's photo album and history. In some cases this contains the only pictures the child has from their childhood. From the first moment a child enters your home, begin creating and capturing memories to include in their Life Book. Start a photo album and collect pictures from the first day of school, birthdays, or just day-to-day events. Include pictures of the biological family from visits or pictures they send from home. Include pictures of the child with your family. Also, include report cards, certificates, ribbons, mementos from family outings or school trips, their first lost tooth or lock of hair from their first haircut. Memories are the footprints of a child's journey of life. Let's collect those memories for them.

Participating in the Court Process

Foster Parents are an important part of the professional team and we encourage you to attend court hearings related to your child's case. Your input is essential to ensuring the best interests of the child will be met. You can stay informed of court dates and times through your child's Case Manager or the child's Guardian Ad Litem.

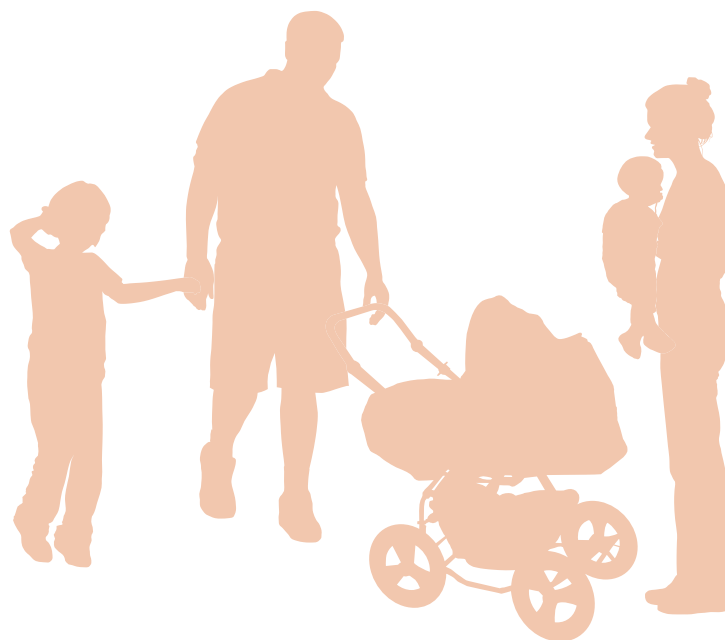
For each Judicial Review, which is a legal review hearing of the child's legal case and status of the permanency goal, the Foster Parent is required to complete the Caregiver Input Form. This form allows the Foster Parent/Caregiver to submit vital information on how the child is doing from the Caregiver's perspective. You are given the opportunity to provide information on the following: the child's needs, current or further needed services, visitation with parents, siblings or family members, permanency goal or transition plan.

The form is available via the Embrace Families website at www.EmbraceFamilies.org. To locate the form: on the homepage go to "Key Resources" and select "Document Center". >> Select "Caregiver Resources" >> Click the "download" link beside CAREGIVER INPUT FORM FOR COURT; >> In the pop up window, select "Open the document with Microsoft Word" >> Edit, save and upload the completed form to My Jump Vault.

Participating in Staffings

Foster Parents are an important part of the professional team and are encouraged to attend staffings. Your input is essential. You can stay informed about staffings, such as FST (Family Service Team), through your child's Case Manager or Guardian Ad Litem. You are also encouraged to participate in meetings/staffings at your child's school, if they are school aged.

Placement Support Staffings (PSS) are also available to the foster parent to assist you in receiving support during the placement of a child in your home. PSS's can be requested through your Licensing Specialist for various reasons that may include, but are not limited to: timely services for the child, conflict resolution, or additional support in stabilizing the placement of the child in the home.



WHAT TO DO WHEN ... A CHILD LEAVES YOUR HOME

When you are notified that the child is leaving, it is important to get your feelings in order before talking about the move with the child. Whether you feel joy or grief, you need to talk to the child calmly and supportively. If you are feeling very emotional (many Foster Parents feel this way) and you need a good cry, be sure to do it in private. Separation is difficult enough for a child. We don't want them worrying about the big people too.

Embrace Families is committed to ensuring that there is adequate time to prepare a child leaving the home for the benefit of the child and the foster family; however, please keep in mind that there may be times when this is not possible due to an unexpected court hearing or a motion by the opposing attorney. An unexpected court order means there may not be time to prepare and plan for the child to leave; departure may be immediate or within a few hours of being notified.

Who tells the child he is leaving?

You and the Case Manager will work together to decide who will tell the child. In some cases, the Case Manager is more appropriate. In other cases, it might be the Foster Parents or the therapist working with the family. The deciding factor should be which ever will make the child most comfortable.

How do I tell the child?

Honesty and kindness is the best rule of thumb. Every situation is different. Try a calm and simple statement such as "Today the Judge said ..." and put it in easy to understand language for the child. If it is news the child has been anxious to hear, rejoice with the child.

