#### ADDENDA

### I. Attachments to Foster Care Agency Guidelines

### A. <u>Considerations in Assessing Foster Carer Applicants</u>

Assessment of the ability of applicants for approval of foster carers shall include the following considerations:

- 1. The ability to provide care, nurturing and supervision to children;
- 2. Demonstrated stable mental and emotional adjustment and, in the case of any question regarding the mental or emotional stability of a family member, a psychological evaluation of that person which demonstrates acceptable emotional or mental stability prior to acceptance of the applicant(s);
- 3. Supportive community ties with family, friends and neighbours;
- 4. Existing family relationships, attitudes and expectations regarding the applicant's own children and parent/child relationships, especially as they might affect a foster child;
- 5. Ability of the applicant to accept a foster child's relationship with hisher own parents;
- 6. Ability to care for children with special needs, such as physical handicaps and emotional disturbances;
- 7. Number and characteristics of foster children best suited to the foster family;
- 8. Ability of the applicant(s) to work in partnership with the Foster Care Agency (Pennsylvania Code).
- 9. The ability of the foster carers to maintain a home which is:
  - a. in safe condition,
  - b. good repair
  - c. comparable in appearance and maintenance to other homes in the community,
  - d. in compliance with local standards, ordinances and regulations for residential use,
  - e. kept clean and free of hazards to the health physical well-being of the family, and
  - f. continuously supplied by drinking water approved by local health authorities (DELACARE).
- 10. Physical health and freedom from communicable deseases, as certified by a licensed physician, or disabilities which would either endanger the health of a child or interfere with the capability of the household to provide care for the child;
- 11. Responsible adult lifestyle, free of excessive use of alcohol or use of illegal drugs;

- 12. Ability to set realistic expectations for behaviour and performance based upon the age, abilities and special needs of a child;
- 13. Ability to provide nurturing care, supervision, reasonable discipline and a home-like environment for a child;
- 14. Freedom of convictions, indictment or involvement in any criminal activity involving violence against a person, child abuse or neglect, sexual misconduct, possession, sale or distribution of illegal drugs, gross irresponsibility for the safety of others or serious violations of accepted standards of honesty or ethical conduct;
- 15. Will work diligently as a member of the treatment team responsible for planning, providing and discussing the total care and services provided to each child, fully disclosing all information related to a child's problems or progress to Foster Care Agency workers, but shall treat any personal information about a child or the child's family in a confidential manner;
- 16. Ability to use methods of positive discipline and control for a child, stressing praise and encouragement for good behaviour and refraining from physical/corporal punishment and verbal abuse of the child, including threats of removal from the foster care home (DELACARE).

## B. <u>Topics to Include in Foster Carer Orientation</u>

The orientation will include information about:

- 1. Foster Care Agency philosophy;
- 2. Foster Care Agency practices;
- 3. Roles of the foster carers;
- 4. Roles of the Foster Care Agency staff in assisting the foster carers in serving the children;
- 5. Agency policies and procedures for discipline, punishment and control of children in care;
- 6. Applicable statutes;
- 7. Regulations and general procedures (Pennsylvania Code).

# C. <u>Topics to Include in Foster Carer Pre-Service Training</u>

The pre-service training for foster carers will include information about:

- 1. The history of foster care;
- 2. Foster Care Agency practices;
- 3. Roles of the foster carers and agency staff;
- 4. Positive disciplinary practices;
- 5. Separation and loss;
- 6. Suicide risk and assessment;
- 7. Signs of substance abuse;

- 8. Child abuse law;
- 9. Legal considerations in foster parenting;
- 10. First aid and cardiopulmonary resuscitation;
- 11. Developmental stages;
- 12. Cultural norms (After O'Donnell).

#### D. <u>Consideration for Home Studies</u>

The Foster Care Agency will plan placements with the best interests of the child as a guide.

