Foster Home Services is a program designed to meet the needs of children who are temporarily separated from their birth families. In North Carolina, the goal is for children to be returned to their families or placed in another permanent home within one year or less. It is the responsibility, as well as the Agency’s expectation that the foster and adoptive parents work in a partnership with agency staff, child advocates, and mental health professionals.

This service requires that foster parents be able to provide a safe, nurturing, stable home environment. It requires understanding that behaviors are an expression of a child’s emotions and a symptom of his/her needs.

Foster parents are required to attend GPS-MAPP (Group Preparation and Selection/Model Approach to Partnership in Parenting) training. In this training you will receive handouts and learn about the North Carolina Minimum Licensing Standards, which requires CPR, First Aid, Universal Precautions and Medication Administration training.

The DSS staff strives to ensure that foster and adoptive parents receive services and support while serving the children of Moore County. In addition to this handbook, the social work staff will be available for clarification on subject matter addressed / not addressed in the manual.
Why Be a Foster Parent?

By Dr. Karen Sullivan

It’s the kind of question that I answer with ease and sometimes even eloquence when asked by others, despite internal doubts. Usually I find simple answers suit others’ curiosity the best. Here are my favorites:

- **It matters**—Every day you are making a real and often profound difference in the life of a child.
- **If not me, then who?**—I don’t see any legions of more competent parents out there begging to do this work. If there was a surplus of great foster homes, I might stop this craziness; but as we know there are not. Which leads to the next response...
- **I’m needed**—Although the child welfare agency does not send me flowers when I renew my license, I do hear about the days when placement workers go half mad trying to place even moderately difficult kids and I want to help out.
- **Children are so vulnerable**—I can do a good job advocating, protecting, nurturing and guiding.
- **It’s challenging**—Like getting a new job or gearing up for the big game, there is a bit of a rush of excitement about getting a new kid, wondering with a half smile what you’ve gotten yourself into. It’s rewarding to do a good job parenting kids who are usually not so bad as your worst nightmares.
- **Why not?**—This is my personal favorite and it’s not so flip as it sounds. I actually believe that the most important work that we can do with our lives is to assist others. In the end, I think we should be judged by ourselves and by others, if not by some higher power, according to how much we did for those in need, whether family, friends or other people’s children.

*Excerpt of article from National Advocate, Winter 1995*
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ADOPTIVE PARENT: A person with the legal relation of parent to a child not related by birth, with the same mutual rights and obligations that exist between children and their birth parents. The legal relationship has been finalized.

AGENCY: A county department of social services or a private child placing agency that is duly authorized by law to receive children for purposes of placement in family foster homes or adoptive homes.

ASFA: ASFA stands for the Adoption and Safe Families Act of 1997. The goal of this law is to strengthen the child welfare system’s response to children’s safety, need for permanency, and well being. The law reaffirms the need to build linkages between the child welfare system and the courts and other family support systems in order to ensure safety and timely permanency for children.

ASSESSMENT: A process by which the CPS agency determines whether the child and/or other persons involved in the report of alleged maltreatment is in need of services.

BIOLOGICAL PARENT: The birth mother or father of the child rather than the adoptive or foster parent or the stepparent.

CHILD: A person less than 18 years of age or considered to be a minor under State law.

CHILD PROTECTIVE SERVICES: Activities provided or arranged by the child protective services agency, social services agency, and/or the child welfare agency for the child/family as a result of needs discovered during the course of the investigation. Includes such services as Family Preservation, Family Support, and foster care provided as a result of the report of alleged child maltreatment, or offered prior to the report and continued after the disposition of the investigation. Child protective services are delivered within the first 90 days after the disposition of the report.

COURT-APPOINTED REPRESENTATIVE: A person appointed by the court to represent a child in a neglect or abuse proceeding. May be an attorney or a court-appointed special advocate (or both) and is often referred to as a guardian ad litem. The representative makes recommendations to the court concerning the best interests of the child.

COURT ACTION: Legal action initiated by a representative of the CPS agency on behalf of the child. This includes authorization to place the child, filing for temporary custody, dependency, or termination of parental rights. It does not include criminal proceedings against a perpetrator.

FAMILY FOSTER HOME: A place of residence of a family, person or persons licensed to provide full time foster care services to children under the supervision of a county department of social services or a licensed private child placing agency, and which meets the regulations regarding family foster home capacity set forth in Rule .0602.

FOSTER CARE: Twenty-four-hour substitute care for children placed away from their parents or guardians and for whom the State Agency has placement and care responsibility. This includes family foster homes, foster homes of relatives, group homes, emergency shelters, residential facilities, child care institutions, and pre-adoptive homes regardless of whether the facility is licensed and whether payments are made by the State or local agency for the care of the child, or whether there is Federal matching of any payments made. Foster care may be provided by those related or not related to the child. All children in care for more than 24 hours are counted.
Glossary of Terms

FOSTER PARENT: An individual licensed to provide a home for orphaned, abused, neglected, delinquent, or disabled children, usually with the approval of the government or a social service agency. May be a relative or a nonrelative.

INVESTIGATION: The gathering and assessment of objective information to determine if a child has been or is at risk of being maltreated. Generally includes face-to-face contact with the victim and results in a disposition as to whether the alleged report is substantiated or not.

JUVENILE COURT PETITION: A legal document filed with the court of original jurisdiction overseeing matters affecting children. The petition typically requests that the court take action regarding the child's status as a result of an investigation. Usually, a petition requests that the child be declared a dependent or delinquent child, or that the child be placed in an out-of-home setting.

LEGAL GUARDIAN: Adult person who has been given legal custody and guardianship of a minor.

MALTREATMENT: An act or failure to act by a parent, caregiver, or other person as defined under State law which results in physical abuse, neglect, medical neglect, sexual abuse, emotional abuse, or an act or failure to act which presents an imminent risk of serious harm to a child.

MEDICAL NEGLECT: A type of maltreatment caused by failure by the caregiver to provide for the appropriate health care of the child although financially able to do so, or offered financial or other means to do so.

PHYSICAL ABUSE: Type of maltreatment that refers to physical acts that caused or could have caused physical injury to the child.

PSYCHOLOGICAL OR EMOTIONAL MALTREATMENT: Type of maltreatment that refers to acts or omissions, other than physical abuse or sexual abuse, that caused, or could have caused, conduct, cognitive, affective, or other mental disorders. Includes emotional neglect, psychological abuse, mental injury. Frequently occurs as verbal abuse or excessive demands on a child’s performance.

RESIDENTIAL FACILITY STAFF: Employees of a public or private group residential facility, including emergency shelters, group homes, and institutions.

SEXUAL ABUSE: A type of maltreatment that refers to the involvement of the child in sexual activity to provide sexual gratification or financial benefit to the perpetrator, including contacts for sexual purposes, molestation, statutory rape, prostitution, pornography, exposure, incest, or other sexually exploitative activities.

SUBSTANTIATED: A type of investigation disposition that concludes that the allegation of maltreatment or risk of maltreatment was supported or founded by State law or State policy. This is the highest level of finding by a State Agency.

THERAPEUTIC FOSTER HOME: A family foster home where in addition to the provision of foster care services, the foster parent has received appropriate training in providing care to children with behavioral mental health or substance abuse problems under the supervision of a county department of social services, area mental health authority or child placing agency.

UNSUBSTANTIATED: A type of investigation disposition that determines that there is not sufficient evidence under State law to conclude or suspect that the child has been maltreated or is at risk of being maltreated.
How The System Works

Family and Children’s Services social workers from Social Services (Agency) primarily work toward two goals—protecting children and helping families to achieve permanency for their children. The Agency provides services that assist in providing safe homes for children.

