

foster family handbook

5th Edition



Foster Family Handbook

Fifth Edition



Ministry of
Children and Family
Development

Acknowledgments

Foster families in British Columbia, the B.C. Federation of Foster Parent Associations, the Federation of Aboriginal Foster Parents and the Ministry of Children and Family Development have enjoyed an excellent working relationship for many years. Together these groups represent a wealth of expertise on fostering, and we have used their contributions to help us put together this updated edition of the handbook. It has truly been a collaborative enterprise.

National Library of Canada Cataloguing in Publication Data

Main entry under title:

Foster family handbook. 1997-

Irregular. Imprint varies: 2001-

Ministry of Children and Family Development

ISSN 1703-0285 = Foster family handbook

1. Foster home care - British Columbia. 2. Foster parents - British Columbia. 3. Foster children - British Columbia. I. British Columbia. Ministry for Children and Families. II. British Columbia. Ministry of Children and Family Development. III British Columbia Federation of Foster Parent Associations.

HQ759.7F67

362.73'3'09711

C2002-960054-5

Table of Contents

Introduction	1
1 • The Family Care Home Program	3
Defining the program	3
Role of the foster parent	4
Provincial legislation and key foster parent contacts.....	6
How children come into care	7
Types of family care homes	8
Family Care Home Agreements	10
Consolidated Criminal Record Check	11
2 • Teamwork and Planning	13
Importance of teamwork	13
The pre-placement period	14
Background information	14
What to consider before accepting a child into your home	14
The child's Plan of Care	15
Keeping records	16
Caregiver's responsibilities	16
Infants living with foster families	16
Caregiver service records.....	17
3 • The Child in Your Home	19
Understanding the child	19
Your relationship with the child's family.....	21
Rights of children in care	22
Smoke and vapor free environment	22
Discipline and positive parenting methods	23
Privacy and personal possessions	25
Education	25
Computer placement and internet safety	26
Cultural identity and religion	26
Health supports for children and youth in care	27
Medical and dental care	28
Emergencies	29
Transportation, travel and vacations	32
The young person's finances	34
Civil status, licences and legal matters	35
The Federation of B.C. Youth in Care Networks	38
Youth living in and transitioning from foster homes	39
When the child leaves your home	39
Taking care of yourself	41

4 • Supports and Entitlements of Foster Parents	43
Payments to foster parents	43
Non-primary caregiver situations for children and youth in care	48
Sleepovers and other significant and unsupervised situations	49
Relief for foster parents	50
B.C. Federation of Foster Parent Associations (BCFFPA)	52
Insurance, WorkSafeBC and income tax	52
Medical and dental benefits for foster parents	54
Support in resolving foster care concerns	55
Federation of Aboriginal Foster Parents (FAFP)	55
Regional Foster Parent Support Agencies	56
Ongoing monitoring and annual reviews	56
Foster parent rights	58
References	61
<i>The Child, Family and Community Service Act</i>	62
CFCSA Guiding Principles (Section 1)	62
Service Delivery Principles (Section 3)	63
Best Interests of the Child (Section 4)	64
Out-of-Home Living Arrangements (Section 71)	65
Confidentiality and Disclosure of Information	65
Guardianship Status and Implications for Foster Parents	66
Rights of Children in Care	67
Screening, Assessment and Approval Roles and Responsibilities for all Non-Primary Caregiver Situations for Children and Youth In Care	70
Relief Care Provider Assessment Guide and Checklist	72
Foster Caregiver’s Guide for Assessing Relief Care Providers	75
Screening Checklist (for completion by the Delegated Social Worker) and Joint Approval Documentation	77
Foster Parent’s Pre-placement Checklist	79
Checklist to Assist Foster Parents Working with Youth Transitioning to Adulthood	80
Missing Children and Youth Policy and Procedures	81
Glossary	83
Index	85
Quick Reference	87

Introduction

This 5th Edition of the Foster Parent Handbook has been updated to reflect current Ministry of Children and Family Development (MCFD) policy and government legislation. The ministry review process was assisted by regional social workers and resource consultants and members of the B.C. Federation of Foster Parent Associations (BCFFPA) and the Federation of Aboriginal Foster Parents (FAFP).

The primary aim of the Handbook is to explain how we work together to care for and help meet the needs of children who require foster family care. The Family Care Home program provides a framework for this work. Teamwork is a key method of helping children in care. It starts with planning for a placement of the child in your home and continues until after the child leaves.

Throughout the Handbook the term *children and youth in care* refers to children and youth in the care of MCFD or a Delegated Aboriginal Agency (DAA), including children and youth who are in care by agreement.

The Handbook provides essential information about the Family Care Home program:

- what is expected of you as a foster parent
- what support and assistance you can receive to help you care for children, and
- how we work together to plan for and provide the best care possible for children

Much of fostering is guided by legislation, policy and standards for social workers and foster parents, but it is also guided by caring, compassion and common sense.

In this updated 5th Edition of the Foster Parent Handbook, the term *foster parent* and *foster caregiver* are intended to mean the same thing as *family care home parent*. The term *foster family* is also used, wherever possible, to recognize the contribution of all family members.

We hope you find this Handbook useful in your work on behalf of the province's children.

Note: This online version of the Handbook contains updates to web links that were changed after the print version was produced.

1 • The Family Care Home Program

Defining the program

The Ministry of Children and Family Development and Delegated Aboriginal Agencies are responsible for programs related to child protection, family support, and caring for children and youth unable to live with their parents. The ministry also has responsibility for children with Autism, child and youth mental health, early childhood educators and child care, children and youth with special needs and youth justice.

Through the Family Care Home program, family-based care for children in care (under the care, custody or guardianship of a director) as well as supports for foster parents is provided. The ministry and the DAAs work closely with the B.C. Federation of Foster Parent Associations (BCFFPA), the Federation of Aboriginal Foster Parents (FAFP) and the Regional Foster Parent Support Agencies to create programs and services that work best for children in care and for the people who look after them.

Foster homes provide substitute parenting for children who cannot safely stay with their own families, whose families have asked for help with parenting during times of crisis, or whose families need specific or periodic help in caring for their children. In the foster home, the child receives:

- physical care such as clothing, food and shelter
- emotional care, including love and inclusion in a family
- nurturing of both intellectual and emotional development
- guidance and supervision
- positive role modelling

The Family Care Home program is based on four important ideas:

- **Professional volunteer parenting.** Foster parents are people with important skills and experience related to caring for children. Not everyone has the skills or personality needed to be a foster parent.
- **Inclusiveness and teamwork.** Foster parents, child welfare workers, children in care and their parents, and other community helpers are all necessary partners in carrying out the program. The relationship among the partners is not always easy, and each case is different, but teamwork is essential to the process of helping children.
- **Graduated levels of care.** Different children have different needs, ranging from reasonably straightforward to very complex. These needs can only be met by a range of foster parents with various types of skills, experience and training.
- **Child's Plan of Care.** The care for each child is based on a plan created by each child's service team, including the family care home parent, which specifies who will be doing what, when it will occur and the expected change that is to happen.

The overall goals of the Family Care Home program are to provide family-based care for children which nurtures, heals, and develops their potential and to provide temporary care for a child who has to live away from their family until they can achieve permanency through reunification with their family or another permanency option.

Pre-service foster parent information sessions and training:

During the screening process, prospective foster parents are invited to attend a series of orientation or information sessions that:

- provide information about the recruitment, participatory assessment and approval process
- outline the expectations of caregivers, including the team approach to caring for children and working with the child's family
- promote awareness and understanding of the diverse needs of children in care, and
- introduce positive and effective styles of parenting

This allows prospective caregivers to gain a realistic understanding of the rewards and challenges of caregiving, in order to assess their own readiness and capacity.

Approval process for foster parents:

Foster parents undergo a complete screening and assessment process that includes:

- a check of previous or current contacts with MCFD/DAAs
- three references
- a medical reference
- a consolidated criminal record check, and
- a home study

The approval process for foster homes is included in standard 2 and 3 of the Caregiver Support Service Standards.

Role of the foster parent

As the person most involved with the child on a daily basis, you are a crucial member of the child's team. The Family Care Home program expects that foster parents follow these guidelines:

Remember that children in care have special needs. Foster parents are sometimes advised to treat foster children the same way they treat their own. To a degree this makes sense, yet caring for someone else's child is not the same as caring for one's own. Many children in care have experienced traumatic separation and loss, as well as other difficulties. Most have a greater than average need for attention and

affection, and require more understanding and patience than parents are used to giving children.

Show personal interest in each child in your care. There are many ways of doing this, including spending special time with the child, helping with homework or getting the child involved with community events or programs. The child should be encouraged to have fun, develop interests and learn appropriate social behaviour.

Respect each child's right to confidentiality. Any information the child's social worker shares with you about the child must be held in confidence, unless there is a direct need – in the child's best interest – to share this information. When in doubt about whether to share certain information with anyone, such as a school or social agency, discuss the matter with the child's social worker before proceeding.

Remain open to new ideas on child development, parenting and fostering. Fostering is a challenge and will almost certainly require you to learn new information, techniques and skills. You can improve your parenting skills by taking part in BCFFPA/FAFP or ministry/DAA sponsored workshops and other community programs. The BCFFPA/FAFP and your resource social worker can provide more information.

Maintain children's ties with their culture and extended family. It is not always possible to find foster homes that can meet the particular needs of some children in care. For instance, Aboriginal foster homes cannot always be found for Aboriginal children in care. When Aboriginal children are placed in non-aboriginal homes, it is essential to maintain these important links to their extended family and Aboriginal culture.

Advocate for the children and youth in your care. As a foster parent, it is part of your role to advocate for the children and youth in your care, and to work collaboratively with other members of the team to make good decisions that are in the best interests of the child or youth.

www.mcf.gov.bc.ca/foster/pdf/advocating_role_caregiver.pdf

Act appropriately in the role of "prudent parents." Foster parents have undergone a screening, assessment and approval process with MCFD or DAA staff as outlined in current policy. Approved foster parents are capable of taking on the roles and responsibilities of a prudent parent in the day to day care and decisions that promote the health, safety and best interests of the children or youth placed in their home. In their capacity as a prudent parent, foster parents are expected to use the due diligence any parent would when making decisions about the child's involvement in care giving situations or activities both inside and outside of the family care home, such as being cared for by a child minder, attending child care or participating in sleepovers and play dates.

Provincial legislation and key foster parent contacts

All services provided under the Family Care Home program must be consistent with provincial legislation, the most important of which is the *Child, Family and Community Service Act (CFCSA)*. Foster parents should be familiar with the *CFCSA* and must comply with it. (See References for a discussion of the sections most important for foster parents. Note especially “**Rights of Children in Care.**”)

The *CFCSA* names “a director” as the official responsible for the programs services. The director is appointed by the minister and has overall responsibility for administering the *CFCSA* and the child welfare system. In practice, however, other staff may be delegated (assigned) to provide service on a day-to-day basis. The people you will have closest contact with are:

Social workers are also guided by the CFCSA as well as specific standards.

- **The child’s social worker.** Social workers are the main contact with children and families and make most of the key decisions for children in care. They are generally responsible for planning the child’s care and for any funding issues directly related to the child. They share with you background information about the child and are available to answer your questions. If a child has special problems, their social worker helps you either personally or by referral to appropriate agencies or resources. They also work with the child’s birth family. Usually, when you see the word “director” it means the child’s social worker.
- **Your resource social worker.** Just as every child in care has an assigned social worker foster families have a resource social worker assigned to them. Resource social workers assist with your administrative and funding concerns, help resolve disputes or misunderstandings, give feedback on fostering methods and skills, help identify and secure needed training, answer questions about policy and philosophy, and generally support you and your family.

These social workers are vital to foster parents. It is critical that you meet regularly with the social worker assigned to the child in your care – at the time of placement, throughout the child’s stay in your home, and at any significant times during their care.

How children come into care

Three pieces of legislation define how a child may come into care:

- 1) The ***Child, Family and Community Service Act (CFCSA)*** applies in two main situations:
 - when a parent is temporarily unable to look after a child and signs an agreement for care with the ministry or a DAA, or
 - when a child is removed from a parent because the child needs protection
- 2) The ***Infants Act*** (formerly under the *Family Relations Act*) applies when a parent or guardian dies and no one is appointed by will to assume guardianship; or when the court orders a director to assume guardianship. If relatives apply for custody and guardianship of a child under the *Infants Act*, a home study is completed before a final decision is made.
- 3) The ***Adoption Act*** applies when a parent signs consents for a child to be adopted. Children may be placed in foster homes temporarily while the adoption process is being completed.

Legal Status of Children in Care

The way that children come into care affects their legal status and some aspects of their care.

- ***By agreement.*** Parents remain the legal guardians. They must be involved in planning and must be asked for their consent in guardianship matters such as medical care, unless the negotiated agreement says otherwise. (**You are given a copy of this agreement.**) Since the aim is for the child to return home, you and the child's social worker must encourage the family to stay in touch through visits, letters and telephone calls.
- ***Through removal.*** A director has care and guardianship responsibilities. You can make decisions about day-to-day things like routines, activities and school work, but you must consult with the child's social worker about other issues. The plan is for the child to return home, so the court may allow the parent's access to the child. A director normally consults with the parents regarding important decisions affecting the child.
- ***Continuing care.*** The child is not likely to return to the family, so planning must address the long-term need for permanency and consistency. The foster parent may play a role in the plan to support the child's transition or may be considered as a potential adoptive placement for the child(ren) if a family plan is not able to be established. In some cases, the court may approve continued contact between the child and the parents or guardians, despite the fact that the child will not be returning to their home. This provision recognizes the significance of the child's family, regardless of their ability to live together.

- **Children from other provinces.** Sometimes children who are in care in other provinces move to British Columbia. Generally, this province assumes responsibility for their care, while the other province retains guardianship. If a child from out-of-province is placed with you, you should expect major decisions affecting their care to take longer than usual, because the child's social worker must consult with the guardian province.

Custody and guardianship

Who can make decisions and what decisions can be made when a child is in care varies considerably depending on how custody is set out in an agreement or a court order. Custody and guardianship do **not** mean the same thing.

- **Guardianship** includes all the rights and responsibilities of a parent, including making legal decisions about the child. This would include, for example, consent to medical care, to a driver's license, to marriage or to out-of-country travel.
- **Custody** includes the day-to-day care of the child and includes all of the guardianship roles and rights of a parent.

In certain cases, a director can authorize foster parents to carry out some of the director's duties regarding the care, custody or guardianship of a child. The foster parents would then care for the child as if they were the guardians, although legally they would not be. Such an authorization would be set out in your Family Care Home Agreement.

(For more information about children's legal status, see the chart "Guardianship Status and Implications for Foster Parents" in References.)

Types of family care homes

Types of care

There are five kinds of Family Care Homes: kinship (restricted), regular and three levels of specialized homes. Each has its own type of Family Care Home Agreement.

- **Kinship (Restricted)** homes care for children known or related to the foster parents. The agreement is restricted to a specific child and ends when the child leaves the home or is no longer in care.
- **Regular** homes are studied and approved family care homes. Children placed in these homes are not usually known by the foster parents.
- **Specialized** homes (levels 1, 2 and 3) care for children with moderately to extremely challenging behavioural/emotional issues or significant developmental delay. Each level has specific approval, experience and training requirements, and separate service expectations.

All foster parents receive a per-diem (per day) payment for each day a child is placed with them. Specialized family care home parents also receive a service payment that recognizes their extra responsibilities and service expectations and which also includes funds for monthly relief.

Family care homes may provide one or more of the following:

- **Short-term or temporary care.** Most foster care is given while a solution is being found for the conditions that led to the placement of the child. The intent at the time of placement is to return the child to the family. Depending on the progress of the care plan, short-term or temporary care can be as short as one day but usually is not longer than 24 months.
- **Long-term care.** This is for a child who: is in continuing custody by court order; under the terms of a Special Needs Agreement (SNA); or through the *Family Relations Act* or *Infants Act* (orphaned without a guardian). (See the chart “Guardianship Status and Implications for Foster Parents” in References.) Permanency planning, however, is a goal for all children in continuing custody.
- **Emergency care.** The family care home takes the child with very little advance notice (same day or less than 24 hours). Placement might be during usual working hours or, for those homes that are willing, late in the evening. The home is generally used while another placement is researched and found. An emergency placement lasts up to 14 days.
- **Respite care** provides a short break for parents while the child is cared for in another home. These homes provide short-term care on an intermittent basis, taking children for a day or a few days at a time (e.g., two days a week or four days a month). Note that a child is not legally “in care” in this situation. Respite is given to the child’s parents as a family-support service, governed by a Support Services Agreement between the child’s parents and the ministry. In these cases, the child’s parents retain full custody and guardianship.
- **Relief care** is similar to respite, except that the break is provided for foster parents.

Family Care Home Agreements

In British Columbia, the majority of foster homes operate under a Family Care Home Agreement. In some exceptional cases, a family care home may operate under a Client Services Agreement. You sign the agreement after your home has been approved. **Only then can children be placed in your home.** Agreements are contracts and, as such, are legally binding on both the foster parent and the ministry.

Just as there are different types of Family Care Homes, there are different types of agreements under the Family Care Home program:

- **Restricted Family Care Home agreements** may be signed for up to one year and must be renewed each year. The maximum number of children per home is six, including the foster parent's own children.
- **Regular Family Care Home agreements** may be signed for up to three years. The maximum number of children per home is six, including the foster parent's own children.
- **Specialized Family Care level 1 agreement** may be signed for up to three years. The maximum number of children per home is six, including the foster parent's own children.
- **Specialized Family Care levels 2 and 3 agreements** may be signed for up to 18 months. The maximum number of children placed in a home is three for level 2 homes, and two for level 3 homes. The maximum number of children in a home is six, including the foster parent's own children.