If the child will be moved to a new foster home or adoptive family, they may be afraid of the unknown. They may fear returning to their parents. Make positive statements. Do not promise happiness forever. Find positive, truthful things to say, such as: "Your family has waited a long time for you to come back"; or "Your Case Manager says you will like this new home because ..."

When the child leaves

Be sure to pack all the child's possessions. Sometimes children come to our homes with few items of their own, but these possessions are still important to the child. Any items purchased with the board rate you receive, donated, or given as a gift belong to the child. This includes all clothing, car seats, bikes, electronic games, gift cards, etc. Take a tour of the house with the child to find what belongs to them.

When the child leaves, his/her possessions must be packed in a suitcase or nice duffel bag and not placed in garbage bags. Boxes are allowed if the child has a lot of belongings that will not fit in suitcases. If a suitcase is needed, contact the Case Manager or your Licensing Specialist.

Send the Life Book and any other school photos, report cards or mementos with the child. It is also beneficial to write up important information to help the child and the family with the transition. This may include: the child's schedule, his likes and dislikes, fears, bedtime routines, etc. You may even want to write a going away letter to the child, letting him or her know how much you enjoyed them staying with you. If the child is moving to a new foster home for positive reasons - i.e. to join siblings or needs a more appropriate level of care - consider contacting the new Foster Parent beforehand to discuss the child's needs, their strengths, fears, etc. Describe how you managed the child's needs. Any insight for the new caregiver will be helpful and appreciated for the child's success.

Once the child is gone

Try to send the child off with pleasant memories. When the front door closes, feel free to cry or celebrate ... whichever applies to your feelings. Then tell yourself you did the best you could. You cared for the child when they needed a parent. They have a brighter future because of you!

WHAT IS NORMALCY?

Normalcy can be defined as any activity that would be considered typical and appropriate for the child based on their age and needs. Outside of the child welfare system, this is usually determined by the child's parent or other caregiver relying on their every day judgement and parenting skills. For a child placed in foster care, it will be determined by you, the Foster Parent, using what we like to call "Reasonable and Prudent Parent Standards". Just because a child has been placed in foster care should not limit their experiences as a child. We want them to experience a "normal" childhood as much as possible. Hence, the term "Normalcy".

A more formalized explanation of Normalcy can be found in the Child and Families Operating Procedure (CFOP) 170-11, Chapter 6, Normalcy:

- Explanation of Reasonable and Prudent Parent Standard
In accordance with s. 39.4091, F.S., "reasonable and prudent parent standard" means the standard characterized by careful and sensible parental decisions that maintain the child's health, safety, and best interests while at the same time encouraging the child's emotional and developmental growth, that a caregiver shall use when determining whether to allow a child in out-of-home care to participate in extracurricular, enrichment, and social activities.
- Normalcy Overview
 - a. A child's right to live a healthy, normal childhood is paramount.
 - b. A reasonable and prudent parent standard will be applied to decisions regarding a child's participation in normal childhood activities.
 - c. Out-of-home caregivers shall be supported in their decision making.
 - d. Normalcy focuses on enabling opportunities for social development, recreation, academic growth and positive life experiences, based on a child's desires and developmental, emotional, physical and other needs. Caregivers are empowered to make decisions using a reasonable and prudent parent standard. Guidelines aimed at also increasing normalcy for caregivers are addressed in Chapters 7 and 8 of DCF 170 -11 Operating Procedure.
 - e. Decisions shall not contradict any existing court order.
 - f. While caregivers have authority to make decisions about the normal activities of foster children in their care, the caregiver needs to consider known parental wishes in these decisions.

KEYS TO INDEPENDENCE

Keys to Independence is a statewide program managed by Embrace Families that supports youth in obtaining their permit and license, as well as obtaining automobile insurance. It helps remove barriers to driving by reimbursing the cost of licensure, driver's education, motor vehicle insurance and other incidental costs for children in foster care. All qualified youth are required to complete a driver's education program.

**Contact the
Keys to Independence program
at 321.441.2060 www.K2I.us**

Driving

Teens in foster care should be given every opportunity to earn their learner's permit and driver's license. This is allowed under Normalcy and is outlined in DCF CFOP 170-11, Chapter 6, Section 6 - 8, Driving.

6-8. Driving

- a. Caregivers and child welfare professionals shall assist eligible teenagers in finding a driver's education program.
- b. Support of the teenager's efforts to learn to drive a car, obtain a learner's permit, and earn a driver's license shall be based upon the child's age, maturity, and access to insurance.

Babysitting and Overnight Care

Babysitting and Overnight Care is designed to provide temporary relief and support for foster families. It allows Foster Parents to take a break and rejuvenate, which helps prevent burn out. These child care services can be provided for a few hours, all day, an evening, a weekend, or for special occasions.