Families involved with the Agency are assigned a team of workers, including a social worker who helps in providing support and referrals that assist with family needs. Social workers will contact caregivers regularly to discuss the health, daycare and well-being of the child in their care. Social workers help in arranging visits with siblings, parents and other family members.

Social Services helps to facilitate relationships between a child, parent and other individuals or organization involved in the care of the child. If caregivers have questions about services or resources for the child in their care, they should call their social worker.

► How Juvenile Court Works

Moore County Social Services and the juvenile courts are partners in serving the best interest of children who are in the custody or placement responsibility of the Agency. They focus on the need of the children—not the guilt or innocence of the parents.

When Social Services decides children are not safe in their parents' home, the Agency will petition the court for custody of children. The Agency’s petition will list children as abused, neglected or dependent. If the petition is granted and a non-secure order is issued, parents have the right to their own attorney. When a petition for neglect or abuse is filed in the court for a child, a Guardian ad Litem advocate who is a trained community volunteer, along with a Guardian ad Litem attorney, is appointed by a district court judge. Their role is mandated by North Carolina General Statute 7B-601.

A GAL may be appointed when children are declared dependent. The GAL does NOT work for Social Services. The GAL’s role is to focus on children's rights and needs. GALs have access to most records concerning children, including Social Services, school, hospital and psychological records.

Non-secure custody can be granted to Social Services after a petition is filed if the court believes that the children are in immediate danger. If non-secure custody is granted, children will be placed in foster care or with a relative.

When a non-secure petition is filed, state law requires that a hearing be held within seven business days. At this hearing the judge will decide whether or not the children should be returned home or remain in Agency custody.

If children remain in Agency custody, court reviews will be held at 60-, 90- and 120-day intervals.
Court hearings/Reviews - A number of court hearings occur during the life of a case. The first hearing is held within seven days after a judge approves a non-secure custody order. This order is issued when a child is in immediate danger and needs to be removed from the home for protection. At the Seven-Day Hearing a judge decides whether a child returns home or remains in Agency custody.

- The next hearing is the Adjudicatory Hearing, where the judge hears from the birth parent, Agency and Guardian Ad Litem (GAL) and then determines if the children have been abused or neglected.

- A Dispositional Hearing also takes place either at the time of the adjudicatory hearing or at another date. At the dispositional hearing the judge decides what is going to happen to a family in terms of the decision that was made at the adjudication. The parents are ordered to follow the Case Plan and the Agency is ordered to assure that appropriate reviews are provided.

- Review Hearings are held every three to six months of a case. At these hearings, the judge asks parents to explain the progress they have made towards reunification with their children.

- The Permanency Planning Hearing is held within the first 12 months of a case. The hearing goal is to develop and achieve a safe, permanent home for children within a reasonable period of time.

- Child and Family Team meetings (CFT) - These meetings are held with birth parents, children, Agency staff members, foster parents, caregivers and representatives from other agencies who work with the family. The goal of the meeting is often to prevent children from being removed from the birth parents' home. In cases where children are already removed, the goal is to prevent or remove any obstacles that keep families from being reunited.

<table>
<thead>
<tr>
<th>Cumulative Days</th>
<th>Explanation</th>
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<tbody>
<tr>
<td>0 days</td>
<td>Petition/Nonsecure</td>
</tr>
<tr>
<td>7 days</td>
<td>7-day Hearing</td>
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<tr>
<td>14 days</td>
<td>Second 7-day Hearing</td>
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<tr>
<td>60 days</td>
<td>Adjudication/Disposition</td>
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<tr>
<td>150 days</td>
<td>1st Review Hearing</td>
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<tr>
<td>240 days</td>
<td>Review Hearing</td>
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<tr>
<td>330 days</td>
<td>Review Hearing</td>
</tr>
<tr>
<td>365 days</td>
<td>Permanency Planning Hearing</td>
</tr>
<tr>
<td>Every 6 months</td>
<td>Permanency Planning Review or Post TPR Review (if TPR granted)</td>
</tr>
</tbody>
</table>

If Permanency Plan is adoption, the Termination of Parental Rights (TPR) petition must be filed within 60 days of the Permanency Planning Hearing unless the court rules otherwise.
Foster Care social workers coordinate services for children and families, including, but not limited to the above.
The Medical examinations are required of the foster parent at the initial licensing. Cost for a routine physical exam is the responsibility of the foster parent applicant.

**Environmental Conditions Checklist**

The foster home licensure social worker will perform an environmental conditions checklist.

- The home and yard shall be maintained and repaired so that they are not hazardous to the children in care.
- The house shall be kept free of uncontrolled rodents and insects.
- Windows and doors used for ventilations shall be screened.
- The kitchen shall be equipped with an operable stove and refrigerator, running water and eating, cooking and drinking utensils to accommodate the household members. The utensils shall be cleaned and stored after each use.
- Household equipment and furniture shall be in good repair.
- Flammable and poisonous substances, medications and cleaning materials shall be stored out of the reach of children placed for foster care.
- Explosive materials, ammunition and firearms shall be stored separately in locked places.
- Documentation that household pets have been vaccinated for rabies shall be maintained by the foster parents.
- Comfort Zone: Each home shall have heating, air cooling or ventilating capability to maintain a comfort range between 65 and 85 degrees F.
- The exterior spaces around the home, including any yard spaces shall be clear of any dangerous objects or hazardous items including access to water, such as swimming pools, beaches, rivers, lakes or streams. Access to such hazards shall be avoided by either a fence at least 48” high with a locked gate around the hazard or by a fence at least 48” high with a locked gate around the yard and exterior space of the home while still providing play space for the child. Access to water in above ground swimming pools shall be prevented by locking and securing the ladder in an inaccessible place.
- Rooms including toilets, baths and kitchens in family foster homes licensed for the first time after July 18, 2002, without operable windows must have mechanical ventilation to the outside.
Living, Kitchen and Dining Areas

Each home shall have a family room and a dining area to meet the needs of the family including children placed in foster care. The kitchen shall be large enough for the preparation of food and cleaning of dishes.

Bedrooms

Bedrooms shall be clearly identified on a floor plan as bedrooms and shall not serve dual functions.

Children shall not be permitted to sleep in an unfinished basement or an unfinished attic.

Sleeping arrangements:

1. Each child shall have his own bed
2. Each bed shall be provided with a comfortable mattress, proper support, two sheets, a blanket and a bedspread, and be of a size to accommodate the child.
3. No day bed, convertible sofa or other bedding of a temporary nature shall be used except for temporary care of up to two weeks.
4. Sleeping rooms shall not be shared by children of opposite sex except children age five and under may share a room.
5. Sleeping arrangements shall be such that space is provided within the bedroom for the bed, the child's personal possessions and for a reasonable degree of privacy.
6. When children share a bedroom, a child under six shall not share a room with a child over 12, except when siblings are being placed together. No more than four children shall share a room.

Storage

Separate and accessible drawer space for personal belongings and sufficient closet space for indoor and outdoor clothing shall be available for each child.

Bathrooms

The home shall have indoor, operable, sanitary toilet and hand washing and bathing facilities. Homes shall be designed in a manner that will provide children privacy while bathing, dressing and using toilet facilities.
Fire and Life Safety Areas of Concern

Fire Extinguishers

The Foster Home rules require that a working, mounted, fire extinguisher(s) rated 2-A:15 ABC or larger (This should be in the vicinity of the kitchen, but not directly at the stove.) or CO2 Type fire extinguisher is readily available and another ABC type or CO2 type is centrally located. This information is printed on a label on the side of the extinguisher or on the box.