Agreements in levels 2 and 3 may be child-specific or bed-specific

- Child-specific agreements purchase one placement for a specific child. When the child leaves the home, notice for termination of agreement is served, unless the plan is to use the bed for another child within 30 days of the discharge of the original child.
- Bed-specific agreements are made if a home is going to be used on a regular basis, the preferred option is to contract for a specific number of placements.
- Respite agreements are used for short stays away from the child's regular home. Respite care provides the child with a brief, planned stay away from their family home and is arranged through a Support Services Agreement. When Family Care Homes provide a break for other foster parents, the service is called "Relief." (See also "Relief to foster parents" in Section 4.)

Child or youth out of home for 14 or more days for any reason

Normally, family care payments are suspended if the child is absent for more than 14 days. However, if you have any expenses related to the child during the absence, these costs may be reimbursed.

Consolidated Criminal Record Check

Caregivers need to self disclose any new charges or convictions that might arise after the initial criminal record check.

Criminal Record Check Policy and Procedures for Caregivers are now in place and apply to all criminal record checks for caregivers, including:

- prospective and approved foster parents
- prospective adoptive parents
- prospective s. 54.1 guardians
- prospective s. 54.01 guardians
- prospective and approved out of care care-providers
- prospective and approved relief care providers, and
- persons 18 years or over living in the home of a caregiver, or who spend significant and unsupervised time with a child placed in the home. This includes:
 - individuals 18 years of age and over who are visiting/staying overnight for more than 30 days in the home where the child/youth lives, and
 - anyone in an intimate partner relationship with the proposed care provider, who regularly visits and/or stays in the home where the child/youth lives

The policy requires a Consolidated Criminal Record Check be completed on the proposed care providers and on any individual 18 years of age and over who lives in the home or may have significant and unsupervised access to the child/youth.

Note: *The requirement for a Consolidated Criminal Record Check related to situations that are “significant and unsupervised” does **not** include child minding/babysitting, sleepovers and activities outside the home. In these types of situations, the foster parent is expected to act as a “prudent parent” to ensure the child’s safety.*

Individuals who are required to undergo a Consolidated Criminal Record Check (CCRC) must sign the Consent for Disclosure of Criminal Record Information Form.

The CCRC is done by the Ministry of Justice and uses data bases from both BC and Canada.

If the results are relevant to assessing the safety and well-being of a child, the information will be reviewed with the person with concerning results and together with the social worker; they determine how the information is shared with the caregiver.

The individual who is the subject of the criminal record check (i.e., foster caregiver) no longer goes to the local police station for this purpose.

Once approved, the frequency of subsequent checks for caregivers (including relief and out of care care-providers if agreements last three year or longer) and persons 18 age or over living in the home of the caregiver is every three years.

Caregivers need to self disclose any new charges or convictions that might arise after the initial criminal record check.

The *Criminal Records Review Act* (CRRA) is required in addition to the Consolidated Criminal Record Check for foster caregivers.

The CRRA applies to:

- new foster caregivers who have been approved, but before being offered a contract; and
- all foster caregivers every five years

2 • Teamwork and Planning

Importance of teamwork

Early on, the child's social worker, the child's family, you, your resource social worker and the child whenever possible will decide together who will deal with different aspects of planning for the child, as well as with specific situations such as contacts with schools.

The successful placement of a child in your home depends on several people working together. Foster parents, children's social workers, resource social workers, parents and the community all have important roles to play. It is essential to remember that the child is also entitled to be involved and consulted as much as possible.

To reach the goals set for the child's care, everyone involved in the child's care must be part of the planning and decision-making process. Planning is important because it focuses everyone involved on the issues, concerns and problems, and because it ensures that the child's needs are addressed in a way consistent with the CFCSA. Planning also helps to manage transition periods and to maintain continuity and consistency in the child's life and care.

The child's social worker has the key responsibility for planning for a child in care. However, your full participation in planning is also needed to establish a successful relationship with the child and the family. Early on, the child's social worker, the child's family, you, your resource social worker and the child whenever possible will decide together who will deal with different aspects of planning for the child, as well as with specific situations such as contacts with schools. Planning can save a great deal of confusion and frustration later on.

Children in care need to build positive relationships with their social worker and with the other members of the planning team. You can help this process by giving positive messages through your words and actions. It is also extremely important that you maintain regular contact with the child's social worker. Any proposed new activity or change in the child's life – such as community participation, vacations or a change of school – must be discussed with the social worker ahead of time.

The child's parents or family members will usually take part in planning. The more they can be involved, the more likely they are to be positive toward planning goals, work well with the other team members, and successfully maintain independence when the child returns home. Having a major say in the goals set for the child is the parents' right as well as a necessary, natural part of caring.

In most cases, foster children use local health resources, community agencies and public schools. Children who have special needs such as physical disabilities, developmental delay, or behavioural or emotional problems may require specialized services. People who supply these services then become part of the team working for and with the child and the family.

The pre-placement period

When selecting a foster family for a particular child, the social worker looks for a home that is most likely to serve the child's particular needs. The child's best interests are foremost in all decision making, as is required by the *CFCSA*. The child's interests must be considered before those of any person who wishes to care for the child.

If the child is Aboriginal, their social worker **must** consider the importance of preserving his or her cultural identity, which is part of the child's best interests in the *CFCSA*. Whenever possible, the social worker will arrange a pre-placement visit by the child to the foster home.

Background information

When a child is referred to your home, you are entitled to all the known background information about them and their family relevant to the care of the child. There is a form for this purpose; the child's social worker will give you a copy. If the child is in care of a director through agreement with the parents, you will also receive a copy of that agreement.

If the background information includes, for example, a child's history of making false allegations of abuse, their social worker tells you and includes this history in the planning document. The same is true if the parents or extended family are known to make false allegations or seek inappropriate contact with foster parents.

If the child is not previously known to the ministry/DAA, the information may be limited. The "Foster Parents' Pre-Placement Checklist" lists questions you might want to ask the social worker if you need more information (see References).

It is essential, of course, that the confidentiality of information given to you about the child and their family be respected and protected. Other people, including other children living in your home, should be given only information that affects their safety and well-being or the safety and well-being of others. If you have any doubt about what information is confidential, speak to the child's social worker.

What to consider before accepting a child into your home

Keep in mind that you can say no to a placement, and you can discuss any concerns about a particular placement with your resource social worker.

Foster families should be realistic when deciding whether a child would thrive in their family, and what supports or adjustments would be required. Your family should also recognize their strengths and limitations. For example, some families are good at fostering youth, while others do best with children who have particular types of interests or personality.

The pre-placement period is crucial to the success of the placement. This is the time for you to be open with yourselves, the child's social worker and your resource social worker about feelings and possible doubts regarding the proposed placement. The decision to accept a child should involve all members of your family. You will need sufficient time to consider the adjustments needed in your personal and family routines.

Remember that you can say “no” to a placement, and discuss your concerns about a particular placement with your resource social worker. Such a discussion might lead to a decision not to place a particular child in your home, or it could mean that further planning is needed prior to such a placement.

The child’s Plan of Care

The child’s social worker involves the child, whenever possible, the foster parents and their resource social worker and, if appropriate, the child’s parents in the development of a plan to meet the child’s needs. A plan to meet the child’s immediate developmental needs is created for children in care for less than six months; a comprehensive Plan of Care is completed for children and youth in care for six months or more. These plans are regularly reviewed and updated in response to changes in the child’s needs and development.

A number of people are entitled to participate in the Plan of Care meeting:

- the child, if they are 12 or older, or if they are under 12 and want to participate
- the child’s family
- a support person for the child, selected by her or him
- the child’s social worker and the resource social worker
- the foster parents
- any foster family members who are directly involved in the child’s care
- if applicable, a representative of the child’s Aboriginal community
- service providers involved with the care of the child

Other people with information that will help in planning may also be invited to the meeting, or at least to that part of it that relates to their information.

The Plan of Care is intended to be comprehensive and in most cases will focus on return of the child to the birth parents. If this is not possible then the Plan of Care will outline efforts to support the child or youth in other ways, including:

- placement with relatives
- placement within the child’s Aboriginal community
- “substitute care,” meaning foster care or specialized residential care
- independent living for youth 16 to 18 years old, meaning living without in-home adult supervision (room and board, rental, shared accommodation)
- adoption or other permanency plan

Keeping records

The **Plan of Care** will also contain plans for:

- placement of the child
- the child's emotional and developmental needs
- preserving the child's family and social relationships
- the child's health needs
- the child's educational needs
- the child's cultural heritage
- social and recreational opportunities
- religious heritage and activities
- any other matters of significance to the child

Even if the child does not attend the meeting, they are entitled to have the plan explained to them and to receive a copy. You receive a copy as well. You, the child's social worker and your resource social worker will discuss the plan and how it will be communicated to the child in your home. These discussions may include the family and the child when appropriate. The child's social worker keeps the child informed about all changes to their Plan of Care as they are made.

Caregiver's responsibilities

The caregiver's responsibilities will be outlined in the child's Plan of Care, which describes how the child will be cared for and supported in your home and in the community. It describes your role in achieving the objectives identified for the child in their Plan of Care.

The caregiver's responsibilities are discussed when the child arrives in your home and are revised whenever there is any significant change in the child's circumstances, or when the original plan is no longer accurate. The plan is reviewed and revised by you, the child's social worker, your resource social worker and the other members of the child's care team as part of the review of the Plan of Care.

Infants living with foster families

The sleeping arrangements for infants and young children need to be specified in the child's Plan of Care. Ministry Standards for Foster Homes (www.mcf.gov.bc.ca/foster/pdf/standards_foster_homes.pdf) require that all children in care sleep in their own bed, crib or cradle that meets all safety regulations. In general, infants and children in care sleep in their own bedroom.

Always put the baby on his or her back to sleep. This is very important!

In some situations it may be beneficial for infants under one year to sleep in a crib in the same room as the caregiver. This is referred to as co-sleeping; however, foster parents do not bed-share with an infant. Foster parents must discuss any changes to the infant's sleeping arrangements with the child's social worker and their resource social worker for inclusion in the Plan of Care.

Things you can do to keep the infants you care for safe:

- **Always put the baby on his or her back to sleep. This is very important!**
- The baby should sleep on a firm, flat mattress.
- Use a crib that meets safety standards.

Safe Sleeping for Babies brochure link:

<http://bcfosterparents.ca/wp-content/uploads/2013/03/Safe-Sleeping-For-Babies.pdf>

Caregiver service records

Record keeping is an important part of your Agreement with the ministry.

Recording is essential because it:

- maintains a permanent record of the child's time in your home and in care
- helps with planning for the child
- helps in discussion with the child's social worker
- documents changes in behaviour over the period of time the child is in your home
- documents the child's experiences in your home, which can help them in later years to understand their time in care

Keep a separate, confidential record for each child and store it somewhere private and secure.

Keep a separate, confidential record for each child and ensure it is stored somewhere private and secure.

Ideally, you should make daily entries about the child's progress and daily routines. As a minimum, you must record all significant events, and notify the child's social worker as soon as possible. Significant events include:

- visits with birth family
- school-related issues
- health care issues
- unusual behaviour or behavioural changes
- positive achievements by the child
- changes in the child's circumstances or routines
- an incident or development that might put the child at risk of harm
- unauthorized absences from your home

Most caregiver service records are considered "documents" under the Family Care Home agreement and "records" under the CFCSA. As such, they are not your property and are handed over for storage and safekeeping at the end of a child's stay in your home.

Health Care Passport

Each child in care has a Health Care Passport in which you record all significant health information. This workbook will give you quick access to the child's health history and information. It is your responsibility to keep the passport up to date. (See "Medical and dental care" in Section 3.)

The Life Book

A Life Book is an informal record of the people and events in the child's life while they are in your care. Life Books give children a sense of personal history and continuity.

Every child who is likely to remain in care for more than six months has a Life Book. It is jointly maintained by the child's social worker, the child and you. You will usually look after the book. When a child leaves care, the Life Book is given to them.

These are some items that might be included in a child or youth's Life Book:

- photographs, including dates and names of those in the pictures
- souvenirs
- names, addresses and pictures of the foster family
- report cards
- certificates of achievement
- letters from friends and relatives
- souvenirs from trips, concerts, sporting events and so forth
- badges and ribbons
- school products or projects

Consider keeping a photo album or scrapbook for mementos and activities for children in respite care or in your home briefly to commemorate their time with you. If children stay in care longer than expected, you will have a good start on their life book and their story will have continuity.

3 • The Child in Your Home

Understanding the child

Abused children often do not interpret family routines and traditions, gestures, comments or ways of communicating in the same way your children do, or the way you might expect.

As experienced foster parents know, there are important differences between the experiences of children in care and those of their own children. One basic difference is the shock of separation the child is experiencing by living in a foster home. While children are individuals and will show the effects differently, we know that children removed from their homes go through aspects of the grieving process. We also know that all children in care have an attachment to their families, regardless of the situation that brought them into care. A child showing ambivalence and grieving in your home is normal and is not an indication that you are not doing a good job.

Another significant difference is seen when a child has been subject to physical, emotional or sexual abuse. Some children in care have experienced abuse, and a small number have abused other children as well.

Because of their painful and traumatic experiences, abused children often do not interpret family routines and traditions, gestures, comments or ways of communicating in the same way your children do, or the way you might expect. What might seem innocent and normal to a child brought up in a secure, loving environment – such as a hug, a joke, a light-hearted wrestling match – might be frightening and full of emotional significance to a child who has been abused.

This does not mean that you shouldn't include foster children in normal family activities. It means that you must be aware of the child's background as much as possible, and be sensitive to any signs of trauma, discomfort or fear. If these signals are ignored or missed, they can have serious consequences for the child, the foster family and the child's continued stay in your home. For example, a child or youth might suddenly show discomfort in your home, or loss of confidence in themselves or in you as a foster parent. Trauma or fear might also show up as anger or behaviour that seems out of proportion to the situation at hand. The child might interpret some action of yours as a repeat of adult behaviour they have experienced before, which might lead to allegations of inappropriate behaviour or sexual abuse.

The child's social worker and your resource social worker can help you plan your care in a way that takes these issues into account. They should be discussed in developing the Plan of Care and included in the caregiver responsibilities section. The following are a few guidelines:

- Be conscious of your family's routines; behaviour can be misinterpreted by newcomers.
- Dress appropriately. What your family may be used to in terms of modesty, after bathing or before bed, may be interpreted differently by the child.

- Plan sleeping arrangements with care. For example, placing your teenager and a teen foster child of the opposite gender in adjoining bedrooms may not be a good idea.
- Be careful when helping with children's personal hygiene. Any touching you might interpret as normal, they might interpret as abusive or sexual.
- Be aware of any time spent alone with the child. Although special time for the child is a positive thing, it is possible for misunderstandings to arise about your intentions or motivations.

It may seem an impossible task to think about caring for and nurturing foster children while also being so cautious about how you relate to them. But it can be done.

- Try to look at your actions as if you were watching from outside. Are they rational and easily explained, and would they make sense if explained to someone else?
- Be very aware of children's reactions to you and your family. It may be that no one except the child knows about the child's past abuse or trauma. Don't assume they will interpret your behaviour in the way you intend.
- Establish a regular daily routine of checking with the child to ensure they are safe and feel secure.

What you should know about past abuse

If the child being placed in your home has been abused in the past, you need to know a number of details. This information can usually be obtained from the child's social worker. Knowing these facts will help you avoid unintentionally making the child uncomfortable or causing them to recall past abusive or traumatic experiences:

- *Who was the abuser?* Was the abuser an adult or teenager? Male or female? Babysitter or friend?
- *Where did the abuse happen?* Did it take place in a particular room of the house? Outside the home?
- *When did the abuse happen?* Did it happen during bath time? At bedtime? During the night? When the abuser had been drinking?
- *What was the abuse?* Was the child physically, emotionally or sexually abused?
- *How was the child abused?* Were there threats or use of a weapon or implement? Did the abuser follow a particular routine?

Once you know about the child's experience with abuse, it is much easier to avoid replicating the circumstances the child associates with it.

Your relationship with the child's family

You must demonstrate a positive and respectful attitude toward a child's family, while helping the child to be realistic about its strengths and weaknesses.

As foster parents, you are encouraged to maintain contact with the child's family when this is part of the child's Plan of Care. Dealing with issues of separation from their family is important for all children in care. There is a special legal importance when the parents continue to be the legal guardians.

The birth family includes the child's parents or guardians at the time they came into care. It also includes brothers, sisters and significant extended family members. Their family is extremely important to the child. Regardless of how children come to be in foster care, most want to return home. You must demonstrate a positive and respectful attitude toward a child's family at all times, while helping the child to be realistic about its strengths and weaknesses.

The relationship between foster and birth families can take many forms. It can be close and cooperative, tense and strained, or anything in between. If you can maintain a close relationship with the child's family, you will find that the child is the main beneficiary.

If the relationship is neither strong nor positive, you may find it hard to understand the CFCSA's emphasis on maintaining a continuing role for the child's family. As in any strained relationship, disagreements can become personal, and you may feel that the child's family is undermining or undoing all your good work.

There is no simple way to resolve these tensions. Understanding, empathy and communication are the best tools you can use to build a more positive atmosphere. Try to understand the parents' feelings and their own experience of loss, trauma and shame, and how that might be influencing their behaviour toward you. These feelings may come out in a variety of ways – in anger, competitiveness, or criticism. Do your best to maintain a professional relationship, to model positive parenting of the child, to demonstrate good methods of dealing with children's behaviour and needs, and to communicate as honestly and supportively as you can.