- 1. A home-study will be conducted of the prospective foster carer's home and will include:
  - a. The safety of the child;
  - b. The linguistic, social, ethno-cultural, religious identity and heritage of the foster family;
  - c. The number, ages and gender of children/youth already living in the foster family home;
  - d. Whether adults are already being fostered in the family home;
  - e. The geographic location and community norms of the foster family;
  - f. The proximity toschools and other community services for children/youth;
  - g. The willingness and ability of the foster family to work with the child/youth in care and become part of the professional foster care team;
  - h. The willingness and ability of the foster family to maintain contact with the child/youth's family, in accordance with the plan of care;
  - i. The strengths, abilities, special talents and level of training enabling the foster family to provide quality care for the child, including specific abilities necessary to meet any special or extra needs of the child;
  - j. The willingness and ability to increase knowledge and further training to meet a child/youth's specific and changing needs;
  - k. The willingness and ability to meet the health and dietary needs of the child;
  - 1. The ability of the foster family to accept a sibling group or multiple placements;
  - m. The willingness of the foster family to access and use availgable recources (After Canadian Guidelines for Foster Care).
- 2. The Foster Care Agency will establish a limit upon the number of children placed in one foster care home at one time.

#### E. Interpersonal Qualities of Foster Care Staff

In addition to meeting professional requirements, child and family workers should possess certain interpersonal qualities, such as they should:

- 1. Care about children and youth and be able to respond to them;
- 2. Be able to work as part of a professional team;
- 3. Have values and ethical standards conducive to supporting the well-being of children, youth and their families;
- 4. Be open to assessing personal strengths and needs and be active in pursuing knowledge independently;
- 5. Respect and accept the diversity of people, including age, gender, ethno-cultural heritage, community, bckground, disability, special needs, sexual orientation, lifestyle preferences, spiritual traditions and beliefs;
- 6. Be committed to the value of family living;
- 7. Be sincere, honest, tolerant, understanding and flexible;
- 8. Be able to set and maintain personal limits and boundaries;
- 9. Have a sense of humour;
- 10. Be able to manage their own feelings;
- 11. Be able to maintain confidentiality; (Canadian Guidelines for Foster Care).
- F. <u>Staff Pre-Service Training Topics</u>

The Foster Care Agency should provide pre-service for the staff before they begin to carry out their responsibilities with children and their families and regular on-going training thereafter.

Pre-Service Training should include:

- 1. The purpose, goals, philosophy, and organizational structure of the family foster care program and its relationship to other child wlfare services;
- 2. The laws, regulations, policies, and values that direct the agency's child welfare programme in general and the foster family care programme in particular;
- 3. Employees' rights and responsibilities, benefits and personnel policies, and a description of agency services;
- 4. Health and safety procedures, including first-aid and CPR training, information on HIV/AIDS and necessary precautions, policy on psychotropic medication and emergency procedures;
- 5. Policies on discipline, confidentiality, substance abuse, and HIV/AIDS;
- 6. The knowledge and practice sills necessary to be an effective family foster care worker;

- 7. The social worker's role as an effective and essential member of the professional team;
- 8. Managing the impact of family foster care work on themselves, their own family, and all aspects of their family life; and
- 9. The nature of cross-cultural work and the importance of participating in cultural competency training, and implementing those skills (CWLA 3.45).

The Foster Care Agency should provide workers with a thorough in-service training programme that helps them to maintain and expand the knowledge and skills necessary to fulfill their responsibilities. Training should be regularly scheduled and should be integrated with supervision so that in-service training and supevision are mutually reinforcing (CWLA, 3.52).