All extinguishers must be checked by a fire extinguisher company and be properly tagged annually.

Extension Cords

The Foster Home rules require that extension cords be factory listed. They must not be used as a substitute for permanent wiring. The Fire Marshal will not accept any cord that has been altered, spliced or repaired by individuals. These cords should not run through doorways, under rugs or flooring, through holes in walls, or span across nails or ceilings. These cords should not be used on large appliances. When multiple plugs are needed, approved power bars with breaker switches or resets should be used instead of drop cords or octopus plugs.

Evacuation Plans

Evacuation plans should be clearly drawn and discussed with all foster family members in the home, including children in foster care.

Telephones

The Foster Home rules requires a working telephone in the home. Recommendation: This phone should be in a central location, not a bedroom.

Smoke Detectors

- Batteries in smoke detectors should be changed twice a year.
- Detectors should be cleaned or vacuumed on a regular basis. Dust causes malfunctions.
- Be sure batteries “snap in place” when installed.

Locks

Single key deadbolts with a switch device on the inside to unlock the deadbolt are permissible.

Recommendation: Do not use the slide chain or slide dead bolt locks due to difficulty in reaching and unlocking these latches quickly. The N.C. Fire Code does not permit these on public buildings.

Doors and Windows

Doors and windows in rooms used for sleeping must open properly with little effort. (Hook latches or separate locking devices will not be approved.)

No obstacles, including furnishings shall obstruct ability to access flight through the window.

Hallways, Doorways, Ramps, Entrances, Corridors

All hallways, doorways, entrances, ramps, steps and corridors shall be kept clear and unobstructed at all times. Clean out and reduce papers, old magazines, toys and clothes. All of these can be highly combustible.
Other Areas of Concern

- Occupants cannot smoke in the home or in the car if a child is present. Cautions must still be taken regarding matches and lighters. They must sign a smoking policy stating their agreement. Matches and lighters should be stored out of the reach of children. Cigarettes and lighters should not be left out in plain view.

- Fuel containers (especially for gasoline) and fueled equipment, such as mowers and weed eaters, should be stored in outside storage areas whenever possible. Connected garages and basements should be used only as a last resort. All fuels should be stored in approved containers, preferably metal safety cans with vented pour valves. All fuels should be stored in areas away from furnaces, washing machines, hot water heaters, and similar electrical or mechanical equipment.

- Electrical cords or phone cords running across the path of travel on the floor are fall hazards and could slow or prevent a person from escaping quickly in an emergency.

**Firearms**

If you keep firearms in your home, you must keep them and ammunition in separate locked cabinets, closets or metal boxes, placing the keys in a secure place away from children. Firearms must be stored unloaded.

**Religion**

Opportunity for a child’s spiritual development is encouraged. Many foster children have had little exposure to church or religious teaching. If the foster child, however, does indicate a strong preference for a particular denomination, the foster parent should make arrangements for the child to attend a church of that faith (not necessarily a particular church).

**Pets**

Dogs and cats four months old and older must be immunized for rabies. The first rabies shot is good for one year and then rabies immunizations are required every three years thereafter.

Any pet that has had a lapse in rabies vaccination will have to start over with a 1-year Rabies Vaccine. This is to provide the best protection for our furry and human friends.

Example: John Smith with Fido comes in for a rabies shot. Fido had a 3-year rabies vaccine on 12/01/99. He was due for another 3-year rabies vaccine on 12/01/02. He is currently past due. He will have to start over with a 1-year rabies vaccine.

A description of your pet’s attitude toward family and strangers is assessed as well as the pet’s ability to adjust to new family members such as foster children. You may be asked to take your pet through a training to ensure the safety of any child in your home.
Supervision of Foster Homes

Moore County Social Services requires its foster home licensure workers to see foster families with foster children in their home on a monthly basis. At least half of these visits should be in the foster home. If there is no child placed in the foster home, a minimum of quarterly visits shall be made by the licensing social worker. At least half of the quarterly visits shall be made in the foster parent’s home.

Consultation is available as needed for support and problem solving. Occasionally the foster parent may need more support visits and they can be increased to daily or weekly. Licensing social workers will continuously monitor your home for compliance with the State Standards and Procedures for Licensure.

Foster Parents are expected to work in partnership with all agency staff. You must immediately notify your licensing worker of any changes of persons living in your household or changes in employment, address or telephone number.

Foster parents are responsible for completing relicensure requirements within 60-days of receiving their relicensure packets and adhering to the Agency/Foster Parent Agreement.

Your relicensure packet is sent about four and a half months before your license expires. The agency needs to return the full packet to the State Licensing Authority 60 days before expiration of your license.

On-going Training

As a condition of re-licensure, foster parents shall receive at least ten hours of training annually that is relevant to special developmental, emotional and behavior needs of the children for whom they are providing care.

Four requirements for new foster parents are:
1. CPR
2. First Aid
3. Universal Precautions
4. Medication Administration
(See Appendix for MAR)

Several training options will be available to you. These will usually be offered in the evening. We may suggest that you repeat certain sessions of MAPP training. Shared Parenting classes are required in your first year of licensure. Both parents must complete the required ten hours.

In addition to classroom training, you may watch approved videos, read approved books, and so forth. There is also training available on line--foster parent training.com is one resource that offers training on individual issues and behaviors.
Criminal Record Checks

**North Carolina law requires that a Criminal History Check be conducted on all persons who provide foster care in a licensed family foster home.**

“Criminal history” includes any county, state, and federal convictions or pending indictments of any crime, of any of the following crimes:

- the following Articles of Chapter 14 of the General Statutes: Article 6, Homicide; Article 7A, Rape and Kindred Offenses; Article 8, Assaults; Article 10, Kidnapping and Abduction; Article 13, Malicious Injury or Damage by Use of Explosive or Incendiary Device or Material; Article 26, Offenses Against Public Morality and Decency; Article 27, Prostitution; Article 39, Protection of Minors; Article 40, Protection of Family; and Article 59, Public Intoxication;

- violation of the North Carolina Controlled Substances Act;

- Article 5 of Chapter 90 of the General Statutes; and

- alcohol-related offenses such as sale to underage persons in violation of G.S. 18B-302 or driving while impaired in violation of G.S. 20-138.1 through G.S. 20-138.5; or similar crimes under federal law or under the laws of other states.

Your fingerprints will be used to check the criminal history records of the State Bureau of Investigation (SBI) and the Federal Bureau of Investigation (FBI).

If it is determined, based on your criminal history, that you are unfit to have responsibility for the safety and well-being of children, you shall have the opportunity to complete, or challenge the accuracy of, the information contained in the SBI or FBI identification records.

If you are denied licensure of your foster home or your license is revoked by the Department of Human Resources as a result of the criminal history check, you may request a hearing pursuant to Article 3 of Chapter 150B of the General Statutes, the Administrative Procedure Act.

An applicant is not eligible for licensure if they have been placed on the Responsible Individual List, as defined by NC 7B-311, with in 5 years of substantiation of abuse or serious neglect.

Any foster parent who intentionally falsifies any information required to be furnished to conduct the criminal history is guilty of a Class 2 misdemeanor.

**Child Restraint System Law - these may be changing in the near future.**

- Children up to age 1 must be in a rear facing seat. The American Academy of Pediatrics recommends children staying in a rear facing seat or forward facing seat until at least age 2. Most convertible seats can be used rear-facing up to 40 pounds.