Visits help children see their families realistically.

Home visits

One of the best ways for children to maintain contact with their families is through home visits. Visits help children see their families realistically. Without contact, children may develop or hang on to exaggerated ideas about their families, whether positive or negative. Visits also reassure children that their families are still a part of their lives, and help them adjust to having two families now.

Whether your relationship with particular families is positive or difficult, it is important for you to be sensitive to the children's past experience of trauma, changing emotional states, to their feelings toward family relationships and to the ongoing nature of their relationships with family and kin.

Before the child's visit, it is useful to talk to their social worker about the following:

- the location and length of the visit
- how food and gifts will be handled; most parents want to give material things to their children
- how to give the child and parents some privacy if visiting in the foster home

Some Agreements (particularly those for specialized care, levels 2 and 3) specify that the foster parent will supervise visits between children and their families. In other situations, the child's social worker may ask a foster parent to play a particular role in the visits.

In any circumstances in which there may be some risk to anyone involved in the visit – including the child or the foster parent – it is a good idea to discuss with the child's social worker who is to attend and supervise the visit. If possible, visits should be arranged for times that do not disrupt the regular activities of your family.

Rights of children in care

Children in care have special legal rights under section 70 of the *CFCSA*, such as the right to privacy and to be free from physical punishment (see Reference section for further details). These rights **must** be upheld. Although most foster families take the safety and security of their family for granted, children in care are more vulnerable and require certain guarantees to ensure they receive good parenting. The legal rights of children in care ensure certain basics of care are provided to them. Most foster families, looking at the rights of children in care from the perspective of ensuring a child's safety and well-being, will find that upholding these rights is not difficult.

If you have any questions about the rights of children in care, speak to the child's social worker. They are responsible for ensuring that the child understands their rights and that these rights are upheld, and they require your assistance in meeting this responsibility.

The following topics regarding care of the child are directly linked to the rights of children in care.

Smoke and vapour free environment

B.C. introduced a smoke and vapor free policy for foster homes to help ensure the health of children and young people in government care. A smoke and vapor free environment means no smoking or vaping (including but not limited to tobacco, cannabis, and e-substances) in the home or vehicle at any time – and this applies to every person living in or visiting the home. The ministry recognizes that many foster parents are already mindful of the harmful effects of second-hand smoke and vapor and prohibit smoking and vaping in their homes and vehicles.

The policy does not restrict spiritual or cultural activities relating to the use of tobacco.

When you avoid tobacco products and keep your home smoke-free, you are choosing a lifetime of health and well-being for your foster child.

This policy does not require foster parents to quit smoking. However, foster parents and other smokers in the home who wish to quit smoking can access support through QuitNow (www.quitnow.ca/tools-and-resources/index.php), a free 24 hours-a-day service operated by the BC Lung Association on behalf of the Ministry of Health. QuitNow is an internet-based program providing tools, expert advice, e-mail support, and chat lines to help you successfully stop smoking. QuitNow also provides a telephone counselling service available 24/7 and staffed by registered nurses. Call toll-free at 1-877-455-2233.

The requirement for a smoke-free environment is included in the Standards for Foster Homes (www.mcf.gov.bc.ca/foster/pdf/standards_foster_homes.pdf) and the Caregiver Support Service Standards (www.mcf.gov.bc.ca/foster/pdf/sp_caregiver_support.pdf). More information about the policy can be found in the following material:

- Questions and Answers for Foster Parents
www.mcf.gov.bc.ca/foster/pdf/qa_foster_parents_nov_08.pdf
- Questions and Answers for Youth
www.mcf.gov.bc.ca/foster/pdf/qa_youth_nov_08.pdf

Discipline and positive parenting methods

The *CFCSA* explicitly forbids the use of corporal punishment for any child in care.

Children in care have the right to know what standards of behaviour you expect of them, and the consequences of not meeting those standards.

The more that children are involved in discussing and setting the rules, limits and consequences that affect them, the sooner the child or youth will be able to understand and accept the foster family's routines and expectations. Children who are able to establish a relationship of trust and respect (rather than follow rules through fear of punishment) are less likely to misbehave.

The CFCSA explicitly forbids the use of corporal punishment for any child in care.

Discipline versus punishment

Foster parents should know and model the difference between discipline and punishment. Discipline teaches children how to develop self-control and be responsible for their own actions. Punishment, on the other hand, tells children in a painful way – and after the fact – that a bigger, stronger person doesn't like something they did. Punishment is a means of control.

Children in care need secure, stable and loving environments. Those who have been abused tend to regard physical punishment as a sign of rejection as well as anger. A great deal of research indicates that physical punishment of children is related to their later aggression toward others.

The *CFCSA* explicitly forbids the use of corporal punishment for any child in care. Corporal punishment means using physical force that may inflict pain, such as spanking, slapping or hitting.

Other inappropriate punishments include, but are not limited to:

- depriving a child of basic rights or needs like food, clothing, shelter, bedding, or access to their parents or guardians
- denying visits, or phone or mail contacts, with family members not identified in the child's Plan of Care
- threats of removal from the foster home
- assignment of inappropriate or excessive exercise or work
- undue influence over the child's religious or personal beliefs
- physical punishment including shaking or forcefully pushing the child
- degrading actions including humiliation, ridicule or verbal abuse
- group punishment for individual behaviour
- seclusion or confinement – defined as containment of a child within any space from which the child is not able to exit without the permission of another or within which his or her movements may be restricted
- being punished by another child

There are **no exceptions** allowed for the above practices.

Physical restraint, other than for the immediate safety of the child or another person, or as specified in the child's Plan of Care (created in consultation with, and supervised by, a professional person who is a recognized expert in child care), is also inappropriate punishment.

Restraint is the act of intentionally restricting a child's ability to move. If the need to restrain a child in your home for the immediate safety of the child or another person occurs, you must report the situation and discuss it with the child's social worker and your resource social worker **immediately**.

Appropriate discipline techniques include:

- talking through issues
- praising and encouraging
- modelling rules
- establishing clear and consistent expectations
- removing issue-related privileges
- allowing children to experience the logical consequences of their actions

The use of time out is an option as long as the child is not confined as described in seclusion or confinement above. Consider the use of "time in" practices.

You are encouraged to talk to the social workers about discipline techniques, training needs or any other issues relating to the care of the children in your home.

Privacy and personal possessions

Children in care are entitled to the same degree of privacy that reasonable parents would grant to their own children. The child's age, capacity and living arrangements are factors to consider in determining what is "reasonable."

Provided their **safety and well-being** are not endangered, children in care are entitled to:

- reasonable privacy in using the telephone
- reasonable privacy in using the bathroom
- receive mail unopened
- reasonable security and privacy in their personal belongings

The right to possess personal belongings means that children in care:

- should have appropriate luggage, along with a place to put it and their other belongings
- may refuse to share their belongings with others in the home
- may insist that others in the home treat their belongings with respect
- may take their belongings with them when they move or leave care

This right is subject to criminal law. It does not apply if a personal possession threatens the safety of the child or another person, or if receiving or possessing something (e.g., a weapon, narcotic or stolen merchandise) is against the law. In such a case, **the foster parent notifies the child's social worker** who arranges for confiscation of such possessions and notifies the police when required.

If the foster parent has reason to suspect the child has possession of something contrary to criminal law, **the foster parent notifies the child's social worker** who may search the child's belongings. The child should always be present during the search unless waiting would place someone else's health or safety at risk.

Education

Children in care are expected to go to school, just as other children do. The Plan of Care will guide the degree to which you are responsible for making decisions about the child's education. When children are in care by agreement, their parents may keep the responsibility for making most decisions. Depending on the Plan of Care, you may be responsible for:

- enrolling the child in school
- telling the teacher that the child is in care, while respecting the confidentiality of information about the child
- supporting the child to achieve their learning goals and assisting with homework completion
- signing report cards and going to parent-teacher meetings
- encouraging the child to take part in extra-curricular activities (but not so often as to deprive the child of normal, relaxed family living)
- discussing learning and social problems with the teacher or counsellor

If the placement has caused a change of schools, you should help the child as much as possible to adjust to the new school and new friends. You should also

be on the lookout for school performance difficulties and other school-related problems, and alert the child's social worker so that the problem can be discussed and addressed. Assist and support the child in maintaining friendships and important relationships from their previous school.

Staff from the school, including the classroom teacher, special education staff, principals and counsellors is often part of the team planning for the child.

Funding and special arrangements

Normally, children in care will go to the local public schools. If there is a clear need or benefit to the child, the ministry may provide funds for private tutoring by qualified people. Only in unusual circumstances will the ministry authorize other educational plans, such as attendance at a private school or schooling a child through correspondence.

You pay for school supplies required by the school and for all school activities for which a fee is charged out of the family care rate. In exceptional circumstances, additional funding may be available through a "one-time-only" grant.

Funding may be available for continued education or training in university, college or vocational schools after the child is 16. In some cases, Aboriginal children may be eligible for funding from their band or the federal government.

Computer placement and internet safety

Children and youth in care will often require access to a computer to help them research and complete school projects and other homework assignments. This will usually involve accessing a variety of websites on the internet. Foster parents must ensure that a computer accessed by a child or youth in care is placed in a central location, such as the kitchen or living room.

Acting as a prudent parent, foster parents must ensure that they monitor computer use in their home and are aware of the information being accessed by children and youth in care. The following site provides "Web aware" checklists and tip sheets:

[http://mediasmarts.ca/teacher-resources/find-lesson?province=All&grade=All&subject=All&type\[\]=tipsheet&m=preset](http://mediasmarts.ca/teacher-resources/find-lesson?province=All&grade=All&subject=All&type[]=tipsheet&m=preset)

Cultural identity and religion

While efforts are made to consider culture identity and religion when placing a child, often the child and the foster family have different religious beliefs or cultural practices.

It is important that you and your family respect the culture and religion of any child in your care, and that you find ways of making that child feel comfortable in your home. At no time should you try to impose your own religious beliefs on the child.

With the growing diversity of cultures in our province, the need for respect and inclusion of all members of our society – regardless of culture, race, ethnic origin, language or ability – becomes more and more important. Foster care must mirror this spirit of inclusion.

When a child is in care, consider his/her family history, language, customs, spiritual beliefs, views and values as elements of the child’s culture and identity. Services to a child or youth in care must be sensitive to and respectful of these areas including providing services that respect and support the child’s understanding of and connection with the culture and community he or she identifies with (e.g., communities of interest such as the gay community). People from the child’s community are included in the planning and delivery of services.

For Aboriginal children in care, it is essential that their cultural practices be included in planning.

When Aboriginal children have to be away from their families, it is important for them to live with an Aboriginal foster family – ideally, a family from the same nation as the child. Staying with an Aboriginal family helps children stay connected with their culture and feel more at home. We know from both research and experience that children who grow up attached to their culture do better as adults.

Living with an Aboriginal family will help Aboriginal children connect and learn about their history and practice their culture. When this is not possible, every effort is made to develop cultural plans that connect the child or youth to their families, community and cultural practices.

Delegated Aboriginal Agencies in B.C. have processes in place for the recruitment, retention and training of Aboriginal foster parents. For further information, contact the DAA in your area. A list of agencies can be found at: www.mcf.gov.bc.ca/about_us/aboriginal/delegated

Children in care can be vulnerable to racism and discrimination and action must be taken to address circumstances when a child in care is harmed by it. Talk to your child’s social worker and depending on the child’s circumstances, this action may range from educating those involved to possible legal action to address the discrimination.

Health supports for children and youth in care

The child’s social worker is responsible for ensuring that children and youth in care have access to necessary health supports and services.

Information for guardianship and resource social workers, foster parents and health care professionals to assist them in meeting the health and developmental needs of children and youth in care is provided in detail in the guide below. Specific areas covered in the guide include: medical coverage, dental and orthodontic benefits, optical benefits, medical supplies and equipment, assessment and developmental supports and mental health services.

If you have any questions about the supports described in the guide, please speak directly with the child’s or youth’s social worker for further information. www.mcf.gov.bc.ca/foster/pdf/health_supports_cic.pdf

Medical and dental care

...it is always preferable for children in care to receive care from their primary physician whenever possible.

Medical appointments

- Make sure you know the name of the child's primary physician. Although the use of walk-in clinics may be necessary at times, it is always preferable for children in care to receive care from their own doctor whenever possible. This helps ensure better follow up with the child, and more complete medical records.
- If a walk-in clinic is necessary, make sure to request that a copy of the child's medical report be sent to the child's own doctor.
- If a youth seeks medical assistance on their own, encourage them to go to their own doctor, or if they go to a walk-in clinic to have a copy of their medical report sent to their doctor.

Each child in care has a Health Care Passport, a workbook in which the foster parent records all important health-related information about the child. The basics to remember about medical and dental issues are:

- Talk to the child's social worker who is authorized to give consent for routine, special or emergency medical care.
- Advise the child's social worker if the child requires medical attention or treatment. (You should do this before treatment; if in special circumstances this is not possible, tell the social worker as soon as possible afterwards.)
- Immediately advise the child's social worker of any emergency medical needs of the child. The child's social worker can give you a number to call about medical emergencies (including authorization for treatment) outside office hours.
- Do not pay for any medical services (e.g., doctor, hospital, prescriptions, glasses) unless the child's social worker gives prior authorization.
- Do not involve any child in care in medical treatments or therapies that are not approved by a physician and authorized through the Medical Services Plan or PharmaCare. If you believe there are exceptional circumstances in which an alternative therapy might be appropriate, you **must** receive approval from the child's social worker.

All children entering care and many children leaving care will have a medical examination. Check with the child's social worker to ensure that this has been done or scheduled. If not, you may ask them to make the necessary arrangements, or get permission to do so yourself. Children should receive an annual checkup.

Emergencies

You must notify the ministry immediately of any emergencies that seriously affect children in care. Such emergencies include medical crises, accidents, arrests for juvenile crimes, and death. Always share important information with the child's social worker, but remember that emergency situations require an immediate response. www.mcf.gov.bc.ca/foster/pdf/foster_parents_emergency_info.pdf

Call the local district office or your DAA to reach the child's social worker. If the social worker is not available, talk to the intake worker or the worker's immediate supervisor.

When an emergency happens outside office hours (normal hours for ministry offices are 8:30 a.m. to 4:30 p.m., Monday to Friday), phone the ministry's After Hours Line:

- In Vancouver, the North Shore and Richmond, call 604-660-4927.
- In the Lower Mainland from Burnaby and Delta in the west to Maple Ridge and Langley in the east (all within the Vancouver free-calling area), call 604-660-8180.
- For the rest of the province, call toll-free at 1-800-663-9122.

For other emergency phone numbers see the **Quick References** section.

When a child/youth is missing

When a foster parent has reason to believe that a child or youth in care is missing the following steps must be taken immediately.

Responding when a child or youth's whereabouts are unknown and there are no additional concerns about the child or youth's safety

When a child or youth is unreasonably late coming home the caregiver will take the same actions as a prudent and responsible parent would including trying first to locate the child or youth prior to contacting the social worker/Centralized Screening,¹ or Police/RCMP.

Actions taken by a prudent and responsible parent in an effort to locate a child or youth include, but are not limited to the following:

- actively trying to contact the child/youth directly via their cell phone, etc.
- actively seeking out and contacting anyone, such as friends, coaches, or teachers of the child/youth, who may know the child/youth's current or recent whereabouts; and
- identifying and checking likely locations where the child/youth may be.

Note: A youth on probation who could harm or put others at risk **must** be governed by the rules of their probation with regards to time away from a resource, or required check-in. If a youth breaches their probation, the youth's social worker/Centralized Screening or Police/RCMP **must** be contacted immediately.

Responding when a child/youth's whereabouts are unknown and there are additional concerns about the child/youth's safety

The following factors are considered when determining if the child/youth is **unsafe**:

- vulnerability (e.g., due to: age or level of development, physical or cognitive disability, addictions or mental health concerns or involvement in high risk activities);

Definition of Missing

Child/Youth: any child or youth in care including respite care, whose whereabouts are unknown **and** there are concerns about the safety of the child or youth.

¹ Centralized Screening replaces all previous references to After Hours or Provincial After Hours

Note: The full Missing Children and Youth Policy and required Procedures is found on pages 81-82 of the Reference Section.

- the mental or emotional state of the missing child/youth (e.g., emotionally distraught, suicidal or likely to cause harm to self or others);
- extreme weather (no coat, boots, etc.) or other physical conditions (e.g., terrain);
- any suspicious or dangerous circumstances surrounding the child/youth's disappearance, which suggest the child/youth may be the victim of a crime;
- it is out of character for the child/youth to be missing;
- there is reason to believe that the child/youth may have been involved in an accident or mishap;
- the whereabouts of the child/youth have been unknown to the caregiver/care provider overnight.

If the child or youth's whereabouts are unknown and there **are** additional concerns about their safety, he or she is considered to be *missing* and the caregiver/care provider, the child/youth's social worker or Centralized Screening will immediately call the Police/RCMP to report a missing child/youth in order for the police to take action to locate the missing child or youth.

When a foster parent or foster family member is injured

If you or a family member is physically or psychologically injured because of an assault by a child in care or a member of the child's family, notify the child's social worker as soon as possible. A social worker will be assigned to assist your family in dealing with the incident.

Standard Precautions

Although the child's social worker seeks to get as much medical information about children in care as they can, it is sometimes not possible to know everything about a child's medical status. For this reason, it is recommended that foster parents use Standard Precautions when providing physical care for children in care.

Standard precautions (formerly known as Universal Precautions) are the steps that should be taken to protect everyone when they are exposed to the blood or body fluids of other people. Standard precautions are intended to stop the spread of infection to others.