It is important that the Foster Parent understand and follow the requirements as outlined in CFOP 170-11, Chapter 7, Babysitting and Overnight Care, Section 7-3 & 7-4:

7-3. Babysitting Overview

- a. Babysitting does not include overnight care or daily childcare.
- b. Babysitting does not have to occur in a licensed setting and background screening is not required.
- c. Caregivers should use the Reasonable and Prudent Parent Standard when choosing babysitters for children placed in their care. Caregivers will ensure:
 - (1) Babysitter is suitable and appropriate for the age, developmental level and behaviors of the child.
 - (2) Babysitter receives guidance on handling emergencies, including telephone numbers for themselves, child welfare professionals, and physicians.
 - (3) Discipline and confidentiality policies for the child have been fully explained.
 - (4) Water safety precautions have been explained.
 - (5) Babysitters must be age 14 or older.
- d. Caregivers shall use the Reasonable and Prudent Parent Standard when assessing a child's ability to stay home alone. Examples of factors to be considered by the caregiver include:
 - (1) Physical and developmental age.
 - (2) Child's knowledge of safety rules, emergency contacts and comfort level.
 - (3) Child's history of trauma and reasons for entry into care.
 - (4) Child's treatment recommendations and needs.

7-4. Overnight Care

- a. Caregivers may allow a family member or person who is well known to them to provide care for children placed in their care overnight.
- b. Caregivers shall utilize the Reasonable and Prudent Parent Standard when selecting substitute care.
- c. Substitute caregivers chosen by the caregiver for babysitting will be background screened for all stays exceeding three (3) nights. When the substitute caregiver is utilized due to unexpected circumstances, background screening will be initiated within one (1) business day.
- d. Caregivers shall notify the assigned Case Manager in advance of all overnight stays exceeding three (3) nights.
- e. The assigned Case Manager shall consult with the supervisor and other involved parties, such as the Guardian Ad Litem, when the overnight stay will exceed seven (7) nights. When relevant, agreement by all parties shall be documented by the child welfare professional in Florida Safe Families Network.
- f. Caregivers shall ensure that the assigned Case Manager can contact them at all times regarding the location and needs of the child.

Out of Town Travel and Vacation

When Foster Parents travel with their own family, whether for a short weekend adventure or a planned family vacation, we strongly encourage Foster Parents to take the children placed in their care with them. As we train in PRIDE pre-service training and try to instill through the term of the Foster Parent's licensure, our goal is to "treat the foster child as you would your own child." If a Foster Parent is traveling for a vacation that includes the whole family, arrangements will be made, to every extent possible, to include the foster child. It can be hurtful and traumatizing for a foster child to not be included in family vacations. They may see it as another episode of being rejected. We also understand that there are exceptions when this cannot occur, i.e. family emergency, such as a funeral.

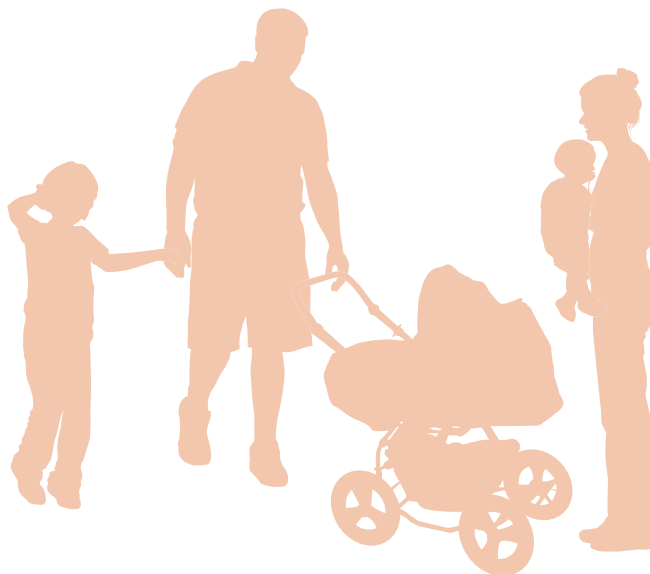
Some things to remember when planning Out of Town Travel, as outlined in CFOP 170-11, Chapter 8, Sections 8-3 & 8-4:

8-3. Vacation

- a. Caregivers shall be encouraged to take children placed in their care on planned family vacations.
- b. When travel involves visiting with friends or family of the caregivers, background screening is not required. Caregivers shall utilize a Reasonable and Prudent Parent Standard when choosing who to visit when traveling.
- c. Caregivers will notify the assigned Case Manager of all out of town travel in advance and in accordance with existing court orders.
- d. Travel cannot conflict with orders of the court. Additional court approval may be required prior to travel. Scheduled visits with biological parents and family may take priority and should be considered when scheduling the travel.
- e. While caregivers have authority to make decisions about the normal activities of foster children in their care, the caregiver needs to consider known parental wishes in these decisions.

8-4. Out of Town Travel

- a. Out of town travel must also be in compliance with the above-referenced CFOP section 8-3 concerning vacation.
- b. When caregivers need to travel and taking a child with them is not prudent, such as a family emergency, they may choose to leave the child in their care with a family or person well known to them in accordance with Chapter 7 of this operating procedure.