**North Carolina law states** that all children must be properly restrained in an appropriate child restraint (booster seat) until age 8 or 80 pounds, whichever comes first and at least 4’9” tall.

Children 8-15 years and children 40-80 pounds must ride in the backseat in restraints and children 4 years and younger or less than 40 pounds must never be seated in front of an air bag.

**NOTE:** In NC, it is the law for everyone, regardless of age, to use seat belts.
**Confidentiality**

Foster parents shall in no way violate within the community the confidential nature of the child’s situation or the circumstances of his/her birth parents. Also refer to Agency Foster Parents Agreement that you sign stating you agree to keep matters confidential and to discuss them only with the appropriate agency staff members, or other professionals designated by the agency.

Foster parents who wrongfully release information can lose their foster care license. We do not discuss names of the children or their families or reasons why they are in foster care unless it is appropriate.

**When is it appropriate to share confidential information?**

Before you reveal any type of personal or confidential information about a foster child or family, you should ask yourself three questions:

1. Does the other person need to know this information?
2. Is it in the best interest of the foster child for the other person to have this information?
3. Does the law permit the other person to have this information, or is there a special professional relationship that obliges that person to preserve the confidentiality of the information?

If the answer to each of these questions is “yes” you are probably safe in disclosing the information. If the answer is “no” you probably shouldn’t. Follow these three standards:

- **The “Need to Know” Standard**—You should never reveal information just to satisfy someone’s curiosity. Share only enough information to serve your purpose.

- **The “Best Interests” Standard**—To decide whether it’s in the best interest of the foster child for the other person to have the confidential information, you need to weigh the child’s and the family’s privacy interests against other interests, such as the safety and therapy needs of the child and others.

- **The “Legal Privilege” Standard**—Generally speaking, you should not reveal confidential information unless a statute specifically authorizes the other person to obtain the information, or unless the other person has a professional relationship that creates a special legal obligation to preserve the confidentiality of that information. The following professionals have a special legal obligation to preserve confidentiality about your foster child: other foster/adoptive/kinship parents in your support group, physicians who are providing medical care for the foster child, and social workers and mental health therapists who are providing services for your foster child.

**Damages to Personal Property**

The Department of Social Services is not responsible for damages that a foster child does to a foster parent’s personal property.

Situations in which foster children have intentionally damaged foster parent’s property have been rare; however, foster parents should make reasonable efforts to protect personal belongings and property.

It is a good idea to check with your homeowners insurance company to inquire about policy coverage and notify them that you plan to have foster children placed in your home.
NONDISCRIMINATION STATEMENT

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at How to File a Program Discrimination Complaint and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.
Placement

Placement of Children

Placement for a child will be based on the needs and attachments of the child and on the strengths and needs of the prospective foster family. The agency will arrange for and maintain a single, stable living arrangement for each child. A child will be moved only when it is in his/her best interest and there are clear indicators to support the necessity of the move.

A medical exam is required to be scheduled within seven days of a child’s initial placement into foster care. The child’s foster care worker will insure the exam is done and the physician completes a required medical form. Dental, developmental, psychological, and educational assessments shall be scheduled within 30 days from the identification of need.

The agency requires that within seven days of placement, the child’s social worker is to provide you with:

- a child information sheet, which includes information about the child and his/her family;
- Health Status form with as much information as is known; and
- a Child Education Status form if the child is school age.

Within two weeks of placement, a Life Book or personal scrapbook is to be initiated by the social worker and kept up-to-date by the foster parents as long as the child is in your home.

The child’s social worker shall have face-to-face contact with the foster parents at least once within the first week of placement and at least monthly thereafter. There is to be continuous contact and exchange of information between the social worker and the foster parents about matters that affect a child’s adjustment. The foster parents are to be notified of agency Permanency Planning Review meetings and Treatment meetings. The agency staff must authorize in advance any visits or communications between foster children and their birth parents, other birth relatives, or potential adoptive parents.

Request to Move a Child

In signing the Agency Foster Parents Agreement, the foster family agrees to give a child a fair chance to adjust to their home and, in the event that we, as a team, feel that such an adjustment is not working, the foster parents agree to give the agency fair notice (two weeks if possible) before asking for removal of the child.

- Attempt to resolve the problems prior to the request to move the child.
- Notify the licensing social worker or supervisor and give 10 working days notice.
- Update the child’s out-of-home record.
- Send personal belongings with the child.
- Contact with the new foster family/placement resource is encouraged.
Emergencies

In the event of an emergency involving your foster child (such as running away, disruptive and uncontrollable behavior, injury, or other medical emergencies) you should contact the child’s social worker, supervisor, or the on-call social worker as soon as possible.

The on-call social worker may be contacted after normal business hours, on weekends and on holidays by calling the Moore County Communications Center at 910-947-2911 and asking for the “social worker on-call.”

Do not use 9-1-1 to contact the on call worker. “9-1-1” should be used only for emergencies requiring the assistance of fire, rescue squad, law enforcement or medical personnel.

Social Worker On-Call
Moore County Communications Center
910-947-2911

Poison Control Center
1-800-672-1697

Successful Visitations

Foster parents have a vital role in making visits between birth parents and their children successful. Successful visitations are steps toward family reunification. Social workers, birth parents, children and caregivers must all work together as a team to facilitate these visits. Foster parents should provide support to the children before and after visits. They can say encouraging words to and about birth parents.

Foster parents will find that frequent visits help to maintain the bond between parent and child. Visitation between birth parents and children decreases negative feelings and behaviors that the children may be displaying. Overall, visitation increases the likeliness that a family will be reunited. A few of the keys to successful visitations are communication and providing and accepting support.

Adapted from Children’s Services Practice Notes: For North Carolina’s Child Welfare Social Workers, Volume 5, No. 4, August and October 2000.
Placement

► Communication

- Offer encouragement and support to the children
- Allow children to express feelings such as anxiety, fear and anger before and after visits
- Be supportive and encourage open communication of feelings; discuss negative feelings, and let children know it is normal to have those feelings
- Inform parent or social worker of any behavioral changes and what to expect during visits with children
- Spend extra time with children after visit
- Provide extra love, support and reassurance after visit
- Talk to the social worker about any concerns surrounding the visit, such as noticed changes in behavior before and after the visit
- Encourage children to write a letter or send a card to birth parent
- Discuss disappointments about the visit, if they occur

► Provide and accept support

- Encourage positive attitude toward birth parents
- Emphasize that the overall goal is to reunify children with their parents
- Seek support from social worker, friends, family and other caregivers
- After visits, be available to help children deal with and discuss their emotions

Note: Every situation is different. Please contact your foster care worker if you have any specific concerns.

► Things to Keep in Mind When Accepting a Placement

- Know your own limitations in regards to the type of child and issues you can deal with.
- Remember we all need to take time for ourselves. We may even need a break from foster care. Be sure you take it before burnout begins. Talk to your caseworker and take timeout and then come back refreshed.
Questions to Ask When Accepting a Placement

The first step to a successful foster care experience for your family and the child placed in your care is to carefully consider appropriate placements. A good match between the foster child and your family is critical to everyone’s success. You have the right to decline a placement if you feel it is not in the best interest of your family or the child.