For more information about Standard Precautions, please contact your resource social worker or the child's social worker; or go to the Standard Precautions Health File at the Ministry of Health website.

Legal status and medical care

At the time a child is placed in your home, find out who is authorized to give consent for routine and emergency medical care. Whether it is the parent or the child's social worker depends on both the child's legal status and the provisions of any agreement or court order.

For children in continuing custody or in the care of a director through the *Family Relations Act*, the *Infants Act* or the *Adoption Act*, you can arrange all routine

medical services yourself. However, planned treatment or surgery usually needs to be authorized by the child's social worker.

www.mcf.gov.bc.ca/foster/pdf/health_supports_cic.pdf

A note about the Infants Act

Under the *Infants Act*, a child capable of making an independent and reasonable decision may consent to medical treatment without guardian or parental consent. Doctors must decide if the child has the ability to consent to their own medical treatment.

Even if a child is judged to have this ability, these decisions are often very difficult. In such cases, you should give children information and other support to help them make decisions that are in their best interests. Other people on the care team can also help the child with these decisions. Since you are often closest to the child on a day-by-day basis, you should alert others to help the child as appropriate.

Birth control and pregnancy

Instruction in birth control and planned parenting is to be provided for all adolescents in care. The child's social worker should discuss with you who will provide this instruction.

If a pregnancy occurs, inform the child's social worker so that immediate counselling can be arranged. Depending on the adolescent's legal status, the parents may be involved along with the adolescent and physician in assessing the options and creating a plan. (See also "Children in care with infants" in Section 4.)

Dental care

Children in care require dental examinations every six months and receive basic dental care as required. The child's social worker will give you a Pacific Blue Cross benefits card. You simply make an appointment with the child's dentist and present the benefits card at the time of the visit. The dentist will bill the ministry.

Orthodontic work is available for children and youth with continuing custody orders. Please check with your child's social worker if you are not sure about the legal status of the child in your care. www.mcf.gov.bc.ca/foster/pdf/cic_dental_guide.pdf

Eye care

For an eye examination by an optometrist or ophthalmologist all that is required is the child's personal health number. If the child you care for needs glasses, please contact the child's social worker who can tell you how the ministry's optical plan works.

Other medical needs

For other special medical needs (e.g., prostheses, transportation, special diets), check with the child's social worker.

Transportation, travel and vacations

Transportation refers to getting around the community or area where the child lives. In an urban area, transportation might involve several different communities. In more remote communities, it may include only one.

Travel refers to trips outside the community or area where a child's normal activities take place. **Whenever plans are made for a child to travel out of the community, you must consult the child's social worker beforehand.** Travel outside the province or country requires written authorization from the child's social worker.

Most transportation guidelines apply to cars or public transportation, while travel also includes trips by train, overland bus or airplane. If a car is used, the following safety conditions apply:

- the driver must have a valid Class 5 licence or a valid Class 7N licence with full adherence to **all** additional graduated licencing conditions
- the car must be reliable and mechanically sound and safe
- the car must be maintained and operated in a safe manner
- whenever possible, children should sit in the middle seat in the rear of the car as front seats are more dangerous
- children must wear seat belts or be seated in properly installed child car seats or carriers
- the car must be insured for at least one million dollars in third-party liability

Note: A Class 7N driver is permitted to operate a motor vehicle alone or with one passenger only (immediate family exempt) unless with a supervisor age 25+ with a valid Class 1, 2, 3, 4 or 5 licence, must have no blood alcohol and cannot operate any electronic device, including hands-free and must display the "N" sign at all times.

Safety restraints

It is the **law** in British Columbia that all children must wear seat belts or be properly secured in certified child restraint systems (car seats/booster seats).

All infants/children must ride in a rear facing car seat until they are a minimum of 20 pounds (9 kg) **and** at least 1 year of age. Children who are at least 1 year of age, weigh at least 20 pounds (9 kg), but less than 40 pounds (18 kg) must ride in an appropriate car seat.

Children must ride in a booster seat until they are a minimum of 4 feet, 9 inches (145cm) tall, **or** a minimum of 9 years old.

All other children are to be restrained by the vehicle seat belt. All children 12 years and under should be properly restrained in the back seat. It is the safest location in almost all car accidents. Follow the manufacturer's instructions if you drive a pickup truck and ensure air bags are disengaged if a child must be transported in the front seat.

Never place a rear-facing child seat in a vehicle seat equipped with an air bag. Injuries or death may result if the air bag inflates and impacts with the child seat.

Transportation expenses

The child's share of regular family transportation costs is covered in the family care payment. If extraordinary transportation costs are part of the child's Plan of Care (e.g., for frequent medical or educational trips outside the local area), discuss this with the child's social worker and your resource social worker.

Escorts or volunteer drivers

When foster parents cannot travel with the child, the child's social worker may arrange for a volunteer driver or escort and for reimbursement or payment of actual expenses. The child's capacity and abilities must be assessed if they are expected to travel alone.

Air travel

Occasionally it may be necessary for a child to travel by air. Travel must be prearranged with the child's social worker. Talk to them about payment for the ticket, ticket pickup, transportation to and from the airport, and the travel schedule.

Letter of authority to travel out of province

A child in care must not travel out of the province unless their social worker issues a "permission to travel" letter, giving authority for the child to be outside the jurisdiction of British Columbia. The letter will state the child's legal name and status, and give authority for travelling. For children in care by agreement, written authority to travel must also be received from their parents or guardians.

Passports and visas for international travel

No child in care may travel out of the country without the approval of their social worker. For a child in care by agreement, their parent or guardian must apply for the passport (in practice, this may only mean signing the form). For a child who is permanently or temporarily in care, the foster parent or the social worker may fill out the application.

If you make the application, the social worker will need to provide you with a letter of permission for you to apply for a passport for the child. In either case, the application is submitted to the passport office, along with the necessary photos, child's birth certificate, letters of authority and money order.

Travel Medical insurance

Foster parents or children's social workers arrange for additional medical coverage if a child is travelling outside the province. If you purchase the insurance at a travel agency or insurance company, discuss the possibility of reimbursement with the child's social worker and your resource social worker.

Vacations with the foster family

If you intend to take the child on a vacation out of the province, you must inform their social worker. Be sure to do so far enough in advance so that there is time to obtain any necessary authority, including the permission of the child's parents, if required.

Normally, the family care payment includes the child's share of family vacation costs. Financial assistance may be available for unusually expensive trips.

Summer camp

Registration in a summer camp must be authorized by the child's social worker and approved by the child's parents, if they retain guardianship. If the camp costs more than you can reasonably pay through the family care payment, the child's social worker may be able to arrange payment for camp fees and camping equipment. Foster parents may sign waivers of liability for negligence. (See Standards for Foster Homes for more details.)

Wilderness and other outdoor activities

Children in care may not participate in high-risk activities without the written authorization of their social worker and the consent of their guardians. You and the child's social worker must jointly make sure that any wilderness or other outdoor activities for foster children are organized and conducted safely. Foster parents may sign waivers of liability for negligence. (See Standards for Foster Homes for more details. See also the information on hunting under "Civil status, licences and legal matters" later in this Section.)

The young person's finances

Among the most important goals for young people in preparing for their independence is to gain an understanding of money and have their financial affairs in order when they leave care. The following guidelines support these goals.

Allowances

Many children come into care with no experience of having money or savings. Spending allowances, no matter how small, are important to children both for themselves and as a way of learning about how money works in society. The monthly family care payment includes a spending allowance for the child. It is up to you to decide how much that allowance will be, and to discuss with the child how the money can be spent appropriately.

Earnings

Older youth in care sometimes have part or full-time jobs, which can be a valuable help in preparing them for independence. If a young person in your care has a job and is living in your home, discuss with them and their social worker: how much of the earnings should be saved and to what purpose?

If the youth is not going to school and not saving for a particular goal, develop a plan with the youth and social worker, for the youth to contribute to their own self care, clothing and perhaps transportation.

Estates and trusts

Children sometimes have estates (inherited money or other assets) or money set aside for them by parents or other relatives in the form of trusts. The Public Guardian and Trustee manage the estates and trusts of children who are permanently in care. The Public Guardian and Trustee is referred to in law as the child's "**property guardian.**"

After discussion with the child and foster parent, the child's social worker may request that the Public Guardian and Trustee release trust money for special items, education, or university tuition while the child is still under 19.

Most trusts or estates allow children to take control of their funds and assets when they reach 19, the age at which they legally become adults. Young people in care can assume control of their trusts by writing to the Public Guardian and Trustee.

Trusts often give young adults access to more money than they are used to managing. Young people in care should be helped in planning for such money before it becomes available to them. Discuss this with the youth and their social worker.

Civil status, licences and legal matters

Many of the following matters will be particularly relevant and of interest to any youth in your care.

Marriage

Children under 16 must have a judge's consent to marry. A youth over the age of 16 years and under 19 years must have consent in writing of the parents or guardian to marry. The *Marriage Act* also allows a child over 16 to apply to the court for permission to marry if the child's guardian withholds consent unreasonably or for improper motives.

For youth in care through agreement or temporary custody, consent must come from their parents. Youth in care through continuing custody orders must receive consent to marry from a director.

Youth who wish to marry must talk to their social workers. A young person's legal status changes after marriage. If the youth is in care through the CFCSA, marriage automatically ends the jurisdiction of the CFCSA.

Enlistment in the armed forces

Youth 18 years old may enlist in the armed forces without their guardians' consent. Youth under 18 require this consent. Discuss the decision to enlist with the youth, and inform their social worker, so that authorization by a director can be obtained if necessary.

Birth certificates

The social worker can request a birth certificate on behalf of the child from the Vital Statistics division of the Ministry of Health. Requests for birth certificates are a priority if the child is registering in a recreational program or needs the certificate to acquire a proof of Indian status identity card.

Driving

If a youth in care wishes to apply for a driver's licence, their social worker and you should first discuss the matter with the youth and reach agreement that:

- the youth is mature and stable enough to become a safe driver if properly trained through the Graduated Licensing Program (GLP)
www.icbc.com/driver-licensing/getting-licensed/graduated-licensing
- the youth is willing to take an approved driver's course

The youth's parent/guardian must complete the Parent/Guardian Consent form. Youth who are employed may be required to help pay for a portion of the driver's education course.

Youth should take some responsibility in making arrangements, such as finding an appropriate course and obtaining necessary materials. Doing this may help confirm that the youth has sufficient maturity and initiative to assume the responsibility of driving.

Youth who do not live with a parent or guardian may make the application themselves, without the guardian's consent, if they sign a waiver confirming their independence. That provision would not apply to a child in a family care home. However, if a youth in care wants to buy a car, the guardian must first give approval.

There is no payment or reimbursement to cover the cost of vehicle insurance. The youth is responsible for purchasing insurance with their savings or earnings. **If the youth is driving your car, appropriate ICBC liability coverage (at least one million dollars) should be obtained.**

Hunting and firearm licences for non-aboriginal children

Children in care must be 14 years old to hunt. Before a child or youth in care is allowed to participate in hunting activities, the child/youth's mental, emotional and behavioural capabilities **must** be fully assessed by the social worker. Written approval to participate in hunting **must** be received from the child/youth's social worker before permission is given.

Children in care by agreement or in temporary care must have written permission from their guardians to hunt, while those in continuing care must have their social workers' approval.

Under the *Wildlife Act*, the age range for youth hunting licences has been expanded. The age range for youth who are eligible for the youth licence is now 10 to 17 years of age.

Implementation of the expanded youth hunting license will have an effective date to coincide with the new license year which begins April 1, 2013. For more information on the hunting legislation use the following link: www.env.gov.bc.ca/fw/wildlife/hunting/regulations/1214/docs/hunting_trapping_front.pdf

In British Columbia, people must be over 19 to apply for a licence to own a firearm.

Youth in care who hunt generally use firearms owned by a foster parent or lent by a parent. **All firearms and ammunition in a foster home must be securely stored according to the rules of the firearms acquisition permit.**

Note: *The minimum age of eligibility to hold an assistant guide licence has been lowered from 19 years to 18 years of age.*

Aboriginal right to harvest fish and game

There is a separate policy governing Aboriginal children in care and hunting. Aboriginal people have an inherent right to harvest fish and game for traditional, ceremonial and food purposes. Hunting is part of Aboriginal culture, and therefore Aboriginal children have a right to receive guidance and encouragement in this area. The child's social worker must determine that the Aboriginal child in care will be safe while participating in a hunt, and that:

- the child is accompanied by a responsible person exercising their inherent right to harvest fish or game, or who holds a valid hunting or firearms licence
- the child expresses an interest in participating
- the child's participation is appropriate to their abilities and interests

Aboriginal people have an inherent right to harvest fish and game for traditional, ceremonial and food purposes.

Legal matters

Generally, children cannot be made parties to civil lawsuits. If, in unusual circumstances, a lawsuit is brought against a child in care, notify the child's social worker.

If a child is charged with a criminal offence by the police, or is to be interviewed, searched or interrogated by the police, immediately notify the social worker who either will be present during the police action or will arrange for a parent/guardian to be present.

Damages caused by a foster child

The ministry does not accept liability for damages caused by a child in care. This is based on the principle in common law that a parent or guardian is not responsible for the actions of a minor unless the parent can be proven to have acted negligently.

If a child in your care damages your property, notify their social worker and your resource social worker. You can also phone the BCFFPA provincial office at 604-660-7696 or toll-free at 1-800-663-9999 as they can help you determine if the BCFFPA-administered foster parent insurance applies. (See also "Household and tenant insurance" in Section 4.)

A safe home

It is important that you give special consideration to the safety of your home in relation to the capabilities of the children placed with you. Arrange to review the safe storage of medication, poisons and other potentially dangerous items or goods with the child's social worker. Children need to be made aware of known hazards in their home, garden and neighbourhood as they will not be aware of potential danger which you or your family may take for granted.

For the same reason, children need to understand what to do in an emergency.

The Federation of B.C. Youth in Care Networks

Growing up in care can lead to experiences not shared by children who grow up with their own families. Because their experiences are different, children in care may feel isolated, powerless and voiceless, and may benefit from the friendship and support of others who have been through the system and know what it's like.

The Federation of B.C. Youth in Care Networks (FBCYICN) is a youth-driven, provincial, non-profit organization dedicated to improving the lives of young people in and from care. Networking gives members an opportunity to establish and maintain contact with other young people in care, exchange ideas, share common problems and explore options for positive change.

It also gives them a collective voice to address issues at the provincial level. The networks work with government and service providers to help improve conditions for young people in care by promoting their views and concerns.

Anyone between the ages of 14 and 24 who are, or have been, in care can join. Ask the child's social worker how to get in touch with a local network. Or call the FBCYICN for more information. If you're in Vancouver, phone 604-527-7762; from elsewhere in B.C. call toll-free 1-800-565-8055, or visit the website at: <http://fbcyicn.ca/about/>

Youth living in and transitioning from foster homes

Youth living in your home need to have all the necessary skills to be self-sufficient by the time they reach 19 years of age. When the youth in your care leaves your home they should know the following:

- how and where to get identification
- how to get medical coverage
- how the Agreements with Young Adults (AYA) program can help to further their education and career goals
- how to stay healthy, active and have fun
- knowledge of safe sex practices
- self-care skills (e.g., hygiene, nutrition, cooking, housekeeping, relationships)
- money management knowledge and skills (e.g., budgeting, credit, banking, income tax)

Ideally, the responsibility for taking charge of what youth feel they need help with should fall with the youth themselves. However, the reality is that most youth will need to be encouraged and supported by you to participate in some of the above activities.

When the child leaves your home

There are many reasons why a child might leave a foster home. They include:

- **Achievement of care plan goals.** These departures are planned well in advance, with the participation of all interested parties – children, foster family, birth family and social worker.
- **Change in foster family circumstances.** Many things can happen that affect a family's ability to foster. Examples are serious illness or death, divorce or separation, or a transfer out of the community.
- **Request by foster family.** If a placement proves too difficult, you may ask the social worker to move the child. You should provide as much notice as possible in order to facilitate a smooth transition for the child.

- **Request by child in care.** Children sometimes ask to be moved to another home, or run away from a foster family and refuse to go back. The child's social worker discusses the situation with the child and the foster family before deciding what should be done.
- **Request by the child's social worker.** A child may be moved for a variety of reasons, from concerns about the foster family to the preference for placing brothers and sisters together. If there are protection or safety concerns, the child may be moved with very little notice.
- **Court order.** The family court may order a child to be returned home – for example, in cases where a child was removed from their home and temporarily placed pending a court decision.

Other moves may be due to youth reaching the age of majority (19) or proving themselves mature enough for independent living with some degree of supervision by a social worker. Sometimes, a move may come because the child has been adopted, because the youth has been accepted into the armed forces, or because the child must move to attend school or maintain a job.

The child, the foster parent and the child's social worker as well as members of the child's team should all be involved in planning the move to another home.

Easing the transition for the child

Cooperate with the child's social worker to make the transition as easy as possible for the child. Mainly, try to support the social worker's explanation to the child, and help the child prepare their belongings for the move. The social worker might discuss with the child the possibility of future visits from or to you.

If the child is returning home or being adopted, you can help most by reassuring them about the move and advising the social worker if there appear to be any problems.

If the move is to another placement or another resource such as a group home, it will be necessary to discuss the reasons for the move with the child. Sometimes it is possible to resolve any differences and keep the child in your home by further discussion with the child and their social worker; at other times your job will simply be to reassure the child about what is to come.

Easing the transition for the foster parents

How foster families feel when children leave their homes can range from strong relief to profound loss – and sometimes a mix of positive and negative emotions. You may regret having become emotionally involved with the child, or feel guilty that you didn't "do enough" for them.