Travel Requests

Embrace Families has a general email for Foster Parents to use when requesting travel permission and court orders. This makes it easier to follow the above guidelines and to notify other parties involved of your plans. The email is *FPVacation@embracefamilies.org* and the instructions are as follows:

I. Foster Parent Responsibility

- a. At a minimum 30 days before travel, a Foster Parent must submit an email to *FPVacation@embracefamilies.org* and the assigned Case Manager for the child which outlines the following:
 - i. Child's name
 - ii. Child's DOB
 - iii. County of residence of Foster Parent
 - iv. Case Management Agency assigned to child
 - v. Name of Case Manager
 - vi. Destination of travel – address, city/state
 - vii. Reason for travel
 - viii. Length of stay – dates of departure and return
 - ix. How to contact Foster Parent during the travel time – two means of contact are required (Preferably two phone numbers. E-mail is also permissible as a means of contact.)
 - x. Whether visitation will be impacted and the plan to make up this visitation within 30 days of the travel

II. Embrace Families Operations Team Responsibility

- a. *FPVacation@embracefamilies.org* email will be distributed to appropriate County Ops Manager and County Administrative Assistant so they may monitor progress of vacation request.
- b. Spreadsheet with following info will be maintained by the County Ops Manager:
 - i. Date vacation email received
 - ii. Date vacation status submitted to CLS
 - iii. Date CLS filed vacation status with court
 - iv. Date objection filed, if any, from other party
 - v. Date ordered, if needed
- c. The County Ops Manager will "Reply All" to the email, specifically the Foster Parent, that the email has been received and is being processed.

III. Case Manager Responsibility

- a. Submit a status report to CLS within three (3) business days of receiving Foster Parent notice with the above listed details.
- b. Notify the Foster Parent that the court order for travel has been requested. If there is an objection from another legal party, the Case Manager will notify the Foster Parent within 24 hours of being notified of the objection.
- c. Once the court order is received, the Case Manager will deliver to the Foster Parent within 24 hours of receipt.

More Tips for Babysitting, Overnight Care and Travel

Good preparation will help ensure a good experience for the child(ren) and enjoyable time away for you.

Preparing the Babysitter to Care for the Children

During the first phone contact, provide the following information to the babysitter or temporary caregiver:

- Child(ren)'s name and age
- Child's Case Manager and contact information
- Any scheduled appointments, family visits, therapy, etc.
- Interests, fears, behaviors
- Food likes and dislikes
- Daily schedule, bedtime routine, etc.

NOTE: The more information the babysitter or temporary caregiver has the better they can prepare and provide the child with an enjoyable experience. This information should also be posted on the refrigerator or another central location in your home.

Preparing the Child for Respite

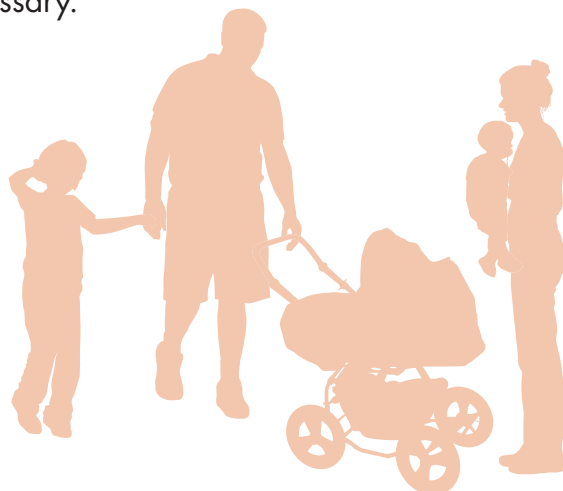
Explain to the child that he/she is going to a friend's house for a few days. This can be a scary and confusing time for the child. Reassure him/her that the family is safe and let him/her know when you will return (give the exact date). In addition to clothes and hygiene products, have the child bring some toys, books, and any special items (stuffed animal or blanket) that gives them comfort. Preparation is the key to a great respite weekend.

When you arrive at the temporary home make sure the caregiver:

- Knows how to reach you in case of an emergency
- Has a printed copy of the child's information that you discussed on the phone
- Knows you will call to wish the child good night or to check in
- Receives the board rate for the child. This is arranged by you and the temporary caregiver providing respite and does not go through Embrace Families.