1. The child’s full name, age, and birth date.
2. The caseworker’s name and phone number.
3. Who should the foster parent call if the caseworker cannot be reached?
4. What if I need to reach the worker after hours?
5. Why was the child removed from his family (domestic violence, sexual abuse, neglect)?
6. What type or extent of abuse occurred?
7. What is the legal status of the case?
8. The child’s medical history including immunizations, special medical problems, medications, etc.
9. When will the medical card arrive?
10. What was the last school the child attended? What grade is the child in?
11. Is the child having problems at school?
12. Does the child have any special needs such as clothing, food, supervision?
13. Are there any behavioral problems?
14. What is expected regarding visits with the birth parents?
15. Does the child present a threat to other children, animals or self?
16. What is the child’s previous placement history?
17. Does the child have siblings, relatives or other caregivers who may be visiting the child?
18. Does the child have other possessions from home that may be important such as scrapbooks, pictures, toys?
19. When will be the treatment plan be prepared or reviewed with the foster parents?
20. Has the child been involved in counseling or special education?
21. What additional services will this child need?
22. Is there any other family information that would be helpful.
Your First Day with the Foster Child

1. Don’t expect immediate bonding. This takes time. Bonding may even look different than what you have experienced from your own child.

2. Reinforce the positive aspects of the birth family to the child. Help alleviate some of the fears of being in foster care.

3. The child will be in trauma. Depending on the time of day, give him/her a chance to calm down. Introduce yourself and tell the child who lives at your home. Show the child where he/she will sleep and where the bathroom is. Give him/her personal items (towels, etc.).

4. Each child has been given or will shortly be receiving a complete exam. If you notice anything that appears abnormal (i.e. bruises, skin rashes, burns, temperature, etc.), you should make a record and report.

5. Inventory the child’s clothes and belongings with the social worker. Don’t discard anything.

6. Introduce the child to your house rules slowly and with sensitivity over time. The child will pick up on your rules by watching other children in the home. Let the child know if there are any really important rules.

7. Ask the child how he wants to be introduced.

8. Ask the child about food likes and dislikes and allergies.

9. Ask about activities the child likes. (Don’t be shocked by the answer.)

10. Determine if the child needs “alone time,” wants to mingle with family members or be involved in any activities. Keep neighbors away until the child is settled.

11. If things are smelly and dirty, you may want to wash them but also, you may want to keep one item in a Ziploc bag for the child as this may remind them of home.

12. Let the child know you are glad he/she came into your life. Remember if the child is removed, you have made a difference in his life. The child will hopefully realize that he/she is important.

Changes in Appearance

Foster and adoptive parents may not cut children’s hair or allow them to receive any tattoos, piercing, or other body modifications without parental approval. Foster and adoptive parents should notify the child’s social worker so that they may get permission if hair cuts are needed.

Shared Parenting

The foster and adoptive child’s social worker will facilitate a meeting between the child’s birth parents and the foster and adoptive parents. The purpose of shared parenting is to support the foster and adoptive child’s relationship and attachment with both their birth family and their foster and adoptive family. All information essential to the child’s well being will be shared between the two families. Families will be encouraged to be positive and supportive of each other as they work together to reunite the foster and adoptive child with their biological family.
§ 131D-10.1. Foster Care Children’s Bill of Rights

(a) It is the policy of this State to strengthen and preserve the family as a unit consistent with a high priority of protecting children’s welfare. When a child requires care outside the family unit, it is the duty of the State to assure that the quality of substitute care is as close as possible to the care and nurturing that society expects of a family. However, the State recognizes there are instances when protecting a child's welfare outweighs reunifying the family unit, and as such, the care of residential care facilities providing high quality services that include meeting the children's educational needs as determined by the Department of Health and Human Services, Division of Social Services can satisfy the standard of protecting a child’s welfare, regardless of the child’s age, particularly when the sibling groups can be kept intact. To that end, the General Assembly promotes the following in the provision of foster care:

1) A safe foster home free of violence, abuse, neglect, and danger.

2) First priority regarding placement in a home with siblings.

3) The ability to communicate with the assigned social worker or case worker overseeing the child's case and have calls made to the social worker or case worker returned within a reasonable period of time.

4) Allowing the child to remain enrolled in the school the child attended before being placed in foster care, if at all possible.

5) Having a social worker, when a child is removed from the home, to immediately begin conducting an investigation to identify and locate all grandparents, adult siblings, and other adult relatives of the child to provide those persons with specific information and explanation of various options to participate in placement of a child.

6) Participation in school extracurricular activities, community events, and religious practices.

7) Communication with the biological parents if the child placed in foster care receives any immunizations and whether any additional immunizations are needed if the child will be transitioning back into a home with his or her biological parents.

8) Establishing and having access to a bank or savings account in accordance with State laws and federal regulations.

9) Obtaining identification and permanent documents, including a birth certificate, social security card, and health records by the age of 16, to the extent allowed by federal and State law.

10) The use of appropriate communication measures to maintain contact with siblings if the child placed in foster care is separated from his or her siblings.

11) Meaningful participation in a transition plan for those phasing out of foster care, including participation in family team, treatment team, court, and school meetings.

A violation of subdivisions (1) through (11) of this subsection shall not be construed to create a cause of action under this section against the State, the Department of Health and Human Services, or a person or entity providing foster care pursuant to this Article.

(b) The purpose of this Article is to assign the authority to protect the health, safety and well-being of children separated from or being cared for away from their families. (1983, c. 637, s. 2; 2009-408, s. 1; 2013-326, s. 1)
What You Can Do to Strengthen Sibling Connections

A great deal depends on our ability to maintain and strengthen sibling connections for children in the child welfare system.

Maintaining Connections
Even when siblings are not in the same placement, resource families can maintain and strengthen sibling connections using the following strategies, most of which come from the National Resource Center for Foster Care and Permanency Planning’s *Sibling Practice Curriculum* (2004):

- Family-to-family visits and joint meals.
- Playgroup meetings during foster parent support groups or training.
- Have the children join the same sports association (e.g., play soccer together).
- Allow children to use the phone, email, Skype, or Instant Messenger to chat briefly on a daily basis.
- If your child’s sibling is being cared for by another resource family in the same community, explore the possibility of babysitting for one another or using the same babysitter, child care, or respite provider. It is the social aspect of spending time together in an unstructured way that is valuable to building and maintaining sibling relationships.
- If you are an adoptive parent, consider allowing ongoing contact with your child’s siblings even after the adoption is finalized.
- Children in foster care may live in homes with other children (foster, adopted, or birth) to whom they are not related, but with whom they develop ties. Ask the children in your home who is important to them and, in collaboration with the child’s custodial agency, help the child maintain connections with these children as well.
- Look for opportunities to bring separated siblings together in settings such as reunion camps specifically geared to helping children connect with their brothers and sisters.

Fostering Perspectives– Vol. 14, No. 1- November 2011
Vacations and Respite Care

► Vacations
Foster parents are encouraged to allow foster children to participate in all family activities, including vacations.

Foster home policy requires that you obtain permission from the agency if you are taking the child and will be away from the home for more than one night.
If you will be traveling out of the country you must obtain court approval prior to taking the child out of the country.

If you cannot take the child with your family, you must give the social worker and licensing worker adequate notice so that other arrangements can be made in your absence.

► Respite Care
Sometimes foster parents find it necessary to go out of town or encounter a situation in which they need someone else to care for their foster child for a few days.

You should ask for assistance from the child’s social worker and/or the agency foster home licensing worker. In all cases, the child’s social worker must be informed of the arrangements for respite. A relative may be used also that is approved by the agency. Background checks would be completed.