### G. Foster Care Agency Supervisor's Responsibilities

The responsibility of the supervisor is:

- 1. To guide and develop the workers' abilities to support and work with children, youth and their families;
- 2. To become knowledgeable about the foster families with whom the cild and agency workers are involved;
- 3. To guide and develop the worker's ability to support and work with foster carers, other professionals and the community;
- 4. To form and maintain positive working relationships with staff;
- 5. To supervise workers' performance and monitor and assess the workers' casework and caseload;
- 6. To support and assist workers with decision-making and setting priorities;
- 7. To demonstrate effective and appropriate personal and management skills;
- 8. To demonstrate understanding of the structure and policies of the Agency and its management procedures;
- 9. To provide leadership to the professional foster care team and encourage partnerships and teamwork amnogst all members of the foster care team;
- 10. To coordinate the activities of the services to the child;
- 11. To represent the Agency in the community;
- 12. To participate in personnel and employment decisions;
- 13. To interact professionally, positively, and actively with the Agency leadership and with supervisees (After Canadian Guidelines for Foster Care).
- H. <u>Determining Factors in Caseload Size</u>

The caseload size for workers should be determined, depending upon the level of service required to meet the assessed needs of each child.

The wollowing factors should be considered in determining caseload size:

- 1. The complexity of the needs of the child and family;
- 2. The level of competency of the worker, including skills and experiences;
- 3. The specific functions assigned, including intake responsibilities and court work, and the concomitant time requirements for each;
- 4. The geographic area served and the time rquired for travel for service provision;
- 5. The availability of services and resources required by the clients;
- 6. The number of other agencies involved in providing services to cases within the caseload;
- 7. The time required for case documentation and court-related activities;
- 8. The time needed for agency activities, such as meetings, professional development, and administrative functions (CWLA, 3.48).

# II. <u>Attachments to Child In Foster Care Guidelines</u>

A. Methods to Protect Child's Emotional Health

The Foster Care Agency, the foster carers and other members of the treatment team should protect the emotional health of a child in care by:

- 1. Assessing by informal observation and, if needed, by formal testing, the child's current state of emotional wellbeing and psychological balance;
- 2. Insuring that the child is made aware of significant events in the life of the child's family during the child's separation from them;
- 3. Soliciting the child's active participation in developing and completing the plan for care (After Children's Choice);
- 4. Collaborating with thechild's legal family to arrange parental, kin, and sibling visits, to have positive experiences during visits, and to help the child with feelings about visits before, during and after the experiences (CWLA, 2.42/43).
- 5. Providing counselling on a regular basis for the child in an out of home placement, so that the child is able to deal with the frustrations, fears and constraints faced daily, and

providing, when warranted, regular psychological or psychiatric counselling to assist the child with deeper psychological needs (Children's Choice);

6. Assisting the child in the preparation of (or preparing for the very young child) a chronicle of the child`s time in out of home care so the child and the child`s family have an account of the significant events in the child`s life during placement. This chronicle may be in the form of a traditional "life book" photograph type album or in the form of a video or audio tape, or a combination of these media.

Whenever possible, the child should be provided with a life book of some type from the legal family soon after the child is placed in care (After Canadian Guidelines for Foster Care).

## B. <u>Methods to Support the Child's Sexual Development</u>

The foster carers and Foster Care Agency worker should cooperate in the child's development of healthy sexual attitudes and behaviours, including the legal parents whenever possible in the process.

- 1. The foster carers should ensure that the child/youth is provided with age-appropriate information on the physical changes that occur as the child/youth matures and should be taught hygienic practices related to the physiological changes. Youth should be encouraged to abstain from early sexual activity and should be provided with information about other birth control methods and sexually transmitted deseases.
- 2. Foster carers should ensure that the child/zouth learns about persona., family and ethno-cultural values regarding sexuality and sexual behaviours, respect for other people and their rights, and is supported in the promotion of selfconfidence and self-respect as sexual identity develops.
- 3. If a child/youth is pregnant, the foster carer should ensure that the child/youth discusses available options with the child/youth`s physician and Foster Care Agency worker.
- 4. Parenting youth should be provided with the opportunity to participate in parenting and life-skills classes and can benefit from positive parenting role models in the foster family environment (Canadian Guidelines for Foster Care).