Developing caring feelings toward children who stay with you is natural.

Developing caring feelings toward children who stay with you is natural. It is not helpful to worry about that aspect of fostering. Remember that foster parenting is a temporary activity. Success often means that the child will move on from your home. A big part of foster care is learning to let go. Discuss your feelings with your resource social worker or local foster parent support association.

Families may need time to adjust. It is sometimes wise not to take new children immediately into your home just because there is a vacancy. Only after you have accepted the loss or transition should you decide when or whether to continue fostering.

Taking care of yourself

Taking care of a foster child in your home is a demanding job. No matter what joys or stresses it brings to you and your household, it will certainly change your day-to-day routines and experiences. We want children in care to live in healthy, functional families. You must make sure that you take care of your own and your family's needs as well as those of the children placed with you.

What does taking care of your own needs mean? It means behaving in a way that is caring, nurturing and inclusive to the child living in your home. In addition, it means:

- knowing your own and your family's limits
- taking advantage of supports that are offered to you
- making use of the informal supports available to you (family and friends)
- linking with other foster parents in your community to share information and support
- knowing what you and your family need in order to have balance in your lives
- sharing accomplishments, satisfactions and responsibilities with other family members
- working constructively and cooperatively with the other members of the child's support team, including the child's social worker, your resource social worker, the child, the child's family and other involved professionals or helpers

4 • Supports and Entitlements of Foster Parents

Payments to foster parents

The family care rate covers the regular ongoing costs of raising a child.

Foster parents receive payments at rates developed to reflect the actual costs of caring for children. The rates are updated from time to time, and you will be informed when that happens. Current family care rates can be obtained from the local Ministry of Children and Family Development or DAA office. You will also find information on rates at the following website:
www.mcf.gov.bc.ca/foster/monthly_rates.htm

Cheques for family care homes are normally issued by the ministry by the 15th of each following month. This means, for example, that if a child was fostered in the month of August, the cheque for that period will arrive close to the middle of September.

Lost cheques

If a cheque is lost or stolen, report this to your resource social worker. In order to receive a replacement cheque, you will be given a “letter of undertaking” to complete. This is a legal declaration that a cheque is lost or stolen and is a requirement before the ministry is permitted to issue a replacement cheque.

Direct Deposit

Direct Deposit of your family care home rate to your bank account is the most reliable and efficient means of receiving funds and will generally eliminate issues of lost or stolen payments. Your resource social worker can arrange this for you.

Family care rate

The family care rate covers the regular ongoing costs of raising a child. You are expected to budget the family care payment over the year and across placements. The family care rate reimburses you for the following:

- **food** - the child’s share of food’ purchases including food prepared in the home, brought in or eaten out, school lunches and baby formula
- **household** - the child’s share of the household costs including, but not limited to, bedding, linen, household supplies and utilities as well as to provide for the increase in the normal wear and tear of furniture and soft furnishings resulting from additional children in the home
- **transportation** - the child’s share of family transportation costs including, but not limited to, day-to-day transportation costs, which are specific to or on behalf of the child and as outlined in the child’s Plan of Care. This includes transportation to school, to medical appointments, to recreational activities, to visit local family, and the cost of a bus pass

- **health, personal care, supplies for young children** - the child's personal care costs (e.g., haircuts, shampoo, toothpaste, tooth brushes, personal hygiene) and car seats, diapers, and other supplies for young children
- **family recreational outings** - the child's share of the cost of family outings
- **clothing** - the direct costs for the child's replacement clothing and clothing repairs
- **equipment** - the costs of equipment for basic care (e.g., beds, cribs) as well as for sports, recreation, and hobbies
- **personal allowance** - a spending allowance intended solely for the child's personal use
- **child minding** - to cover the cost of care of your children and the child-in-care while the parent is away from home on child-in-care related business (e.g., school interviews, agency conferences and local Foster Parent Association meetings), caregiver outings
- **gifts and activities** - the cost of gifts for the child's birthday and Christmas, and for the costs relating to participation in ongoing activities related to the child's creative, cultural and physical development. For example: Cub, Scout and Brownie uniforms, registration fees and tuition fees for music, arts and crafts, swimming lessons, participation in sports activities and camp fees. (The difference between the per diem camp fee and the Foster Family Care rate may be paid as a "One-Time Only payment.")
- **education** - all primary and secondary school related costs. For example: costs related to physical education classes, driver's education course fees, other course fees, school supplies, locks, locker fees, field trips; and other costs directly related to caring for a child

You should not end up out of pocket as a result of your work as a foster parent.

Start-up expenses

You may need some money at the beginning of a placement to cover food and household expenses until your first cheque arrives. In this case, you can request an advance from your resource social worker, which, if granted, will be deducted from the first month's family care payment.

If the child has no, or inadequate clothing upon arrival, you can request a grant from the child's social worker to bring the child's clothing up to standard. Except for costs covered by this type of annual clothing grant, all clothing is budgeted from the monthly payment.

Payment may also be authorized for some extraordinary items necessary for the child's care. Such items depend very much on the particular child and their circumstances but might include, for example, specialized furniture or a bicycle. These costs are not deducted from the first payment. Remember that items paid for in this way belong to the ministry.

With the exception of the child's clothing needs, all of these start-up expenses should be discussed with your resource social worker.

Payments for supplementary supports

You should not end up out of pocket as a result of your work as a foster parent. Supplementary supports are available when the service requirements of the child in care are beyond regular expectations. Speak to your resource social worker about help with additional costs.

One-time-only payments

These payments can be made for single or ongoing expenditures, but they **cannot** be paid on an unlimited and ongoing basis. Payment can be made to you or to the person or agency supplying the service. One-time-only payments are considered on a case-by-case basis. Situations that might be covered include:

- exceptional transportation costs such as accompanying a child to another city for medical or family reasons
- exceptional medical requirements such as special equipment not covered by the Medical Services Plan or ministry health services
- exceptional clothing needs such as work clothing or specialized athletic wear
- insurance-deductible reimbursement for damages by the child in care

Your resource social worker assesses the request, ensuring that the item is part of the plan for the child and that it is reasonable to ask for additional funds to meet the expenditure.

Exceptional guardianship expenses

While most costs for children in care are covered by the family care rate, there are some important exceptions. Referred to as guardianship expenses, they include items such as:

- exceptional clothing
- post-secondary education or private schools
- psychological and professional services
- transportation of the child's parents or relatives to visit the child
- medical transportation
- incidental expenses (e.g., tutors, driving lessons, some travel costs, small gifts)

The child's social worker is responsible for assessing the need for guardianship expenditures, in discussion with you and other members of the child's planning team.

Children in care with infants

When a child in care with an infant lives with a foster family, a number of matters should be discussed by the family and the social worker beforehand. The child in care will be expected to parent the baby, with some support from you.

You are not expected to cover the infant's costs. The child in care's social worker will work with the child to apply for available funding to meet the baby's needs. You will need to be a party to any agreement about costs and living arrangements if the mother and infant are to remain in your home. In some cases, the infant may be placed in the care of the director, and family care payment procedures will then be applied.

Professional support services

Occasionally, a child may need to be placed with foster parents who do not have the experience, time or skills to deal with the child's full range of needs. A particular Plan of Care may also require a commitment from the foster parents that goes beyond the service expectations of their contract. In these circumstances, the social worker may authorize purchased home supports.

Home-support services may also be authorized for short-term and emergency situations to support or provide relief for the foster parent. In exceptional cases, this service may continue as a support to the home.

A child and youth care worker may be assigned to help you meet service expectations that are beyond the skills or service expectations of your home.

Homemaker services

Occasionally, you may need to be away from home temporarily for reasons such as dealing with family crises, taking part in training courses, attending court hearings or taking a break from caring for children with extraordinary needs. In such cases, extra funding may be available for child minders or temporary homemaker services.

Infant development services

This in-home service may be used, when available, to help stimulate the development of children up to three years of age who are developmentally delayed or disabled. In some regions, infant development services may include parent support groups.

Child and youth care worker services

A child and youth care worker may be provided to a child in your home when:

- the child is in care for a short time, and the service is part of an ongoing support offered to the child's family
- the service is preparing a youth in care for transition to independent living
- the child has developmental delays, which the child and youth care worker is assigned to work on

In other situations, a child and youth care worker may be assigned to help you meet service expectations that are beyond the skills or service expectations of your home.

Community resources

Besides the services provided by the ministry or DAA, many community resources that help families are available. Ask your resource social worker for help in locating these, or check the local telephone directory. Possible resources include:

- community or regional district recreation centres and programs (e.g., sports, hobbies, social contacts)
- mental health services (e.g., family counselling, psychological assessments)
- public health services and facilities (e.g., speech and hearing assessments, child health consultations, family counselling)
- child development services (e.g., pre-school programs; infant stimulation programs; speech, physio- and occupational therapies)
- B.C. Council for the Family (e.g., counselling and family activities)
- school district special services (e.g., counselling, psychological testing, tutoring)
- churches (e.g., child and family programs, including summer camps)
- family centres (e.g., parent and child drop-in centres, family places)
- native Friendship Centres

Urgent consultation services

- Call the child's social worker and/or your resource social worker between 8:30 a.m. to 4:30 p.m., Monday to Friday.
- Outside office hours, call the Foster Parent Support Line at 1-888-495-4440 between 4:00 p.m. and 12:45 a.m., Monday to Friday, and between 8:00 a.m. and 12:45 a.m. on statutory holidays and weekends.
- Call the BCFFPA Fosterline 1-800-663-9999 between 9:00 a.m. and 4:00 p.m., Monday to Friday.
- The Foster Parents Support Line provides professional support, information and consultation and a fast response for urgent issues outside regular office hours.

Non-primary caregiver situations for children and youth in care

Acting as a “prudent parent” with care and control responsibilities, foster parents also approve all “significant and unsupervised” situations involving casual visitors and the child’s outside activities (e.g., play dates, sleepovers) with advice and support from your resource worker and the child’s social worker when needed.

Consideration of the child’s views, evolving capacity, vulnerabilities and cultural and community connections

It is important for children and youth in care to be able to participate in the same types of everyday life and social activities as all children in their community while also ensuring their health, safety and best interest needs are met. Children and youth also need to maintain their cultural and community connections and if the child or youth is Aboriginal the importance of preserving the child’s cultural identity must be considered in determining the child’s best interests. The age of the child or youth is taken into consideration in terms of both their evolving capacities and their vulnerabilities for the care giving situation or social activities being decided upon.

For all of the non-primary caregiver situations and child and youth activities described below the views of the child or youth are sought and considered, in line with their evolving developmental capacities, regarding the child minding, child care, sleepover, visitor and learning or recreational activities they experience.

As part of the due diligence undertaken in the role of a prudent parent, foster caregivers routinely talk with the child or youth and confirm their comfort level with the people (adults, children and youth) they are coming into contact with at the outset and whenever the care giving is on-going. When children and youth return from sleepovers, play dates, youth activities, coaching or tutoring sessions, the foster caregiver is responsible for checking with the child about their own sense of safety and well being during the experience. Similarly the foster caregiver confirms with the child that they feel safe and comfortable with child minders, child care providers and relief caregivers who are looking after them on a regular or intermittent basis.

Supporting children to take part in cultural, social, and recreational activities, to experience high quality care in all circumstances and to have their views taken into consideration are all ways that foster parents can ensure that the Rights of Children in Care are upheld.

Child minding (also referred to as Babysitting)

The payment you receive for each child’s care includes an amount for child minding/babysitting. As the foster parent, you screen and select the child minder/babysitter, using the checklist below. You can also ask for support and advice from your resource worker and the child’s social worker as needed.

- have child minding experience
- know the child and be aware of their developmental needs, including any special needs
- know positive child care and behaviour management strategies
- know what to do in an emergency or injury situation
- be a minimum age of 14 years

- be present and in charge for the child minding period
- possess the maturity, knowledge, skill and ability to meet the child's needs and follow through with child-caring routines while they are child minding
- use positive behaviour management techniques and appropriate discipline (and agree not to use physical punishment or other prohibited methods of discipline or behaviour management)

Note: *It is preferable if the person you hire has taken an approved child minding course and a basic first aid course; however, these are not mandatory.*

As the foster parent, you are still responsible for the care of the child(ren), even when you hire a child minder/babysitter. Give the child minder/babysitter a phone number where they can reach you, in case there is a concern they need to discuss with you.

Wherever possible, children attend licensed child-care services. Criminal Record Checks are already completed for licensed child care providers.

Child care

Normally, infants and pre-schoolers remain with you during the day, except when they attend Early Childhood Education programs. However, child-care subsidies are available if child care is included as part of a child's Plan of Care. Foster parents, within their expected role as a "prudent parent," screen and select a child care setting appropriate for the child's needs using the *Parents' Guide to Selecting and Monitoring Child Care in BC* (www.health.gov.bc.ca/library/publications/year/2011/Parents%27_guide_to_selecting_and_monitoring_child_care_in_BC.pdf).

Wherever possible, children attend licensed child-care services. Criminal Record Checks are already completed for licensed child care providers.

If no licensed child-care services are available and an unlicensed family child care is to be used, the social worker and you are responsible for selecting, screening and monitoring the child's care in this setting. Foster parents consult with the child's social worker and their resource worker about their selection, and resource workers complete Criminal Record Checks and Prior Contact Checks on unlicensed child care providers.

Supported child care (previously called special needs day care) is a special program you can use if you are caring for children with disabilities.

Child care subsidy and surcharge payments are provided following the completion of approval documentation required under current Child Care Subsidy and Caregiver Support Service Standards policy.

Sleepovers and other significant and unsupervised situations

Acting as a "prudent parent" with care and control responsibilities, foster parents also approve all "significant and unsupervised" situations involving casual visitors and the child's outside activities (e.g., play dates, sleepovers, tutors).

Relief for foster parents

Relief – a break from caregiving – is important for both the child-in-care and the foster parents in most family care homes. Relief means overnight care, typically lasting between 1–3 days that takes either in the foster parent’s home or in the home of the relief care provider.

Since you are responsible for ensuring the suitability of any person entrusted with the care of the child in your home, usually you will use an approved foster parent. Ideally you would identify proposed relief care providers (i.e., relatives, family friends) when your home study assessment is in process so that future relief care providers can be screened/assessed/approved at the same time.

When not possible to pre-identify proposed relief care providers, you can select and assess your relief provider based on an Assessment Guide and Checklist (see Reference section) in consultation with your resource worker and the child’s social worker.

Respite is **not** the same as relief. Respite is out-of-home care provided or funded as a service to a child’s parents with whom there is a Support Services Agreement. All types of approved Family Care Homes may provide respite care for families in their community or relief care for other foster parents.

Arranging relief

You are expected to plan and arrange for periodic relief on a schedule that best meets both your own and the child’s needs. Ideally relief is given in your home, since that involves the least disruption to the child(ren). Since you are responsible for ensuring the suitability of any person entrusted with the care of the child in your home, usually you will use an approved foster parent. Local foster parent associations and Regional Foster Parent Support Agencies often maintain rosters of approved Family Care Homes that are available for relief.

However, sometimes it may be better for a child in care to stay temporarily with people who are not approved foster parents but perhaps relatives or friends of yours or adults already known to the child. Discuss any plan to use relief care providers who are not approved foster parents with the child’s social worker and your resource social worker to ensure the necessary screening, assessment and approvals are done.

As part of the child’s Plan of Care consult with the child’s social worker about the plans for relief care. The child’s social worker and your resource social worker must approve any relief care lasting over 14 days.

If you have difficulty arranging relief, talk to your resource social worker.

Screening, Assessment and Approval of Relief Caregivers

Resource workers screen, assess and approve foster caregivers who can also provide relief to other foster caregivers. Whether part of the home study assessment process for the prospective foster parent, or at any stage post foster parent approval, resource workers screen relief care providers identified by the prospective or approved foster parents through completion of required Criminal Record Checks and Prior Contact Checks.

Foster parents assess the proposed relief care provider using the Assessment Guide and Checklist (provided in the Reference Section). While the foster parent is conducting their assessment of the proposed relief care providers their resource social worker completes the screening process which includes the Criminal Record Check and Prior Contact Check. The foster parent and resource social worker consults throughout the screening and assessment period resulting in a joint approval process.

People who provide relief must:

- be at least 19 years old
- satisfy the child's social worker and your resource social worker that they can ensure the safety and well-being of the child
- possess the maturity, knowledge, skill and ability to meet the child's needs and follow through with daily routines
- have knowledge of safe sleeping practices
<http://bcfosterparents.ca/wp-content/uploads/2013/03/Safe-Sleeping-For-Babies.pdf>
- know and use positive child care and behaviour management strategies and appropriate discipline (agrees **not** to use physical punishment or other prohibited methods of discipline or behaviour management)
- has an understanding of child development ages and stages and the level of care and type of activities required for the child's age and stage
- be present and in charge during all hours that relief care is being provided
- know what to do in an emergency or injury situation
- have no criminal record which would affect the child's care, safety or well-being

The primary foster parent and child's worker are also responsible for ensuring that full information sharing on the child's needs and daily routines is provided to the relief care provider.

Payment

Kinship (Restricted), regular, and level 1 family care homes can have up to three days of relief per month covered using a billing/payment form.

Funding for up to three days relief per month are provided within the Service Payment for level 2 and 3 family care homes under their Family Care Home Agreement.

Supplementary relief

Supplementary relief for family care homes may be required as a result of situational factors such as a significant change in personal circumstances (e.g., illness, divorce, family tragedy), or the demanding and extraordinary needs of the child in care which requires additional support or relief care to maintain the stability of the child's placement with their foster parent.