In situations where the agency assists in finding respite care, another foster parent is contacted who agrees to care for your children for the specified period of time.
Discipline
Always keep in mind, children who have been abused sexually and physically are at high risk for continued abuse, even when placed. Behaviors are the language of the child’s emotions and the symptoms of their needs. Children may attempt to manipulate the situation to get you to react in the same manner as their parents.
The foster parents should work closely as a team, each recognizing their strength to appropriately deal and cope with various behaviors. Foster parents also should work closely with the child’s social worker and licensing social worker in developing plans to deal with difficult behaviors. Many foster children have been sexually abused and the possibility exists that a child could make sexual allegations. It is particularly important that foster parents or older children not be left alone with a child who has a history of sexual abuse.

Parenting Tips
As we raise our own children, we realize that being a parent is a very challenging but rewarding experience. We learn by trial-and-error and asking others for their solutions. We realize that each child is very different. These same lessons are true when we bring foster children into our homes. Discipline strategies that are effective with our own children, may not work with abused and neglected children. These children have been raised from infancy with different rules and expectations.

Discipline is used to teach children and youth to develop self-control and to learn socially acceptable standards of behavior. We want to be constructive and aid their growth. Please be patient and don’t be afraid to ask for help.

Remember: Foster care policy states:

⇒ Foster parents shall provide appropriate supervision at all times.
⇒ Foster parents shall not use, nor permit the use of corporal punishment (ANY or ALL physical contact used with discipline in mind; including spanking, slapping, etc.); physical or chemical restraint; infliction of bodily harm or discomfort; deprivation of meals, rest or visits with family; or humiliating or frightening methods to control the actions of children.
⇒ The foster parents’ methods of discipline shall be constructive- keeping in mind the child’s age, emotional make-up, intelligence and past experiences.

Foster parents shall inform Social Services of any extreme or repeated behavioral problems of a child placed in the foster home.
POLICY: Discipline Policy and Agreement for Foster Parents, Kinship Care Providers, Relative Care Providers

REVISION DATE: 07/25/2016

Each child placement provider (licensed foster parent, kinship care provider, residential care provider) is responsible for handling disciplinary issues of the foster child. Discipline should be carried out with kindness and understanding. It must be remembered that each child is an individual and his/her life’s experiences are quite different from those of the provider’s.

Discipline must be tailored to the individual needs of the child and shall be carried out in accordance with the following guidelines:

- Children look to parents as models of appropriate behavior;
- Parent’s Caretakers should praise children for appropriate behavior;
- Child discipline must be appropriate to the child’s chronological age, mental age, emotional make-up, and past experiences;
- No cruel, severe or unusual punishment will be tolerated;
- Deprivation of a meal for punishment, isolation for more than one hour, verbal abuse, humiliation, or threats about the child or family will not be tolerated and;
- Corporal punishment is prohibited.

As a placement provider, I understand and agree to abide by the stated guidelines. I understand that discipline shall be child-specific and that any additional provisions as indicated below shall be followed in the care of the foster child.

Care Provider Signature (1)  Date

Care Provider Signature (2)  Date

Child-Specific Guideline:
Please remember that with all children, appropriate blocks should be placed on electronics including but not limited to television, satellite/cable TV boxes, internet, electronic handheld gadgets, telephone, etc. to prevent access of adult content by children. Moore County DSS will not be responsible for any funds incurred as a result of inappropriate usage.

Social Worker Signature and Title  Date
POSITIVE DISCIPLINE

Teach children in a non-rejecting way to be responsible for their own actions.

- Emphasize what the child does right. Enjoy and treasure the positive things about the child.
- Don’t let conflicts in some areas ruin relationships.
- Do not threaten to end the relationship because of bad behavior.
- Have a good understanding of yourself. Be aware of things or times that make you less patient or over reactive.
- Teach the child that the world is mostly positive, not negative. Help them

► EMPHASIZE

- Simple, concrete, firm rules with logical consequences and regular routines.
- Base your expectations on the child’s developmental level, not their age.
- Do not personalize problems. Use a neutral, matter-of-fact, low key, calm approach when following through on consequences for misbehavior.
- Emphasize choices. Keep the conflict between the child and the rule, not between you and the child. Make it clear that the child chooses his or her own actions, which lead to particular consequences.
- Maintain good eye contact and close proximity when talking to the child, making requests, or giving instructions to the child.
- Be patient. Change takes time. Relapses are to be expected.

► AVOID

Moralizing, lecturing, criticizing, guilt trips, impatience, rage, yelling and physical punishment.

- The child may have no moral base to build on. The child may not be developmentally ready to handle a lot of explanations.
- Power struggles play into the child’s game of anger and negative self-image.
- Physical punishment should never be tolerated because it gives the child the wrong message. Abused children set themselves up for failure and abuse. They feel they deserve to be treated poorly.
- Abused children may have trouble with cause and effect thinking. They need informative feedback and a clear understanding of what is expected. They are sensitive to rejection and need the reassurance of safety, stability and predictability.
POSITIVE DISCIPLINE—CONTINUED

Here is a frame of reference by which a comparison can be made between effective and ineffective methods of punishment and discipline.

► Ineffective Punishment

The punishment is frequently arbitrary, repressive, humiliating and brutal. Whether verbal, physical or restrictive, the degree of the parent’s rage, desire to permanently repress the child’s behavior, or need for revenge, determines the extent of the punishment.

Thus, punishment is primarily an expression of anger and satisfaction from exercising power. The punishment has all the elements of wanting to win. Administered at a time when the child is least able to listen and in words that are most likely to arouse resistance and make him feel no good.

Thus, the child reacts to the guilt, humiliation and anger by one means or another, without gaining knowledge of acceptable behavior and increased self-discipline.

This type of punishment develops dependency and fear, causing loss of self-esteem.

Child learns to avoid further punishment by whatever means is expedient.

► Effective Punishment

Setting limits and understandable rules for the child. The parents limit and redirect undesirable acts. These limits preserve self-respect of both persons. Restrictions are applied without violence or excessive anger. Feelings are accepted.

Child receives a clear definition of acceptable and unacceptable conduct. Both the child and parent feel more secure because they know the limits of permissible action.

Limits are stated so that the child knows what constitutes unacceptable behavior, what substitute will be accepted. Parents relate discipline to the behavior, not the person. Punishment maintains child’s self-esteem and teaches responsibility.

Discipline, whether restriction, deprivation or replacement*, is reasonable and fair, and its primary purpose is to impress upon the child the impact of the undesirable behavior and the importance of the desired behavior. (Child may participate in the determination of most effective punishment.) The need to permanently repress undesirable behavior is less important than helping redirect behavior.

Child learns acceptable behavior.

* Replacement is construed to mean the replacing of damage, or undertaking a special project to pay for, or put in work time equal to the loss.
CPS Assessments on Foster Homes

► Protective Services Investigations of Foster Homes

Social Services is mandated by law to investigate every report involving protective services to children, including allegations against foster parents.

There shall be an assessment of risk of harm to the child by the child’s social worker. Before completion of an investigation, a child will be removed only when an assessment indicates the risk of further harm to the child supersedes the positive strengths of that child’s relationship to the foster family.

Another county will be assigned to conduct the investigation of the foster home. The foster parents are notified by Moore County that a Child Protective Service report on their home has been received. Usually a Moore County investigator and one of the licensed social workers come to your home to notify you and make an initial safety plan. You also will be told which county will be conducting the investigation.

The investigating county will share details of the report. If abuse or neglect of the foster home is substantiated, removal of any foster children in the home is at the discretion of the licensing agency. In this event, the State office will notify the foster home of appeal process procedures should you wish to file an appeal of the decision.