# C. <u>Aftercare Services</u>

Plans should be made prior to the youth's emancipation to provide for a network of services to support and assist the young

person during a transition period lasting from one to six years. These could include:

- 1. advice and assistence;
- 2. referral services;
- 3. extended care benefits;
- 4. educational supports and scholarships;
- 5. job preparation and training programmes;
- 6. counselling services;
- 7. health and dental services;
- 8. drug and alcohol treatment programmes;
- 9. money management training;
- 10. housing services;
- 11. legal services;
- 12. ethno-cultural supports; information on youth in care organizations; and
- 13. opportunities for community recreational and volunteer experiences.

### III. Attachment to Guidelines for Foster Carers

A. Characteristics to Meet the Child`s Developmental Needs

Due consideration should be given to foster carer applicants with regard to their age, income, marital status, race, religious preference, sexual orientation, physical or disabling condition, or location of the foster home.

Among the characteristics of foster carers are that the foster carer must demonstrate and document when requested are:

- 1. Ability to use methods of positive discipline, stressing praise and encouragement for good behaviour and refraining from physical/corporal punishment and verbal abuse of the child, including threats of removal from the foster care home.
- 2. Physical health and freedom from communicable diseases, as certified by a licensed physician, or disabilities which would either endager the health of a child or interfere with the capability of the household to provide care for the child;
- 3. Responsible adult lifestyle, free of excessive use of alcohol or use of illegal drugs;
- 4. Ability to set realistic expectations for behaviour and performance based upon the age, abilities and special needs of a child;
- 5. Ability to provide nurturing care, supervision, reasonable discipline and a home-like environment for a child;

- 6. Without criminal conviction, indictment or serious violations of accepted standards of honesty or ethical conduct;
- 7. Productive participation as a member of the interdisciplinary intervention team responsible for planning, providing and discussing the total care and services provided to each child, fully disclosing all information related to a child's problems or progress.
- 8. Treat any personal information about a child or the child`s family in a confidential manner.

# B. Safety Requirements

- 1. Dangerous substances: Medications and containers of poisonous, caustic, toxic, flammable or other dangerous material kept in the home should be distinctly marked or labelled as hazardous and stored in areas inaccessible to children under 5 years of age.
- 2. Emergency Telephone Numbers: Emergency telephone numbers, including those for fire, police, poison control and ambulance should be conspicuously posted adjacent to all telephones. Children should be taught the proper use of these emergency numbers.
- 3. Fireplaces: Fireplaces, fireplace inserts, wood and coal burning stoves and free/standing space heaters, if allowed by local ordinance, should be installed and operated according to manufacturers` specifications and requirements specified by local ordinance. These devices should be covered by a protective screen at all times.
- 4. Smoke Detectors: An operable smoke detector should be placed on each level of the home and maintained in operable condition.
- 5. Fire Extinguishers: A portable fire extinguisher should be available in the kitchen or other cooking areas and be tested annually or have a gauge to ensure adequate pressure.
- 6. Protective Electrical Caps: Protective electrical caps shall be placed in electrical outlets accessible to children younger than 5 years of age. Exposed electrical wires are prohibited;
- 7. Drinking water from an individual water source should be potable as determined by an annual microbiological test conducted by a certified laboratory or health department (Pennsylvania Code).