Payment to the Caregiver

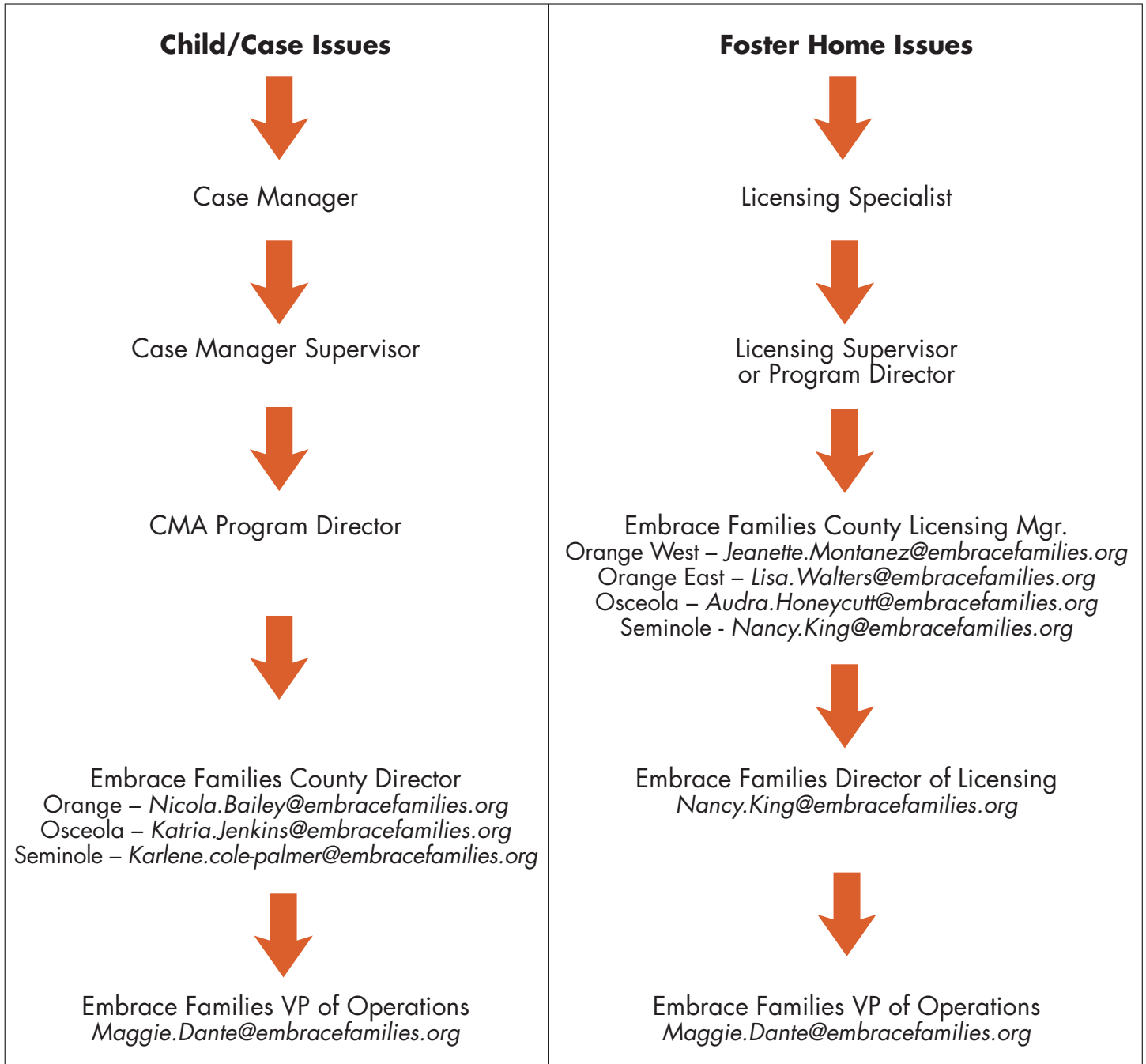
Caring for the child during the Foster Parent's absence is the responsibility of the Foster Parent. Generally, the Foster Parent pays the babysitter/respite caregiver the current board rate that they receive for the child for the number of days they care for the child. Embrace Families takes no financial responsibility for payment unless the child officially changes placement from one licensed foster home to another. In some cases, caregivers agree to share babysitting among themselves to give each other a break and no payment is necessary.



FINDING SOLUTIONS

When advocating for a child, your key resource is the child’s Case Manager. For questions or concerns with the maintenance of your foster home license, your agency’s Licensing Specialist is your primary contact.

When the Case Manager or the Licensing Specialist is unable to meet the child’s needs or address your concerns, you may feel you want to take the matter to a higher authority. Before taking that step, please make sure you have tried to work out the situation with the Case Manager or Licensing Specialist provided on page 27 of this guide. If that has not been successful, below is an overview of some additional options.



RELICENSING

As is required for many professionals, each foster home must be relicensed on an annual basis. This is necessary for the ongoing protection and safety of our children. No later than ninety (90) days prior to the expiration of your license, you will receive a relicensing packet from your Licensing Specialist initiating the relicensing process.

The following items must be completed prior to your re-licensure home visit:

- Complete and sign:
 - Application for re-licensure
 - Partnership Agreement – completed at initial; discussed annually
 - Central Abuse Hotline form
 - Income and Expense Statement
 - Swimming Pool Safety Policy – completed at initial; discussed annually
 - Water Safety Affidavit and Water Safety Training Certificate, if applicable – completed at initial; discussed annually
 - Annual background screening checks on any person in the household that is 12 years of age or older. This includes civil checks, DMV or FDLE.