► Allegations of Abuse: What Foster Parents Need to Know

Research indicates that foster families are more likely to be accused of abuse than people in the general population. The State of North Carolina does not provide legal representation for foster parents against whom allegations of abuse have been raised. The following precautions may be helpful in reducing the stress associated with these allegations.

1. Recognize Stress—Learn to say no to the placement of children whose problems are beyond your abilities. Seek help to find alternative ways of coping with difficult children.

2. Learn and Understand Agency Policy—Know what the agency policies are regarding discipline, emergencies, and investigating allegations of abuse and misconduct.

3. Require Specific Information about the Child Before Placement—Find out what has happened to the child and how the child has responded before you agree with the placement.

4. Discuss the Child’s Grievances—Take the child’s threats seriously.

5. Keep the Social worker Informed—Notify the social worker of any particular problems that could lead to misunderstanding between the child, agency and the foster family.


7. Empower the Child—Get the child involved in activities that bolster their self esteem, confidence and feeling of control, such as: self defense, martial arts, acting, gymnastics, sports, etc. Teach the child appropriate problem solving and communication skills. Separate the past and present in discussions. Discuss safety and prevention information and strategies, such as: “NO,GO,TELL.”

8. Communicate Clearly About Actions and Intents: Particularly About Touch

9. DO NOT Use Physical Punishment

   Be Sensitive to situations in which foster parents are left alone with children of the opposite gender and/or older children.
Financial Responsibilities

From the monthly board rate that you receive as a foster parent, you are expected to provide the child with such needs as:

- transportation,
- babysitting,
- school supplies, and
- basic living needs (food, hygiene and hair products, baby formula, disposable diapers, shelter, utilities, etc.).

The current board rates and clothing allowance rates are listed in Display D1.

You MUST obtain PRIOR WRITTEN APPROVAL from the child’s foster care workers, for any items or activities for which you desire reimbursement. Please ask well in advance as resources are limited and approval must be received from the child welfare program manager.

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<th>Age</th>
<th>Monthly Board Rate</th>
<th>Clothing Allowance—Initial</th>
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► Child Care

In some instances there are child care funds available for working foster parents. This would include before and after school care, as well as licensed child care.

► Clothing

When foster children enter care, many of them do not have adequate clothing. The agency will provide initial clothing to sufficiently meet each child’s needs.

Clothing allowances are provided for each child in your board rate check at the established rate for the child’s age.

The clothing allowance is provided for the sole purpose of purchasing new clothing for each foster child. The entire amount of this money is to be used only for clothing for the foster child and may not be used for any other purpose.

You are not required to provide receipts for all clothing purchased. However, we suggest you keep all receipts in case you are required to show proof of purchase. When a child leaves your home, you must turn in to the business office any unused clothing money.

If a child goes to another foster home, all items purchased for the child should go with them.
If a child must change schools, the child’s Social Worker will complete the school enrollment. It is helpful if the foster parent can accompany the child and Social Worker for the enrollment. All children in foster care qualify for the free lunch program. The child’s Social Worker will complete the application for free lunch.

If a child in your care has a particular school needs, such as band, sports, prom, field trips and so forth, the agency will try to help finance part of these expenses. This could also include non-school activities such as music lessons, scouts, etc. Donations received from community groups provide these extras for our children. Naturally, assisting will depend on the availability of these funds.

You MUST obtain PRIOR WRITTEN approval for use of this reimbursement.

Moore County Partners For Children and Families (www.pfcfmc.org)
call (910) 949-4045 to learn about the programs offered.

Moore County Children’s Developmental Services Agency (CDSA)
call (910) 295-3133 to learn about the programs offered.

N.C. LINKS

N.C. LINKS helps teenagers make a successful transition from foster care to self-sufficiency. Older youth and young adults who have experienced extended time in foster care are at increased risk of negative consequences once they leave care, such as dropping out of school, unplanned parenthood, high rates of untreated illness, homelessness, criminal activity, depression and suicide. In order to help these youth and young adults have better outcomes, the NC LINKS program provides services to all youth in foster care age 16 to 18 and to those young adults who are voluntarily in care between the ages of 18 and 21, as well as to young adults who aged out of foster care at age 18. For the purposes of this policy, “foster care” means that the youth was in DSS custody as a minor and lived either in a licensed foster care facility or lived with a relative (not the removal home.) County Departments of Social Services are required to offer LINKS services to these two populations if they have eligible youth or young adults who are or were in their custody. Counties are encouraged to provide services to youth in foster care ages 13 through 15 and to youth and young adults who were discharged from their custody as teens but prior to their 21st birthday.

In order for a youth or young adult to receive LINKS services or funding, he or she must be a willing and active participant in the assessment, planning, and service implementation processes. Youth and young adults who refuse services may later change their minds so long as they are eligible.

The NC LINKS program is comprised of several elements:

1. An assessment of the youth's strengths and needs.
2. A plan that is based on the assessment and that includes the youth’s interests, goals and responsibilities for fulfilling the plan.
3. Services outlined in the plan that are directed at achieving good outcomes with that youth.
**Childhood Dental Care**

Dental care should start at birth. Caregivers can clean an infant’s gums with a soft, clean cloth. When the first teeth appear, a soft toothbrush can be used as well.

**Common Dental Questions**

What is “nursing bottle decay?”

Nursing bottle decay results when infants or children nurse from a bottle for too long and/or sleep with a bottle in their mouths. Bottle liquids, even milk, can cause this decay. This can be prevented by:
- cleaning gums and teeth daily,
- putting only milk and water in bottles, and
- weaning children from the bottle by their first birthday.

At what age should children begin seeing a dentist?

Children should have their first dental check up around age one. They should see a dentist twice a year for regular dental check ups.

Since children lose their baby teeth, why do these teeth need to be cared for?

Baby (deciduous) teeth provide a foundation for permanent teeth. If children’s baby teeth are not cared for resulting in decay, permanent teeth can be damaged. This damage can be time consuming and expensive to fix in the future. Early tooth development also affects a child’s ability to eat, chew, swallow and form speech patterns. In addition, teeth problems can affect a child’s confidence and self-esteem.

How do I get dental care for my child?

Contact Moore County Health Department located at 705 Pinehurst Ave. Carthage, NC 28327, or call (910) 947-3300 and ask to speak with someone about dental services. The Human Resource Aids (HRA) through this agency will be assigned to help you with this.
Head Lice (Pediculosis)

What are head lice?
Head lice are parasitic insects found on the heads of people. Having head lice is very common; as many as 6-12 million people worldwide get head lice each year. It is incorrect to associate head lice with the stigma of poverty and poor personal hygiene. In fact, it's estimated that ten percent of elementary school children are treated for head lice each year.

Who is at risk?
Anyone who comes in close contact with someone who already has head lice, contaminated clothing, and other belongings. Preschool and elementary-age children, 3-10, and their families are infested most often. Girls get head lice more often than boys, women more than men. In the U.S., African-Americans rarely get head lice.

What do head lice look like?
There are three forms of lice: the nit, the nymph, and the adult.
Nit: Nits are head lice eggs. They are hard to see and are often confused for dandruff or hair spray droplets. Nits take about 1 week to hatch.
Nymph: The nymph are baby lice. Nymphs mature into adults about 7 days after hatching.
Adult: The adult louse is about the size of a sesame seed, has six legs, and is tan to greyish-white. If the louse falls off a person, it dies within 2 days.

What are the signs and symptoms of head lice infestation?
• Tickling feeling of something moving in the hair.
• Itching, caused by an allergic reaction to the bites.
• Red bite marks, scratches and sores on the head.