# C. Foster Carer`s Rights

In addition to the rights of the foster carer already stated, the foster carer has the right to:

- 1. Be free from any form of abuse;
- 2. Be considered first as a family and second as a service provider;
- 3. Voice opinions, thoughts, feelings and beliefs without retribution;
- 4. Participate in training relevant tocaring for foster children/youth;
- 5. Relief and support services;
- 6. Decline a placement or request the removal of a child from their home;
- 7. Receive support, consultation and supervision related to the child`s particular needs;
- 8. Recognition and acceptance of their status as team members in the provision of services to children;
- 9. A clear understanding of their roles and responsibilities to the child, the Foster Care Agency and the child's parents;
- 10. Participate in the development of the child`s plan of care and involvement in carrying the plan through to completion;
- 11. Be considered in permanency planning and/or adoption for children who have been living as part of the foster family for an extended length of time;
- 12. Confidentiality;
- 13. Access to all relevant information about the child and the child's family prior to or at the time of placement;
- 14. Access to any information contained in reports related to the fostering situation and the right to contribute information to the file;
- 15. Private and confidential access to a specific Foster Care Agency worker;
- 16. A grievance or complaint process related to the practices and decisions made by the Foster Care Agency or the child`s referring agency without fear of retribution;

### D. Foster Carer`s Orientation Topics

- 1. The orientation will include information about:
  - a. Foster Care Agency philosophy;
  - b. Foster Care Agency practices;
  - c. Roles of the foster carers;
  - d. Roles of the Foster Care Agency staff in assisting the foster carers in serving the children;
  - e. Agency policies and procedures for discipline, punishment and control of children in care;
  - f. Applicable statutes;
  - g. Regulations and general procedures (Pennsylvania Code).

### E. <u>Foster Carer`s Pre-Service Training Topics</u>

- 1. The pre-service training for foster carers will include information about:
  - a. The history of foster care;
  - b. Foster Care Agency practices;
  - c. Roles of the foster carers and agency staff;
  - d. Positive disciplinary practices;
  - e. Separation and loss;
  - f. Suicide risk and assessment;
  - g. Signs of substance abuse;
  - h. Child abuse law;
  - i. Legal issues in foster parenting;
  - j. First aid and cardiopulmonary resuscitation;
  - k. Developmental stages;
  - 1. Cultural norms (After O`Donnell).

#### F. <u>Foster Carer`s In-service Training Topics</u>

Foster carer in-service training should include such topics as:

- 1. Roles and responsibilities of foster carers as members of the foster care team;
- 2. The effects of fostering on the foster family.
- 3. Child and youth development;
- 4. Rights and responsibilities of foster families;
- 5. Characteristics, behaviours, and needs of children coming into care;
- 6. Child abuse and neglect, causes and effects on child development;
- 7. Caring for a child who has been abused and/or neglected;
- 8. Caring for a child/youth who is a sexual offender;
- 9. Caring for the child who has been sexually offended or molested;
- 10. Parenting skills and practices;
- 11. Caring for children with special needs or challenges;
- 12. Assertiveness training;
- 13. Attachment, separation and loss including trauma experienced by the child due to separation from the family home;
- 14. Communication skills;
- 15. Ethno-cultural awareness;
- 16. Legal issues affecting foster families, children and their families and the Foster Care Agency;
- 17. Health and safety, including communicable diseases and universal precautions, nutrition and eating disorders, sleeping disorders;
- 18. Behaviour management and positive discipline;
- 19. Time and stress management;

- 20. Conflict resolution;
- 21. Working with the educational system;
- 22. Substance abuse and community resources;
- 23. Human sexuality;
- 24. Support network within the community for foster carers;
- 25. Types and classifications of foster care, such as therapeutic, emergency, short-term, long-term, permanent, respite, kinship, special needs, children-youth in conflict with the law, preparation for independence, pregnant or parenting youth, etc.

## IV. Attachment to Guidelines for Birth Parents

## A. <u>Biological Parents' Rights</u>

Biological parents of children and youth in care have the right to personal dignity and respect and to be informed of their rights and how to exercise them.

## B. <u>Biological Parents' Responsibilities</u>

The responsibility of biological parents will be to support efforts to actively resolve family conflicts and aim toward the reunification of the family by being involved in the interdisciplinary intervention team and to maintain contact and schedule visits with them unless such contact places the child in danger of harm or is mandated against bz the courts.

The biological parents should concomitantly respect the rights of others.