Foster parents can talk with their resource worker about situations that may require supplementary relief to obtain approval for supplementary relief payments, especially in situations where the cost would require you to spend an unreasonable proportion of the service payment in the case of specialized level 2 and 3 family care homes.

Foster Parent Associations and Services

All approved foster parents are encouraged to become members of a foster parent association. The federations have a local, regional and provincial structure.

B.C. Federation of Foster Parent Associations (BCFFPA)

The BCFFPA is an organization run by foster parents, whose aim is to support its members in their work as caregivers. Their active associations with the ministry make for stronger working relationships between foster families and social workers. The BCFFPA home page link is a good source for any foster/BCFFPA announcements, or MCFD news. <http://bcfosterparents.ca/>

Insurance, WorkSafeBC and income tax

Your insurance needs as a foster home are a little different from those of most families. The three main areas of difference are in third-party liability coverage for your home, coverage for theft and damage caused by a child placed in your home, and automobile third-party liability coverage. It is strongly recommended that you consult with your insurance agent about coverage requirements.

Household and tenant insurance

All Family Care Homes must have household insurance; it is a requirement of their agreement with the ministry. The BCFFPA is funded to provide two types of home insurance coverage for foster families:

- One policy automatically provides all foster parents with third-party liability insurance related to carrying out their foster care responsibilities. (Third-party liability insurance covers you if someone else makes a claim against you for unintentional bodily injury or property damage.) This insurance provides coverage regardless of what your own home insurance provides.
- The other policy is a rider to your own home insurance, administered by the BCFFPA for all foster homes in the province. It extends your coverage to include theft of or damage to your property caused by a child in care. If such damage or theft occurs, the deductible on the policy may be reimbursed.

If you don't already have household insurance, you should discuss this with your resource social worker. For details on the two types of insurance coverage offered by the BCFFPA for all approved foster parents contact the BCFFPA, or consult the links below for more detailed information:

Master Insurance Policy (MIP)

<http://bcfosterparents.ca/wp-content/uploads/2013/01/MasterInsurancePolicyWording.pdf>

Master Insurance Program - Program Certificate (present year always updated)

<http://bcfosterparents.ca/wp-content/uploads/2013/01/MasterRiderInsuranceCertificate.pdf>

Link to MCFD Publications List (includes latest MIP Certificates)

www.mcf.gov.bc.ca/foster/publications.htm

Insurance Rider Information

<http://bcfosterparents.ca/wp-content/uploads/2013/02/2013-Rider-Insurance-General-Letter.pdf>

Foster Parent Insurance Booklet

http://bcfosterparents.ca/wp-content/uploads/2013/01/INSURANCE.RIDER_.BOOKLET.October.20111.pdf

Foster Parent Insurance Questions and Answers

<http://bcfosterparents.ca/wp-content/uploads/2013/03/INSURANCE-Q-A-October-2011.pdf>

BC Human Rights Tribunal Decision

<http://bcfosterparents.ca/wp-content/uploads/2013/04/BC-Human-Rights-Tribunal-Decision.pdf>

Automobile insurance

Make sure that you have adequate and appropriate vehicle insurance. Consult with your insurance agent about your vehicle insurance needs, in particular as they relate to third-party liability and to your insurance group classification.

You **must** have at least \$1 million automobile third-party liability insurance coverage on any vehicle used to transport a child in care. The BCFFPA recommends that foster parents obtain \$3 million in automobile third-party liability insurance coverage. Of course, it is always important to ensure that the vehicle is mechanically sound, and is operated in a safe manner by a properly licensed Class 5 driver.

WorkSafeBC and income replacement

Since foster parents are not employees of the provincial government, they are not covered as employees by WorkSafeBC. In some circumstances; however, they may be considered employers (e.g., if they employ and pay for their own support staff). WorkSafeBC recommends that you call them to discuss how the agency might help or affect you as a foster parent.

WorkSafeBC also offers income-replacement insurance, called Personal Optional Protection insurance, which may be of interest to foster parents. If you wish to obtain this coverage, you should discuss your needs with WorkSafeBC.

To be sure that you are complying with their policies, WorkSafeBC recommends that you register with them by telephone (for phone numbers, see the blue pages of the phone book).

Other income-replacement plans are available through private insurance companies. The BCFFPA has useful information on this topic.

Personal income tax

In general, money you receive for being a foster parent that is used for the care of the child placed in your foster home is not taxable. However, the rules can be interpreted in a variety of ways, and you should consult with the BCFFPA/FAFP and Revenue Canada for the most recent information on this topic.

Medical and dental benefits for foster parents

Medical and dental benefits for foster parents

The BC Federation of Foster Parent Associations is able to offer comprehensive dental and extended health plans to current members of the organization and their families. See <http://bcfosterparents.ca/medical-dental/> for more information.

In order to purchase these services, individuals must hold a valid membership in the BCFFPA, which will be verified prior to policy delivery.

Note: Life insurance, segregated funds, disability and critical illness insurance continue to be independent of BCFFPA membership.

Support in resolving foster care concerns

The BCFFPA also acts as an advocate for foster parents. Even if you are not a member, you can ask the association for help in sorting out difficult situations.

Local foster parent associations

Local associations are made up of foster families in a particular community. A resource social worker acts as a liaison to the local group. Each local association elects officers, holds regular meetings and sends two representatives to the regional council meetings.

If you live in an isolated community that doesn't have a local association, it may be possible to create a small group to share and exchange fostering news and ideas. Ask your resource social worker how to set up an association, or call the BCFFPA directly. In the Vancouver area, call 604-660-7696; elsewhere in the province, call toll-free 1-800-663-9999.

Federation of Aboriginal Foster Parents (FAFP)

Federation of Aboriginal Foster Parents (FAFP)

The Federation of Aboriginal Foster Parents (FAFP) is a non-profit organization run by and for Aboriginal foster parents throughout British Columbia. The FAFP represents foster parents providing quality care for Aboriginal children in a nurturing, culturally appropriate environment. They recognize and affirm that Aboriginal children have the right to grow up in their own culture and are committed to providing the support and services needed to help ensure this fundamental right is respected. The FAFP was formed to meet the unique needs of caregivers of Aboriginal children, and the needs of communities for targeted development, recruitment, and training of Aboriginal foster families.

The FAFP also work in partnership with the BCFFPA to support Aboriginal parents. FAFP supports non-aboriginal people caring for Aboriginal children to provide care in ways that respect and uphold Aboriginal culture and tradition.

The FAFP has local and regional associations in some areas of the province to further support Aboriginal and non-aboriginal foster parents caring for Aboriginal children.

You can call the FAFP toll-free at 1-866-291-7091 for more information on how to become a foster parent, or how to access other foster parent support services. See www.fafp.ca/ for more information.

For information about the Master Insurance Program (MIP) - Aboriginal Program Certificate of Insurance, see www.mcf.gov.bc.ca/foster/pdf/Aboriginal_FP_cert_001.pdf

Regional Foster Parent Support Agencies

Regional Foster Parent Support Agencies

Regional Foster Parent Support Agencies assist with recruitment and orientation of new foster parents and provide education and training for foster parents, including discussion groups and workshops supporting foster families. Agencies also work in partnership with ministry staff on special programs or projects. Many different support services are available for foster families, including protocol support to foster parents.

To find out about the foster education program in your area, or any other support services, please click on the agency link associated with your area of the province.

Coast Fraser Region

- Hollyburn Family Services
<http://hollyburn.ca/>

Interior Region

- Kamloops and Kootenays - Interior Community Services
www.interiorcommunityservices.bc.ca/
- Okanagan, Similkameen and Shuswap - Okanagan Foster Parents Association
www.okfosterparents.ca/

North Region

- Axis Family Resources
<http://axis.bc.ca/>

Vancouver Island Region

- Foster Parent Support Services Society
<http://fpsss.com/>

Ongoing monitoring and annual reviews

Monitoring and review

The child's social worker makes regular visits to assess the child's progress toward Plan of Care goals and to monitor their safety and well-being. The child's social worker is required to speak with the child privately at least every three months.

All Family Care Homes are reviewed once a year by the resource social worker. This review occurs within 30 working days of the anniversary of approval and includes a file review and a home visit. Ongoing monitoring and annual reviews are a collaborative process – they provide an opportunity for the foster parents to also discuss what may or may not be working for them as a member of the child's team.

Foster parents are interviewed, and there may be joint discussion of issues such as the social worker–foster parent partnership, significant changes regarding the child or children placed in your home, any significant changes in your home, and any skills or knowledge that may require strengthening. This process also identifies and supports any skills or knowledge that may need to be added to your caregiver learning plan.

Associated with these reviews, all children placed in your home who are able to communicate are interviewed alone and apart. Children who cannot communicate must be seen by the social worker.

Regular contact between children's social workers, resource social workers and foster parents help to minimize and clear up most matters of dispute.

Resolving issues between staff and foster parents

Processes exist to help resolve most issues quickly and at the local level, and also ensure that foster parents receive any support and assistance they need. Regular and ongoing contact between the child/youth's social workers, resource social workers and foster parents help to minimize and clear up most matters.

When issues do arise, all parties should use a collaborative approach while working toward resolution.

Examples of matters that can and should be discussed with the social workers include:

- service plan decisions
- access to the child in care by family members
- medical care
- the child's education
- discipline practices
- placement or the move of a child to another resource
- closure of a foster home

If you cannot resolve the matter informally, either person may make a formal written request for resolution of the issue by a non-involved manager.

Should resolution not be achieved through the formal process, you can write to a director with the following information:

- the child's name and birth date, and how long they have been in your home
- details of the issue and efforts made to resolve it

You will be informed, in writing, once a decision has been made.

External review

There are times when it is preferable to have someone not involved in a matter seek a solution. For example, the Ombudsperson can be asked to review any matter of "administrative fairness." The Ombudsperson's job is to receive inquiries and investigate complaints from people who believe that a public authority has been unfair.

Allegations of abuse

There is a separate protocol for dealing with allegations of abuse of a child in a foster home. If such a situation arises in your home, the resource social worker will explain the process for dealing with the allegation.

Closure of Family Care Homes

If the ministry decides to close a home, the foster parents must be told why. Once the reasons have been communicated in person, a letter confirming the reasons in writing must also be sent.

If the foster parents do not agree with the reasons for the closure, they may wish to pursue the matter by consulting with the BCFFPA, the FAFP, or their Regional Foster Parent Support Agency.

Foster parent rights

Rights of foster parents

To help ensure that children and youth in care receive the best possible care, foster parents have the following rights:

1. The right to continuing professional development opportunities with respect to caring for children, and to participation in professional foster parent associations.
2. The right to be consulted and be able to have meaningful input into decisions affecting the foster parents home, family and other placements in the home.
3. The right to be involved in the development of the child's Plan of Care and informed of changes to the plan.
4. The right to limit access to private spaces within their own home, to special possessions, and to private or personal conversations, in the same way their own children are limited.
5. The right to refuse a placement if they feel they cannot meet the child's needs regardless of the home level.
6. The right to be able to continue to participate in cultural, social and religious activities of their choosing, while honouring rights, values and beliefs of the foster child.
7. The right to be considered as a permanent family for a child, along with all other suitable homes if the Director determines that a permanent plan is in the child's best interest.
8. If requested and permitted by legislation, the right to be provided with notification of the serious illness, injury, or death of a former long-term placement, when this information is known.

9. The right to receive available information for the care of the child, including, but not limited to, any history of violence or illegal activity, as well as medical, educational, behavioural, personal care and relevant family information in addition to guardianship, custody and access arrangements. In the case of an emergency placement, information is received as soon as possible.
10. The right to be provided as soon as possible with reasons when a child is removed from a foster parent's home.
11. The right to be informed of standards expected by ministry staff and consequences of not meeting the standards.
12. The right to access information contained in any and all documents related to themselves which are held in the Director's custody, subject to all relevant legislation.
13. The right to access support of their choosing, and the right to be assisted in contacting the British Columbia Federation of Foster Parent Associations, the Federation of Aboriginal Foster Parents, or any other support provider or agency on any issues concerning, but not limited to, Child in Care Standards and Conflict Resolution.
14. The right to be provided with reasons an agreement is terminated or suspended and the right to appeal the decision.
15. The right to be treated with consideration, trust, honesty, respect, acceptance, and fairness in all circumstances by ministry staff and community service providers and the right to request the ministry's assistance when situations arise that involve verbal or physical abuse of the foster parent by a child or youth in care or their family members.
16. The right to be informed of their Rights and the regional process or protocol for resolving differences or disagreements between the ministry and foster parents.
17. The right to receive services to support and stabilize a placement.
18. The right to be provided with access to support services when placements are terminated to minimize the foster parents' feelings of disruption and grief.

Ongoing support services for foster parents

Fostering a child can be one of the most rewarding experiences in an individual's life. Fostering can also be demanding and present many challenges. As a foster parent, you are part of a team, and if you feel uncertain about a situation or require further information or support, you should seek help. In addition to talking to your resource social worker and the child's social worker, several other support services are available to assist you in the challenging task of parenting.

In working with foster parents, the director has the responsibility, as provided for in the foster parents' agreements, to:

- provide support, assistance and advice as may be needed, at a level consistent with available staff time and resources
- ensure through consultation that the needs of a child placed do not exceed the abilities and resources of the foster parents
- assist the foster parent, if requested, in accessing all available community services if a member of the foster family is physically or emotionally injured because of an assault by a child in care or a member of the child's family

When children move from Family Care Homes, support services are available to the foster parents and the children in care to minimize disruption and separation grief. If there is a protocol investigation or a decision is made to close a home, the foster parents are assisted in connecting with the BCFFPA, the FAFP, or the Regional Foster Parent Support Agency to receive information and support services.

Foster Parent Support Line is a confidential service funded by MCFD and professionally staffed to provide assistance to foster parents throughout the province. <http://bcfosterparents.ca/foster-line/>

You can call the foster parent support line toll-free at **1-888-495-4440**, Monday to Friday from 4:00 p.m. to 12:45 a.m., and on weekends and statutory holidays from 8:00 a.m. to 12:45 a.m. If calling outside these hours leave a message and a staff member will return your call as soon as possible.

In Your Grasp is an on-line resource database of community organizations and supports. Organized by region and service type, this on-line resource provides caregivers, adoptive parents, ministry/DAA social workers, other service providers and the general public immediate access to information regarding community support services available throughout British Columbia. www.inyourgrasp.bc.ca/

The **Representative for Children and Youth** supports children, youth and families who need help in dealing with the child welfare system, and advocates for changes to the system itself. If a foster parent is concerned that a child or youth may have a need or issue that is not adequately being addressed, the representative may have a role. For more information visit their website www.rcybc.ca or call 1-800-476-3933.

The **Public Guardian and Trustee of British Columbia**, Children and Youth Services, upholds legal and financial rights of children under the age of 19 by ensuring adequate legal representation and by holding and administering funds in trust for some children and youth. www.trustee.bc.ca/

The **Ombudsperson of BC** receives inquiries and complaints about the practices and services provided by public agencies. While not an advocate, the Ombudsperson can conduct impartial and confidential investigations to determine if a public agency is being fair to the people it serves. www.ombudsman.bc.ca

References

The Child, Family and Community Service Act

- CFCSA Guiding Principles (Section 1) 62
- Service Delivery Principles (Section 3)..... 63
- Best Interests of the Child (Section 4) 64
- Out-of-Home Living Arrangements (Section 71) 65
- Confidentiality and Disclosure of Information 65
- Guardianship Status and Implications for Foster Parents 66
- Rights of Children in Care..... 67

- Screening, Assessment and Approval Roles and Responsibilities
for all Non-Primary Caregiver Situations for Children and Youth In Care 70
- Relief Care Provider Assessment Guide and Checklist..... 72
- Foster Caregiver’s Guide for Assessing Relief Care Providers..... 75
- Screening Checklist (for completion by the Delegated Social Worker)
and Joint Approval Documentation..... 77
- Foster Parents’ Pre-placement Checklist..... 79
- Checklist to Assist Foster Parents working with Youth Transitioning
to Adulthood 80
- Glossary 81
- Index 83
- Quick Reference..... 85

The Child, Family and Community Service Act

The *Child, Family and Community Service Act (CFCSA)* is the province's legislation for child protection and for many of the support services used by families. It became law on January 29, 1996. Everything we do for children and youth in care (and therefore everything done in the Family Care Home program) is authorized by and must be consistent with the *CFCSA*.

The *CFCSA* sections discussed here are particularly important for foster parents. If you wish to read the entire *CFCSA* you can do so online (www.bclaws.ca/EPLibraries/bclaws_new/document/ID/freeside/00_96046_01). If you want to know how the ministry interprets the *CFCSA* in its day-to-day operations, consult the ministry's Child, Family and Community Service standards and policy.