- Items needed:
 - Disaster Plan
 - Floor Plan with room dimensions
 - Local criminal check for all family members in the home over the age of 12
 - Name of the Dependency Case Manager (DCM) and phone number for each child placed in your home
 - Copies of:
 - o Vaccinations on all pets, if new shots are required (should be provided at expiration)
 - o Fire drill logs (must be done every 6 months and ideally every time a new child is placed in the home)
 - o Updated fire extinguisher tag, if expired
 - o Updated insurance policies for all cars in the house, if expired
 - o Valid driver's license
 - o One month's worth of verifiable income for each Foster Parent
 - o Training certificates – 8 hours of training is required for traditional homes; more required depending on level of care (i.e.: medical or therapeutic homes); Half of the training hours must be classroom based/in person training
 - o Passport or proof of U.S. citizenship (if not born in U.S.)
 - First Aid Kit and fire extinguisher (two are required for bi-level homes)
 - Pictures of child's room(s), bathroom, common areas, outdoor play areas, and any other areas to be used by the child
 - Updated pictures of family/household members and pets

- Additional Items – Each agency may require additional items or, when changes in statute or code occur, items may be added or removed.

SUNSHINE HEALTH CHILD WELFARE SPECIALTY PLAN

The Sunshine Health Child Welfare Specialty Plan is a Medicaid plan designed specifically to cover health care needs of children in foster care and adopted out of foster care. Currently over 40,000 Florida youth are enrolled.

Who are the companies that are involved?

Sunshine Health (contracted entity) – Operates the physical health and behavioral health care system.

Community Based Care Integrated Health (CBCIH) – Provides care coordination and linkages to Sunshine Health's Integrated Care team and serves as the primary contact with the dependency case management system.

EMBRACE FAMILIES

Employ Nurse Care Coordinators (NCC) and Behavioral Health Care Coordinators (BHCC) who:

- Monitor well-child checkups, immunizations and medical/dental appointments (NCC)
- Case manage children with serious medical problems or those who are at risk for serious medical problems (NCC)
- Monitor children in need of specialized mental health and substance abuse services such as STFC/TGC/SIPP/BHOS (BHCC)
- Facilitate the multi-disciplinary team meeting process to determine appropriate therapeutic services and behavioral health placements (BHCC)

WHAT SERVICES ARE COVERED UNDER THE CHILD WELFARE SPECIALTY PLAN?

- Advanced registered nurse practitioner services
- Ambulatory surgical treatment center services
- Chiropractic services
- Dental services
- Early periodic screening & treatment services
- Emergency services
- Family planning services
- Healthy Start services
- Hearing services
- Home health services
- Hospice services
- Hospital inpatient services
- Hospital outpatient services
- Laboratory & imaging services
- Medical equipment & prostheses
- Mental health services
- Nursing care
- Optical services
- Optometrist services
- Physical, occupational, respiratory and speech therapies
- Podiatrist services
- Physician services, including physician assistant services
- Prescription drugs
- Renal analysis services
- Respiratory equipment & supplies
- Substance abuse treatment
- Transportation to covered services

WHICH SERVICES REQUIRE PRIOR AUTHORIZATION?

Sunshine Health requires prior authorization for specific services, which must be requested and approved prior to services being rendered:

Medical services that require provider prior authorization:

- All out-of-network non-emergency services
- Private duty nursing
- Non-emergency inpatient admissions, including SIPP
- Selected outpatient behavioral health services
- Physical therapy, occupational therapy, speech therapy
- Some outpatient procedures, such as ambulatory surgery
- High-tech imaging (MRI, CAT scan)
- High-cost durable medical equipment (motorized wheelchair, etc.)
- Some medications (Following AHCA's Preferred Drug List)

Behavioral Health services that require provider prior authorization:

- SIPP/Inpatient hospitalization & CSU (concurrent review only)
- Specialized Therapeutic Foster Care/Therapeutic Group Care
- Comprehensive Behavioral Health Assessment (over 15 hours)
- Behavioral Health Overlay Services
- Targeted Case Management
- Behavioral Health Day Services
- Therapeutic Behavioral On-Site Services
- Psychological Rehabilitative Services
- Psychological Testing

HEALTHCARE BENEFIT REMINDER

A variety of enhanced benefits are available to children enrolled in the Florida Medicaid Child Welfare Specialty Plan through our partners at Sunshine Health.

- Save on over-the-counter & mail order products: A monthly \$25 per enrollee benefit is available to purchase health related items such as vitamins, aspirin and first aid supplies.
- CentAccount Healthy Rewards Program: Earn reward dollars when you complete certain preventative health activities, such as such as yearly checkups and dental visits.
- Tele-health through NurseWise: Access this 24/7/365 nurse advice line for quick answers to your health care questions in English or Spanish. (Other languages by request.) Call: 855.463.4100; TDD/TTY line: 800.955.8770.