How is head lice infestation diagnosed?
By looking closely through the hair and scalp for nits, nymphs, or adults. Finding a nymph or adult may be difficult; there are usually few of them and they can move quickly. If crawling lice are not seen, finding nits within a 1/4 inch of the scalp confirms that a person is infested and should be treated. If you only find nits more than 1/4 inch from the scalp, the infestation is probably an old one and does not need to be treated. If you are not sure if a person has head lice, the diagnosis should be made by a health care provider, school nurse, or a professional from the local health department or agricultural extension service.

How did my child get head lice?
• By contact with an already infested person. Contact is common during play at school and at home.
• By wearing infested clothing, such as hats, scarves, coats, sports uniforms, or hair ribbons.
• By using infested combs, brushes, or towels.
• By lying on a bed, couch, pillow, carpet, or stuffed animal that has recently been in contact with an infested person.
Elimination and Prevention

The American Academy of Pediatrics (AAP) says even though head lice are rarely a health threat, dealing with them can be unpleasant and tedious. Treating the infested person is just the first step. Clothing and linens and other things they’ve been in contact with must be treated as well.

AAP has these suggestions:
- Prescription and non-prescription shampoos or rinses are available. These products may contain strong chemicals. Follow manufacturer's directions carefully. A second treatment may be necessary in seven to ten days to kill any newly hatched eggs. Check with your pharmacist or doctor to determine which product is best for your family. CDC says these products should not be used on children under age 2.
- After shampooing, remove nits with a fine-toothed comb. Start at the top of the scalp and pull the comb through the hair slowly. Clean the comb thoroughly as you go. This will take time. CDC advises against re-treatment right away, even if some live lice are still found 8-12 hours later. The agency says some medications take longer to act. But if the lice seem as active as before, the medicine may not be working. Lice have developed resistance to some medications and it may be necessary to try a different one.
- Because of the concerns for children under 2 years of age using chemical shampoos, AAP also says fine tooth combing after ordinary shampooing can sometimes be effective in removing lice and nits, but this method requires diligence. The group recommends washing and combing every three to four days for two weeks until no lice or nits are detected.
- CDC says it is necessary to machine wash, in hot water, or dry clean all clothes and linens the infested person touched before treatment. The agency suggests storing all stuffed animals, comforters, etc. that cannot be washed or dry-cleaned into a plastic bag and sealing it for two weeks. Vacuum the floor and furniture. CDC says avoid fumigant sprays, which can be toxic if inhaled. Remember to clean all combs and brushes with soap and hot water or disinfectant.
- Keep checking daily for two to three weeks after treatment for any evidence of a new infestation.
- Unless all affected persons are treated, the condition will continue.

Managing Persistent Head Lice Infestations

There are times when a head lice infestation seems to persist indefinitely. This may be due to head lice resistance to pediculicides. If resistance is suspected, consult with your physician.

W.I.C. Program

Foster children ages birth to 5-years may qualify for the Women, Infants and Children (W.I.C.) Program provided through the Public Health Department. This program provides infant formula and other nutritious foods for babies and young children free of charge.

To apply for the W.I.C. program, contact:

Moore County Health Department
910-947-3271

However, prior to applying you need to secure a written statement from the child’s social worker authorizing you to receive vouchers for a particular child. You must present your Foster Parent Identification Card when you go to pick up the vouchers.
Immunizations

North Carolina law requires immunizations throughout a child’s life, from birth to age 18. Everyone needs a tetanus booster every 10 years.

All vaccines required by law may be received free of charge at the County’s health department.

A child’s social worker must sign up in advance authorizing the immunization. You should receive a copy of the child’s immunization record when you receive the Child Health Status Form. Please be sure this is done prior to your making an appointment. To schedule an appointment, call:

Moore County
Health Department
910-947-3300

Bed Bugs

Bedbugs are small, oval, brownish insects that live on the blood of animals or humans. Adult bedbugs have flat bodies about the size of an apple seed. After feeding, however, their bodies swell and are a reddish color. Bedbugs do not fly, but they can move quickly over floors, walls, and ceilings. Female bedbugs may lay hundreds of eggs, each of which is about the size of a speck of dust, over a lifetime. Immature bedbugs, called nymphs, shed their skins five times before reaching maturity and require a meal of blood before each shedding. Under favorable conditions the bugs can develop fully in as little as a month and produce three or more generations per year. Although they are a nuisance, they do not transmit diseases.

Bedbug Treatments

Getting rid of bedbugs begins with cleaning up the places where bedbugs live. This should include the following:

• Clean bedding, linens, curtains, and clothing in hot water and dry them on the highest dryer setting. Place stuffed animals, shoes, and other items that can’t be washed in the dryer and run on high for 30 minutes.
• Use a stiff brush to scrub mattress seams to remove bedbugs and their eggs before vacuuming.
• Vacuum your bed and surrounding area frequently. After vacuuming, immediately place the vacuum cleaner bag in a plastic bag and place in garbage can outdoors.
• Encase mattress and box springs with a tightly woven, zippered cover to keep bedbugs from entering or escaping. Bedbugs may live up to a year without feeding, so keep the cover on your mattress for at least a year to make sure all bugs in the mattress are dead.
• Repair cracks in plaster and glue down peeling wallpaper to get rid of places bedbugs can hide.
• Get rid of clutter around the bed.

If your mattress is infested, you may want to get rid of it and get a new one, but take care to rid the rest of your home of bedbugs or they will infest your new mattress.
Most foster children qualify for Medicaid, which covers medical and dental care, approved therapy or counseling services, optometric needs, and most prescription medications.

In making arrangements for these services, it is extremely important to inquire before such services are rendered whether or not the provider accepts Medicaid as payment. If they do not, it will be necessary to find another medical provider or pharmacist who does accept Medicaid.

If the provider does accept Medicaid, the current Medicaid card must be presented to the provider every time you visit the provider. Medicaid cards are issued by the State office and usually arrive around the middle of the month.

In most cases, a child’s social worker will be making an application if a child is not a current Medicaid recipient when initially placed in foster care. If the child does not have a Medicaid card, discuss with the social worker how needed medical services will be provided. In most instances, the medical provider or pharmacist will be requested to bill Moore County Social Services for the medical service or prescription; they should be informed that application for the child’s Medicaid is being made.

There are some foster children who do not qualify for the Medicaid program due to various reasons. In these situations, the Department of Social Services is financially responsible for meeting the medical needs of these children. A child’s social worker will assist you in making medical provisions for the child.

**Medicaid does not pay for missed appointments. Some medical providers do charge for missed appointments. So if you are to transport a child and that child misses an appointment and you fail to cancel the appointment, you must pay the fee yourself out of your board payment.**

**General Medical Issues**

All foster parents should be aware that Foster Care social workers must sign for routine medical appointments.

If the parental rights of the parents are still in tact then the parents as well as the Director of Moore County Social Services must sign for any procedure where a child must be put under anesthesia. Please contact your child’s social worker if this needs to happen.

**Christmas gifts**

The Agency coordinates gift giving for children in foster homes. Sometime in November. It is your responsibility to return the information to the assigned social worker to receive gifts for the children.

If your home happens to have foster children placed with you from another county, it is that county’s responsibility to provide gifts for those particular children.

Each year, the Moore County Social Services accepts monetary donations from its own employees, churches, civic clubs, area businesses and others to help provide Christmas gifts for Moore County children.

In some cases with older children, the child’s social worker may elect to give the money to the child so that they may purchase their own gifts or buy gifts for family and friends.