CFCSA guiding principles (Section 1)	
<i>What the act says</i>	<i>What this means for foster parents</i>
<ul style="list-style-type: none"> • Children are entitled to be protected from abuse, neglect and harm or threat of harm. • A family is the preferred environment for the care and upbringing of children, and the responsibility for the protection of children rests primarily with the parents. • If, with available support services, a family can provide a safe and nurturing environment for a child, support services should be provided. 	<p>The first three principles concern society's basic values regarding children and families: that all children have the right to be safe and protected from harm; that parents have the right and obligation to care for their children; and that it is important to support families that need help in providing a safe and nurturing environment for their children.</p>
<ul style="list-style-type: none"> • The child's views should be taken into account when decisions relating to the child are made. 	<p>Children and youth have their own views and ideas, which must be heard and seriously considered when decisions are made.</p>
<ul style="list-style-type: none"> • Kinship ties and a child's attachment to the extended family should be preserved if possible. 	<p>It is important to try to preserve children's connections not only with their birth parents but with their extended family or kin.</p>
<ul style="list-style-type: none"> • The cultural identity of aboriginal children should be preserved. 	<p>It is important to maintain Aboriginal children's cultural identity and connections to their Aboriginal communities.</p>
<ul style="list-style-type: none"> • Decisions relating to children should be made and implemented in a timely manner. 	<p>Children need to have decisions affecting them made as quickly as possible.</p>

Service Delivery Principles

Section 3 defines the manner in which all services offered through the act are to be delivered. These principles govern the work of ministry staff, including social workers, but also apply to foster parents. Basically, these principles stress that:

- the child, the family and – in the case of Aboriginal children – the community all have continuing roles in decisions about the child’s care
- any service provided must respect the cultural, racial and religious background of the child
- communities should, when appropriate, be involved in caring for children

Service delivery principles (Section 3)

The following principles apply to the provision of services under the *CFCSA*:

- (a) families and children should be informed of the services available to them and encouraged to participate in decisions that affect them;
- (b) aboriginal people should be involved in the planning and delivery of services to aboriginal families and their children;
- (c) services should be planned and provided in ways that are sensitive to the needs and the cultural, racial and religious heritage of those receiving the services;
- (d) services should be integrated, wherever possible and appropriate, with services provided by other ministries and community agencies
- (e) the community should be involved, wherever possible and appropriate, in the planning and delivery of services, including preventive and support services to families and children.

Best Interests of the Child

Since a child's best interests can mean different things to different people, this section explains the term in detail. It lists seven factors that must be considered when a child's best interests are being determined.

In the case of Aboriginal children, the *CFCSA* underlines the relation of their Aboriginal heritage to their best interests. In practical terms, this means finding ways to maintain children's connection to their Aboriginal communities when they come into care, including a preference for placements with extended family, if this reinforces the other factors that make up their best interests.

Best interests of the child (Section 4)

- (1) Where there is a reference in this act to the best interests of a child, all relevant factors must be considered in determining the child's best interests, including for example:
 - (a) the child's safety;
 - (b) the child's physical and emotional needs and level of development;
 - (c) the importance of continuity in the child's care;
 - (d) the quality of the relationship the child has with a parent or other person and the effect of maintaining that relationship;
 - (e) the child's cultural, racial, linguistic and religious heritage;
 - (f) the child's views;
 - (g) the effect on the child if there is delay in making a decision.
- (2) If the child is an aboriginal child, the importance of preserving the child's cultural identity must be considered in determining the child's best interests

Out-of-Home Living Arrangements

Note: In this section, the *CFCSA's* guiding principles and best interest provisions are echoed and applied directly to placement decisions.

Out-of-home living arrangements (Section 71)

- (1) When deciding where to place a child, a director must consider the child's best interests.
- (2) The director must give priority to placing the child with a relative or, if that is not consistent with the child's best interests, placing the child as follows:
 - (a) in a location where the child can maintain contact with relatives and friends;
 - (b) in the same family unit as the child's brothers and sisters; and
 - (c) in a location that will allow the child to continue in the same school.
- (3) If the child is an aboriginal child, the director must give priority to placing the child as follows:
 - (a) with the child's extended family or within the child's aboriginal cultural community;
 - (b) with another aboriginal family, if the child cannot be safely placed under paragraph (a);
 - (c) in accordance with subsection (2), if the child cannot be safely placed under paragraph (a) or (b) of this subsection.

Confidentiality and Disclosure of Information

Neither foster parents nor social workers may disclose information obtained through their work except in circumstances outlined in the *CFCSA*. Two situations where it is acceptable to disclose information, with or without the consent of the child or family, are when the disclosure is:

- necessary to ensure the safety or well-being of the child
- made to foster parents, and the information relates to a child in their care

Confidentiality, privacy of information, and the keeping and safeguarding of records are all very important matters. Both the *CFCSA* and the *Freedom of Information and Protection of Privacy Act* have increased our focus on these matters. Our understanding of these issues has changed over the years and will continue to evolve. If you are ever in doubt about what to do, talk to your resource social worker or the child's social worker.

Guardianship Status and Implications for Foster Parents

I. Through agreement between a director and the parent

Formal	Overall goal	Guardianship status	Implications for foster parent arrangement status
Voluntary Care Agreement	Return home	Child's parent or guardian	Parents have access to the child and generally retain decision-making rights over various aspects of the child's life, such as education, religion, and medical care (except emergency).
Special Needs Agreement	Return home or independence	Child's parent or guardian	Parents have access to the child and generally retain decision-making rights over various aspects of the child's life, such as education, religion, and medical care (except emergency).

II. Through court action undertaken by a director

Formal	Overall goal	Guardianship status	Implications for foster parent arrangement status
Interim custody order	Return home	Child's parent or guardian (director has care of the child)	Parents may have access, and retain right to all but emergency guardianship decisions.
Temporary custody order	Return home	Director (except right to consent to adoption)	Parents may have access, and should be consulted on most decisions.
Continuing custody order	Adoption (if under age 12), placement with extended family or aboriginal community, continuing foster care, independence	Director	Director is sole guardian. Parents may apply for access.
<i>Infants Act</i> (formally <i>Family Relations Act</i> section 29) (Legal guardian dies without Will)	Temporary care until more appropriate Plan of Care is established	Director	Director is sole guardian. Preferred plan is placement with extended family.
<i>Adoption Act</i>	Adoption	Director	Temporary care while adoptive home is found.

Rights of Children in Care

Section 70 is one of the most important parts of the *Child, Family and Community Service Act* for foster parents. The rights of children in care are not just guidelines; their inclusion in the *CFCSA* makes them the **law**. They are also written into each Family Care Home Agreement, which foster parents sign before a child is placed with them. Foster parents must act in accordance with these rights and also make sure that children in their care are aware of their rights.

Rights of children in care (section 70)	
<i>What the CFCSA says</i>	<i>What this means for foster parents</i>
<ul style="list-style-type: none"> To be fed, clothed and nurtured according to community standards and to be given the same quality of care as other children in the placement. 	<p>Children in care are entitled to the same care (food, clothing, shelter, medical and dental care, nurturing and so forth) that members of the community would find acceptable for their own children. All children in care living in the same home must receive similar treatment, so long as it fits with their Plan of Care.</p> <p>It is important to remember that quality of care must not depend on behaviour or be subject to favouritism.</p>
<ul style="list-style-type: none"> To be informed about their Plans of Care. To be consulted and to express their views, according to their abilities, about significant decisions affecting them. 	<p>Foster parents help children to understand what is in their Plans of Care, encourage them to express their views about these plans, and ask their opinions whenever important decisions are taken.</p> <p>Foster parents and the children’s social workers must tell children what will happen to them while they are in care, and must listen to the children’s views on the matter.</p>
<ul style="list-style-type: none"> To reasonable privacy and to possession of their personal belongings. To privacy during discussions with members of their families, subject to subsection (2). 	<p>Children in care are entitled to privacy, and to keep their personal belongings. The <i>CFCSA</i> uses the word “reasonable,” recognizing that there might be occasions when limiting these rights are appropriate. For instance, the child’s right to speak privately with members of their family may be limited by a court order. Or these rights may not apply under circumstances of threat to the safety or well-being of the child or other person.</p> <p>For example, a child may hoard food in their room to the point that it becomes a health hazard. Any such limitation, however, must be made in a way that still respects the child. This means that such decisions should usually be made openly, with the child being given the opportunity to express an opinion on the matter.</p>
<ul style="list-style-type: none"> To be free from corporal punishment. 	<p>Foster parents must not subject children in their care to any use of physical force, such as spanking, hitting or slapping, that may inflict pain. This is an absolute right, with no exceptions.</p>
<ul style="list-style-type: none"> To be informed of the standard of behaviour expected by their caregivers and of the consequences of not meeting their caregivers’ expectations. 	<p>Children must know what behaviour is expected of them, what the rules of the house are, and what will happen if they break these rules.</p>

Rights of children in care (section 70)

<i>What the CFCSA says</i>	<i>What this means for foster parents</i>
<ul style="list-style-type: none"> To receive medical and dental care when required. 	<p>The foster parent's role in carrying out the rights listed at left is described in each child's Plan of Care (which is created with input from the foster parent).</p> <p>Be alert for emotional as well as physical signs that a child may need help. It could be that they're excessively sad or depressed, or having an unusually hard time adapting to being in care.</p>
<ul style="list-style-type: none"> To participate in social and recreational activities if available and appropriate and according to their abilities and interests. 	<p>It's important for children to have friends and to be involved in activities. Speak to the child's social worker if you need help finding out what's offered in your community.</p>
<ul style="list-style-type: none"> To receive the religious instruction and to participate in the religious activities of their choice. 	<p>Remember that the child may not be comfortable with any religion. That's their choice, too.</p>
<ul style="list-style-type: none"> To receive guidance and encouragement to maintain their cultural heritage. 	<p>If you don't have the background or knowledge to help the child preserve their cultural ties, ask their social worker to help you locate others who can.</p>
<ul style="list-style-type: none"> To be provided with an interpreter if language or disability is a barrier to consulting with them on decisions affecting their custody or care. 	<p>The degree of consultation in all cases will depend on the child's development and ability to understand. If children have problems understanding the language used in the home, or have disabilities that are barriers to speaking or understanding, they have a right to assistance (through interpreters or augmentative communication aids) to help them communicate about important matters.</p> <p>The child's social worker can help you obtain interpretive services.</p>

Rights of children in care (section 70)

<i>What the CFCSA says</i>	<i>What this means for foster parents</i>
<ul style="list-style-type: none"> • To privacy during discussions with a lawyer, the Representative for Children and Youth, the Ombudsperson, a member of the Legislative Assembly or a member of Parliament. • To be informed about and to be assisted in contacting the Representative for Children and Youth. • To be informed of their rights under this act and the procedures available for enforcing their rights. 	<p>Foster parents and the children’s social workers must tell children what their rights are. This includes being informed about what the Representative for Children and Youth can do for them and how to contact the office if they wish to. The foster parent or child’s social worker can also contact the office on behalf of the child.</p>
<ul style="list-style-type: none"> • A child who is removed under Part 3 is entitled to exercise the right in subsection (1)(l), subject to any court order made after the court has had an opportunity to consider the question of access to the child. 	<p>The foster parent ensures that a child who has been removed from their home because of a protection concern has privacy when meeting with members of their family unless the court orders otherwise.</p> <p>Consult with the child’s social worker for clarification.</p>
<p>This section does not apply to a child who is in a place of confinement.</p>	<p>The rights of children in care are not enforceable when the child is detained in a mental health or correctional facility.</p>

Screening, Assessment and Approval Roles and Responsibilities for all Non-Primary Caregiver Situations for Children and Youth In Care

	Foster caregiver in their role as a prudent parent	Social workers in their role as a delegated social worker under CFCSA
Child Minding (also referred to as Babysitting)	Selects and assesses their child minder guided by a checklist.	Provides support and advice as needed for the circumstances.
Child Care	<p>Screens and selects the Child Care provider using the <i>Parents' Guide to Selecting and Monitoring Child Care in BC</i>.</p> <p>Consults with the child's social worker and resource social worker about their selection.</p>	Completes screening via Criminal Record Checks and Prior Contact Checks on unlicensed child care providers.
Sleepovers	<p>Using parental due diligence the caregiver checks out the sleepover arrangements and confirms the adults in the sleepover home or setting are providing a safe environment for the child or youth.</p> <p>For sleepovers as part of school, sport team or recreation events the caregiver confirms the supervising adults are providing a safe environment.</p>	Child's social worker and resource social worker can provide consultation as needed for the circumstances.
Significant and Unsupervised Situations	<p>Using parental due diligence ensures the safety of the child around casual visitors in home and when the child goes on "play dates." For youth the foster parent is aware of and discusses with the youth the safety and risk factors associated with friendships and youth activities.</p> <p>Parental due diligence is used for situations involving coaches, tutors, music teachers, etc., and are included in the child's Plan of Care.</p>	<p>Child's social worker and resource social worker can provide consultation as needed for the circumstances.</p> <p>Completes screening via Criminal Record Checks and Prior Contact Checks on the following people:</p> <ul style="list-style-type: none"> • adults or youth 18 years and over residing in the home where the child lives • adults or youth 18 years and over visiting/ staying overnight in the home where the child lives for more than 30 days. This is deemed as new adults or youth 18 years and over now residing in the home • adults or youth 18 years and over who are in an intimate partner relationship with the foster caregiver who regularly visit and/or stay in the home where the child resides

	Foster caregiver in their role as a prudent parent	Social workers in their role as a delegated social worker under <i>CFCSA</i>
Relief Caregivers	<p>Use of approved foster caregivers or adoptive families as relief caregivers is preferred.</p> <p>When not possible the foster caregiver can select and assess their relief care provider using the Assessment Guide and Checklist provided.</p>	<p>Completes screening via Criminal Record Checks and Prior Contact Checks on the relief care provider being assessed by the foster caregiver.</p> <p>Foster caregiver and resource social worker consult throughout the selection, screening and assessment process to complete a joint approval process.</p>

Relief Care Provider Assessment Guide and Checklist
(for completion by approved Foster Caregiver)

CONTACT INFORMATION			
Foster Caregivers Names and Address		Home Phone ()	
		Alternate Phone ()	
Proposed Relief Care Providers Names 1.	D.o.B	Home Phone ()	
		Alternate Phone ()	
2.	D.o.B	Home Phone ()	
		Alternate Phone ()	
Address	City/Town	Postal code	

Summary of the Relief Care Provider Assessment Steps: (check off when completed)

1. Assessment discussions

Using the Assessment Guide Questions, document your discussions with the proposed Relief Care Providers

2. Awareness of foster caregiver’s contractual obligations and required standards, policies and procedures

Inform the proposed Relief Care Provider of your obligations and responsibilities as outlined in the Foster Caregiver’s written agreement with the Director (Family Care Home Agreement).

Provide the proposed Relief Care Provider with the following documents related to Standards, Policies and Procedures, discuss the content and answer questions directly or with advice from your resource social worker:

Foster Family Handbook

Standards for Foster Homes

In particular review the following Standards for Foster Homes and expected Caregiver Practices with the proposed Relief Care Provider and ask them to sign the section below acknowledging their agreement:

- A.1: Uphold *CFCSA* section 70, Rights of Children in Care
- B.2: Manage Reportable Incidents
- C.1.7: Maintain Confidentiality
- D.1: Practice Positive Parenting
- D.1.11: Follow MCFD Discipline Policy

3. Observing the environment of care

Foster Caregiver visits the proposed Relief Care Providers home (required in case the care is provided in the Relief Care Provider’s home and not in the Foster Caregiver’s home) to observe the Standards for Foster Parents - Environment of Care (E.1) requirements are met within the home, including fire and toxic fume safety, infant equipment as appropriate, safe sleeping arrangements for all ages, car safety equipment and safe storage of hazardous materials. Note date on which the environment of care check was completed.

Date: _____

Note: If you have any questions about how to assess the home environment and how to mitigate any gaps (such as sharing your infant equipment with the Relief Care Provider) discuss with your Resource Worker for further advice or ideas.

4. Child/youth views about proposed Relief Care Provider and ongoing experiences with Relief Care Providers

Foster Caregiver discusses plans for relief care with all children and youth placed in their home. Wherever possible it is best if children can meet proposed Relief Care Providers while the assessment and screening process is underway. This allows both parties to get a sense of each other and how well matched they are for a relief care situation. The Foster Caregiver seeks the child or youth’s views about the proposed Relief Caregiver. Once the relief care commences the Foster Caregiver seeks the child or youth’s view on an ongoing basis to confirm the child’s comfort level and their experience of the relationship with the Relief Care Provider.

5. Acknowledgements

As the proposed Relief Care Providers, I/we acknowledge the assessment steps have been completed and that I/we agree to the standards, policies and procedures indicated on this checklist.

Relief Care Providers Signature	Date
Relief Care Providers Signature	Date

As the Foster Caregivers, I/we acknowledge the assessment steps have been completed and that I/we agree that the MCFD Standards for Foster Homes Standards are met by the proposed Relief Care Provider.

Foster Caregivers Signature	Date
Foster Caregivers Signature	Date

As Foster Caregivers I/we confirm that I/we have completed each of the steps outlined in the checklist, directly or in partnership with my resource workers. I/we recommend _____
 _____ are approved as a Relief Care Provider for the children in my home.

Foster Caregivers Signature	Date
Foster Caregivers Signature	Date

6. Information sharing

I confirm that each time _____ provides relief care I will share with the Relief Care Provider the most up to date and relevant information about the child’s individual needs and circumstances as indicated in the child’s Plan of Care and as required by information sharing policies. My whereabouts and contact details will be provided to the Relief Care Provider and they know who to contact in an emergency.

Foster Caregivers Signature	Date
Foster Caregivers Signature	Date

Foster Caregiver's Guide for Assessing Relief Care Providers

Assessment Discussion Questions

(suggested questions for Foster Caregivers to use to cover all the required areas)

Proposed Relief Care Providers Information

1. Who lives in your home?
2. Who will be the primary care providers during the relief stay?
3. What hours are you able to provide relief care? During the day, weekends, holidays? Are there specific times when you are unable to provide relief?
4. Why are you interested in providing relief care services?
5. Describe the support system you will have while you will be providing relief care?
6. Do you have any physical health conditions or mental health concerns that may affect your ability to care for children?
7. Do you already know the child/children you'll provide relief care to? Y/N
8. If yes, how would you describe the child's strengths and care needs?