PLUS ... Sunshine Health also provides Care Grants to cover items and services that promote CWSP member health, safety and well-being – up to a total of \$150/year for expenses not covered by Medicaid or other sources.

For more information or help in getting started with any of these benefits, contact:

In Orange County: Sabrina.Beharie@embracefamilies.org; Valencia.Jordan@embracefamilies.org;

Amy.Moncion@embracefamilies.org; Wendy.Moore@embracefamilies.org

In Osceola County: Gayle.Hicks@embracefamilies.org; Amber.Smith@embracefamilies.org

In Seminole County: Gayle.Hicks@embracefamilies.org; Amanda.Reineck@embracefamilies.org

KEY CONTACTS

We recommend that you make several copies to have on hand for each child that comes to your home. Keep this information in a handy place for you to easily access.

Your Child Placing/Licensing Agency: (circle one)

CHS Devereux OHU Florida Baptist CHN

_____	_____	_____
Licensing Specialist Name	Office #	Cell #
_____	_____	_____
Licensing Supervisor Name	Office #	Cell #
_____	_____	_____
CPA Program Director	Office #	Cell #

Child's Case Management Agency: (circle one)

CHS Devereux OHU Gulf Coast

Child's Name: _____

_____	_____	_____
Child's Case Manager Name	Office #	Cell #
_____	_____	_____
Case Mgmt. Supervisor's Name	Office #	Cell #
_____	_____	_____
Case Mgmt. Program Director Name	Office#	Cell #

ACRONYMS

4C	Community Coordinated Care for Children
ADD/ADHD	Attention Deficit/Hyperactivity Disorder
APPLA	Another Planned Permanent Living Arrangement
ARC	Adoption Review Committee
ASFA	Adoption and Safe Family Act
CBC	Community Based Care
CBCIH	Community Based Care Integrated Health
CBHA	Comprehensive Behavioral Health Assessment
CHN	Children’s Home Network
CHS	Children’s Home Society
CMA	Case Management Agency
CM	Case Manager
CMS	Children’s Medical Services
CPA	Child Placing Agency or Child Placement Agreement
CPI	Child Protective Investigator
CPS	Child Protective Services
CPT	Child Protection Team
CRC	Case Review Committee
CLS	Children’s Legal Services
CATT	Child to Adult Transition Team
CWSP	Child Welfare Specialty Plan (Sunshine Health)
CX/CXN	Child or Children
DCF	Department of Children and Families
DCM	Dependency Case Manager
DD	Developmental Disabilities
Dev	Devereux
DJJ	Department of Juvenile Justice
DOB	Date of Birth
EF	Embrace Families
EPSDT	Early Periodic Screening Diagnosis and Treatment (child well-being exam)
ER	Emergency Room
EFC	Extended Foster Care
FAS	Fetal Alcohol Syndrome
FAHIS	Florida Abuse Hotline Information System
FAST	Foster Allegations Support Team
FDLE	Florida Department of Law Enforcement
FP	Foster Parent
FSFAPA	Florida State Foster and Adoptive Parent Association
FST	Family Services Team Staffing
FX	Father
GAL	Guardian Ad Litem

GCJFC	Gulf Coast Jewish Family & Community Services
GFX	Grandfather
GMX	Grandmother
ICPC	Interstate Compact for the Placement of Children
IEP	Individual Education Plan
IHS	In-Home Services
ILP	Independent Living Program (aka Youth Services Program)
I&E	Information and Eligibility
IRC	Initial Review Committee
JAC	Juvenile Assessment Center
JDC	Juvenile Detention Center
JR	Judicial Review
LE	Law Enforcement
LOC	Level of Care Staffing
MAPP	Model Approach to Partnership in Parenting
MDT	Multi Disciplinary Team
MJV	My Jump Vault
MX	Mother
OHC	Out of Home Care
OHU	One Hope United
OTI	Out of Town Inquiry
PESS	Post Educational Support Services
PI	Protective Investigator (same as CPI)
PRIDE	Parents' Resource for Information Development Education
PSS	Placement Support Staffing
PTSD	Post Traumatic Stress Disorder
QPI	Quality Parenting Initiative
RTC	Residential Treatment Center
SCSO	Seminole County Sheriff's Office
SDMM	Safety Decision Methodology Model
SED	Severely Emotionally Disturbed
SIDS	Sudden Infant Death Syndrome
SLD	Special Learning Disability
SSA	Social Security Administration
SSN	Social Security Number
STFC	Specialized Therapeutic Foster Care
STGH	Specialized Therapeutic Group Home
TCM	Targeted Case Management
TFH	Therapeutic Foster Home
TIC	Trauma Informed Care
TPR	Termination of Parental Rights
WIC	Women, Infants, & Children (Supplemental Food Program)

TYPES OF LICENSED FOSTER HOMES

Type of Home	Description	Requirements
Traditional Foster Care homes	Serve children ages 0 -17. Have a licensed capacity up to 5 children. Enhanced and Clinical services can be provided if necessary and approved based on the needs of the child.	<p>Foster Parents receive 21 hours of pre-service training prior to licensure</p> <p>Post licensure In-Service Training Year 1 of Being Licensed</p> <p>The following four classes must be completed within the first 120 days of being licensed. If a family has scheduling challenges they can take one of the four classes online. At least three of the classes must be taken in person. To receive the link to the online training email Anna Brown: Anna.Brown@embracefamilies.org</p> <ul style="list-style-type: none"> ■ Becoming a Member of a Professional Team ■ Caring For Teens in Foster Care ■ Effects of Multiple Placements ■ Every Child Needs a Transition Plan
Specialized (STFC Level I) Foster Care homes	Serve children with serious emotional disturbance, including a mental, emotional or behavioral disorder as diagnosed by a psychiatrist or other licensed practitioner. Home visits are conducted at least once a week for Level I children.	30 hours of additional pre-service training following the 21 hours of initial PRIDE pre-service training and additional 8 hours of post licensing in-service training every six months required to become a traditional licensed home; plus a Foster Parent must be available 24 hours a day to respond to crises or to the needs for special therapeutic interventions. This may require one of the Foster Parents to not work outside the home.
Specialized (STFC Level II) Foster Care homes	Serve children who meet the criteria for Level I and are diagnosed by a psychiatrist or other licensed health care practitioner as having a serious mental, emotional, or behavioral disorder and who exhibits more severe maladaptive behaviors. Home visits are conducted at least twice a week for Level II children.	Same as above for STFC Level I; with 12 hours of post-licensing in-service training every six months.
Children’s Medical Service (CMS) Foster Care homes	Provides medically-complex children under the age of 21 the opportunity to live and receive care in foster homes rather than in hospitals or other institutional settings.	Agency for Health Care Administration’s (AHCA) Children’s Medical Services (CMS) helps administer training and support for the Medical Foster Care program. 30 hours of additional pre-service training following the initial 21 hours of PRIDE pre-service training plus the additional 12 hours post licensing training required to become licensed. This can occur after being licensed as a traditional home or in conjunction with initial licensure process. A recommendation from the CPA is required for a traditional home to be considered as a medical home, in addition to the need for more medical homes.
Developmental Services (Family Care) Foster Care homes	Provides children who are diagnosed with an Intellectual/Developmental Disability an opportunity to reside in a family environment. Parents are supervised and monitored weekly by a Certified Associate Behavior Analyst and/or Behavior Specialist.	Family Care Parents are licensed Foster Parents who receive intensive training in Behavior Analysis, Medication Administration, Crisis Prevention and Intervention, CPR/First Aid, Zero Tolerance, AIDS/HIV, Choice Theory and Personal Outcome Training, and Age Specific Training.

THANK YOU FOSTER FAMILIES ***YOU ARE CHANGING LIVES.***

"A MAN NEVER STANDS AS TALL
AS WHEN HE KNEELS TO HELP A CHILD."

Knights of Pythagoras

"YOU WERE BORN
WITH THE ABILITY
TO CHANGE SOMEONE'S LIFE.
DON'T EVER WASTE IT."

Anonymous

"IT'S EASY TO SAY 'IT'S NOT MY CHILD,
NOT MY COMMUNITY, NOT MY PROBLEM'.
THEN THERE ARE THOSE WHO SEE THE NEED
AND RESPOND. I CONSIDER THOSE
PEOPLE MY HEROES."

Fred Rogers

"IT IS EASIER TO BUILD
STRONG CHILDREN THAN TO
REPAIR BROKEN MEN."

Frederick Douglas

"YOU MUST BE THE CHANGE
YOU WISH TO SEE IN THE WORLD."

Mahatma Gandhi

"EVERY CHILD DESERVES A CHAMPION --
AN ADULT WHO WILL NEVER GIVE UP ON THEM,
WHO UNDERSTANDS THE POWER OF CONNECTION
AND INSISTS THAT THEY BECOME
THE BEST THEY CAN POSSIBLY BE."

Rita F. Pierson



Administrative Support Center
4001 Pelee Street - Orlando, FL 32817
321.441.2060

Orange County West Service Center
5749 Westgate Drive, Ste. 200 - Orlando, FL 32835
321.441.1567

Orange County East Service Center
1900 Alafaya Trail, Ste. 900 - Orlando, FL 32826
321.207.8200

Osceola County Service Center
111 E. Monument Ave, Ste. 501 - Kissimmee, FL 34741
321.442.8487

Seminole County Service Center
2921 South Orlando Ave, Ste. 150 - Sanford, FL 32773
407.688.9650



IN PARTNERSHIP WITH