Caregiving Knowledge and Experience

1. What do you consider to be your strengths and challenges as a caregiver?
2. What is your caregiver experience to date in caring for and/or working with children and/or youth?
3. Do you have any specific caregiver training or experiences that are relevant for the role of a relief care provider?
4. Describe a challenging behaviour (e.g., hitting others, lying, not listening) you've encountered with a child in the past – how did you handle it?
5. What child behaviour management (discipline) strategies do you commonly use?
6. What would you consider to be the typical stage of development for the child(ren) proposed for your home? What may be different if a child has experienced developmental delays?
7. How may experiences of trauma, abuse and neglect impact a child's typical development? Discuss some examples.
8. Describe some of the comfort or calming strategies you have used for a child or youth that is in distress? Discuss some examples.
9. While the child is in your care what kind of family activities would you expect a child to take part in? (e.g., recreation, family movies nights, religious activities)
10. Where will the child sleep while staying at your home for relief care?

Environment of Care Check (including home and car safety checks) undertaken on _____ (Date).

References

List three References who can provide information on your parenting/caregiving experience and capacity. (Note: by providing you with the names of references the Relief Care Provider is in effect giving you their consent to contact the references).

Full Name/Address	Home Phone ()	Alternate Phone ()
Full Name/Address	Home Phone ()	Alternate Phone ()
Full Name/Address	Home Phone ()	Alternate Phone ()

I/we the proposed Relief Care Providers have reviewed and agreed with the summary of the assessment discussions with the Foster Caregiver.

Proposed Relief Care Providers Signature	Date
Proposed Relief Care Providers Signature	Date

**Screening Checklist (for completion by the Delegated Social Worker)
and Joint Approval Documentation**

CONTACT INFORMATION			
Foster Caregivers Names and Address		Home Phone ()	
		Alternate Phone ()	
Proposed Relief Care Providers Names 1.		D.o.B	
		Home Phone ()	
2.		D.o.B	
		Home Phone ()	
Address		City/Town	Postal code

1. Screening checks

The resource social worker completes the following documentation and screening checks and discusses any concerns that arise with the proposed Relief Care Providers (see CRC Policy for guidance on managing consents and information sharing if a record of interest is found):

- Consent for Prior Contact Check (PCC)** **PCC Completed**
- Consent for Criminal Record Check (CRC)** **CRC Completed**

2. Joint review of assessment and screening steps and recommendation for approval

The resource social worker reviews the Summary of the Relief Care Provider Assessment Steps including the Environment of Care checklist with the foster caregiver and discusses any areas that require mitigation or support to make this relief caregiving situation workable. The foster caregiver and resource social worker discuss their assessment and screening conclusions and jointly recommend approval to the child's care team.

Recommend _____ for Approval as a Relief Care Provider

Foster Caregivers Signature	Date
Resource Social Workers Signature	Date

Child's Care Team (shared awareness of approved Relief Care Providers and relief plans)

All members of child's care team are jointly responsible for the development and outcome monitoring for the child's Plan of Care. The relief care plan is also outlined in the child's Plan of Care and Relief Care Providers are encouraged to attend any caregiver education or training that pertains to the needs of the children being cared for. For the duration a Relief Care Provider is providing relief care for a child they are considered part of the child's care team and included in all relevant planning and information sharing required to keep the child safe and healthy.

Foster Parent's Pre-placement Checklist

Foster parents often wish they had asked more questions before accepting a child into their home. This checklist should help you in your discussion with the ministry. Some questions might not apply to particular or emergency placements.

1. Why is the child being placed?
2. What are previous placement experiences of the child?
3. What is the child's legal status?
4. What is the family situation? Parents' names?
5. What is the plan for the child? Expected length of placement?
6. Will there be pre-placement visits by the child?
7. Does the child understand why he or she has moved or been separated from the parents?
8. Where are the parents?
9. Will the parents or extended family visit? Where? How often? Are there people who are not permitted to visit or have contact with the child?
10. Are there brothers or sisters? Where are they? Birthdates?
11. When will the social worker visit or call?
12. When will I receive the referral form from the social worker, giving important personal information about the child?
13. When will I receive the child's Health Care Passport?
14. When was the last physical examination?
15. Is the child in good health? What about allergies, immunizations, medications, dental care, last dental checkup?
16. Are there significant religious, cultural or ethnic considerations for this child?
17. What grade is the child in at school? What school?
18. Are there school problems?
19. Has the child any special behavioural problems or unusual habits?
20. Could any of their behaviours pose a risk to other children?
21. Will the child have adequate clothing?
22. What will make the child feel most at home (e.g., food likes and dislikes, favourite toys, and so on)?
23. Who should I call after hours, and what is the number?
24. When will I meet with the child's social worker to review the caregiver's responsibilities section of the child's Plan of Care?
25. What transportation needs to be provided for this child?

Checklist to Assist Foster Parents Working with Youth Transitioning to Adulthood

1. Does the youth know who they can talk to if they have any questions about their future?
2. Does the youth feel ok about talking to you, their caregiver, about any questions they may have about better preparing themselves for their future?
3. Have you been asked to participate with the youth and social worker in a Youth Transition Conference?
4. Do you have a "Life Book" detailing significant events and photos for the youth to take with them when they leave care?
5. Has the youth completed the Youth Planner? (Foster parent needs to ask youth's social worker to print it out for them.)
6. Does the youth have both a savings and chequing account?
7. Has the youth learned the benefits of saving money?
8. Does the youth have a learner's permit? www.icbc.com/driver-licensing/id
9. Does the youth have a résumé? A template for a cover letter?
10. Would the youth be able to explain how they would look for work?
11. If the youth is planning on taking post-secondary education or vocational training, are they aware of the Agreements with Young Adults (AYA) program? www.mcf.gov.bc.ca/youth/aya.htm
12. If the youth is planning on taking post-secondary education or vocational training, are they aware of the Youth Educational Assistance Fund (YEAF) www.aved.gov.bc.ca/studentaidbc/forms/docs/special-programs/yeaf_application.pdf
13. Is the youth aware of how to apply to for a grant or bursary or student loan if they want to go to post-secondary school?
14. Does the youth have a record of all the doctors/dentists they have seen?
15. Does the youth have a regular family doctor?
16. Has the youth seen a doctor within the past year?
17. Does the youth see a dentist regularly (every six months)?
18. Has the youth seen an eye doctor within the past year?
19. Is the youth aware of how MSP works when they become an adult?
20. If the youth is 18 years old, have they completed an Income Tax return so that they will be able to receive GST/HST credit and be eligible for premium assistance when they take out their own MSP?
21. PharmaCare – when they get their own MSP does the youth know that they will need to register for "Fair PharmaCare"? www.health.gov.bc.ca/exforms/pharmacare/5349fil.pdf
22. If the youth is taking any prescribed medication, do they know how it will be paid for once they turn 19 and leave your care?

Aboriginal youth

23. Are you aware of a "cultural plan" for the youth so that they can learn more about their culture/heritage?
24. Does the youth participate in Aboriginal cultural activities?

Missing Children and Youth Policy and Procedures

Definition of Missing Child/Youth: any child or youth in care, in a non-permanent out-of-care placement including respite care, or under a Youth Agreement whose whereabouts are unknown and there are additional concerns about the safety of the child or youth.

Responding when a Child/Youth's whereabouts are unknown and there are no additional concerns about the Child/Youth's safety

When a child or youth is unreasonably late coming home the caregiver/care provider will take the same actions as a prudent and responsible parent would including trying first to locate the child or youth prior to contacting the social worker/Centralized Screening,² or Police/RCMP.

Actions taken by a prudent and responsible parent in an effort to locate a child or youth include, but are not limited to the following:

- actively trying to contact the child/youth directly via their cell phone, etc.
- actively seeking out and contacting anyone, such as friends, coaches, or teachers of the child/youth, who may know the child/youth's current or recent whereabouts; and
- identifying and checking likely locations where the child/youth may be.

Responding when a child/youth's whereabouts are unknown and there are additional concerns about the child/youth's safety

The following factors are considered when determining if the child/youth is **unsafe**:

- vulnerability (e.g., due to: age or level of development, physical or cognitive disability, addictions or mental health concerns or involvement in high risk activities);
- the mental or emotional state of the missing child/youth (e.g., emotionally distraught, suicidal or likely to cause harm to self or others);
- extreme weather (no coat, boots, etc.) or other physical conditions (e.g., terrain);
- any suspicious or dangerous circumstances surrounding the child/youth's disappearance, which suggest the child/youth may be the victim of a crime;
- it is out of character for the child/youth to be missing;
- there is reason to believe that the child/youth may have been involved in an accident or mishap;
- the whereabouts of the child/youth have been unknown to the caregiver/care provider overnight.

If the child or youth's whereabouts are unknown and there are additional concerns about their safety, he or she is considered to be Missing and the caregiver/care provider, the child/youth's social worker or Centralized Screening will immediately call the Police/RCMP to report a missing child/youth in order for the police to take action to locate the missing child or youth.

If it is the caregiver/care provider who has called the Police/RCMP, he or she will also inform the child/youth's social worker or Centralized Screening that Police/RCMP have been called regarding the missing child/youth and that action to locate the child/youth was requested. The child/youth's social worker makes a Reportable Circumstance Report.

² Centralized Screening replaces all previous references to After Hours or Provincial After Hours

Once a report has been made to Police/RCMP about a missing child/youth, the caregiver/care provider and/or the child/youth's social worker will:

- ensure that all parties involved in searching for the child/youth are provided with all information pertaining to the possible whereabouts of the child or youth;
- ensure a detailed description is provided to the Police/RCMP of the last known clothing that the child or youth was wearing as well as any other items known to be or likely to be in their possession (e.g., cell phone, backpack, school books, sports equipment, etc.);
- ensure a current picture of the child or youth is provided to the Police/RCMP;
- ensure a physical description of the child/youth is provided to the Police/RCMP, including height, weight, hair/eye colour, glasses, braces, facial hair and other distinguishing features such as birth marks, tattoos, piercings, scars, or physical disabilities;
- ensure a list of known friends and associates is provided to the Police/RCMP; including addresses and phone numbers;
- ensure the Police/RCMP know that the child/youth being in foster care is not to be included in any information made public in effort to locate the child/youth; and
- determine with the Police/RCMP how their efforts regarding locating the child or youth will be communicated and to whom.

The child/youth's social worker will take responsibility for communication with the parent(s) about the missing child or youth, unless the responsibility for such communication has been assumed by the Police/RCMP.

When a Child/Youth has been located

When the child/youth has been located, the child/youth's social worker takes responsibility to ensure all parties are notified as soon as possible that the child/youth is no longer missing.

Physical or emotional injuries observed or suspected

If injuries are observed or suspected, the caregiver and/or the child/youth's social worker ensure the child/youth is provided medical assessment and treatment.

If the child/youth experienced any form of emotional/psychological trauma while missing, the child/youth's social worker ensures appropriate support for the child/youth.

If the injuries meet the criteria in the Reportable Circumstance Policy, the child/youth's social worker makes a further Reportable Circumstance report.

When a Child/Youth is habitually missing

For a child/youth that is habitually missing, the child/youth's social worker works with the child or youth, foster parents and others to determine information such as:

- the reasons why the child/youth repeatedly goes missing;
- where the child/youth goes, with whom and what they do while missing;
- other information that could be used to locate the missing child/youth in the future; and
- whether there is a local protocol in place between Police/RCMP and MCFD/DAA's re: habitually missing children/youth.

The child/youth's social worker develops a plan with the child/youth and relevant service providers, including those providing residential care to address identified issues and offers resources and services to help prevent the child/youth from going missing again.

Glossary

The following definitions of terms used in this handbook are taken from the *Child, Family and Community Service Act* and from the ministry's policies. Check the Index to see how terms are used in context.

Aboriginal child:	A child: <ul style="list-style-type: none">(a) who is registered under the <i>Indian Act</i> (Canada),(b) who has a biological parent who is registered under the <i>Indian Act</i> (Canada),(c) who is under 12 years of age and has a biological parent who<ul style="list-style-type: none">(i) is of aboriginal ancestry, and(ii) considers himself or herself to be aboriginal, or(d) who is 12 years of age or over, of aboriginal ancestry and considers himself or herself to be aboriginal.
Best interests of the child:	Refers to factors listed in section 4 of the <i>CFCSA</i> .
Care:	Physical care and control of a child by a director or other person.
Caregiver:	A person with whom a child is placed by a director and who, by agreement with the director, has assumed responsibility for the child's day-to-day care.
Child:	A person under 19 years of age; includes a youth.
Child in care:	A child who is in the custody, care or guardianship of a director.
Continuing custody order:	An order under section 41(1)(d), 42(3)(b), 49(4) or (5) or 60 of the <i>CFCSA</i> , placing a child in the continuing custody of a director.
Custody:	Includes care and guardianship of a child.
Director:	A person designated by the minister under section 91 of the <i>CFCSA</i> and includes for the purposes of sections 84 to 86 the director of adoption.
Homemaker services:	Includes services performed in the home by family members, relatives or friends, home support workers, or homemakers on contract to a director.
Kin:	Includes people related by blood, marriage or long-standing family-like relationships.
Plan of Care:	An action-based planning tool for children in care, used to identify specific developmental objectives based on continuous assessments of the child's evolving needs and the outcomes of previous decisions and actions. Care plans are completed by the child's worker with the involvement of the child, the family, the extended family and Aboriginal community if the child is Aboriginal, the care provider, service providers and significant people in the child's life.

- Prudent parent:** When a foster parent acts as a prudent parent, he/she, paying particular attention to the individual child/youth and their developmental needs, makes careful and sensible parental decisions that maintain the child's health, safety and well being.
- Smoke and vapor free environment:** Neither smoking nor vaping takes place at any time in enclosed spaces where children in care would be exposed to second-hand smoke/vapour or the residual toxins from second-hand smoke/vapour (including but not limited to tobacco, cannabis, and e-substances). This includes a foster caregiver's residence and vehicle. This does not restrict spiritual activities relating to the use of tobacco.
- Support Services Agreement:** A written agreement made under section 5 of the *CFCSA*, under which a director may agree with a parent to provide services to support and assist a family to care for a child.
- Temporary custody order:** A court order made under section 41(1)(b) or (c), 42(3)(a) or 60 of the *CFCSA*, placing a child for a specified period of time in the custody of a director or another person, and includes any extension of or change to that order.
- Youth:** A person who is 16 years of age or over but under 19 years of age.

Index

- Aboriginal child, 5, 14, 26, 27, 37, 48, 55, 62-66, 80, 81
- Aboriginal community, 15, 62, 64, 66, 81
- Aboriginal right to harvest fish and game, 37
- Abuse, allegations of, 14, 19, 58
- Abused children, 19, 20, 23
- Adoption, 7, 11, 15, 40, 66, 81
- Adoption Act*, 7, 30, 66
- Advocacy, 5, 55, 60
- After Hours service, 29, 79, 85
- Agreements with Young Adults program, 39, 80
- Allegations of abuse, see Abuse, allegation of
- Allowances, 34, 44
- Annual reviews, 56
- Appeals, 59
- Armed forces, enlistment in, 36, 40

- B.C. Federation of Foster Parent Associations, 1, 3, 5, 38, 47, 52, 53, 54, 55, 58, 59, 60
- Best interests of the child, 5, 14, 31, 48, 49, 58, 64, 65, 81
- Birth certificate, 33, 36
- Birth control, 31
- Birth parents, 15, 62

- Car seat, 32, 44
- Caregiver's responsibilities, 5, 9, 16, 19, 25, 48, 49, 50, 51, 53, 70, 72, 78, 79, 81
- Caregiver service records, 17
- CFCSA*, see *Child, Family and Community Service Act*
- Child and youth care worker, 46, 47
- Child care, 3, 5, 24, 48, 49, 51, 70
- Child, definition of, 81
- Child, Family and Community Service Act*, 6, 7, 13, 14, 17, 21-23, 36, 60, 62-65, 67, 70, 73, 81, 82
- Child minding/babysitting, 5, 11, 20, 44, 46, 48, 49, 70
- Children in care with infants, 45, 46
- Client Service Agreement, 10
- Closure of Family Care Homes, 57, 58
- Clothing grant, 44
- Community agencies, 13, 63
- Community services, 56, 59, 60
- Computer placement and internet safety, 26
- Confidentiality and disclosure of information, 65

- Conflict resolution, 59
- Continuing custody, 9, 30, 31, 35, 66, 81
- Corporal punishment, 23, 67
- Criminal offences, 38
- Culture, preserving child's, 5, 26, 27, 37, 55, 80
- Custody, definition of, 8, 81

- Damages by foster child, 38, 45, 52, 53
- Dealing with past abuse, 19, 20, 23
- Delegated Aboriginal Agency (DAA), 1, 3-5, 7, 14, 27, 29, 43, 47, 60
- Dental care, 26, 31, 67, 68, 79
- Direct Deposit, 43
- Director, definition of, 6, 81
- Discipline, 23, 24, 49, 51, 57, 75
- Disclosure, see Confidentiality
- Driver's licence, 8, 36, 80

- Earnings, child's, 35, 36
- Education, 16, 25, 26, 35, 36, 39, 44, 45, 49, 57, 59, 66, 80
- Emergencies, 28, 29, 38, 48, 51
- Emergency care, 9, 46, 59, 79
- Estates and trusts, 35
- External review, 57
- Eye care, 31

- Family Care Home Agreement, 8, 10, 17, 52, 67, 72
- Family Care Home program, 1, 3, 4, 6, 10, 62
- Family care rate, 26, 43-45
- Family Relations Act*, 7, 9, 30, 66
- Federation of Aboriginal Foster Parents (FAFP), 1, 3, 5, 54, 55, 58, 59, 60,
- Federation of B.C. Youth in Care Networks, 38
- Firearms, 37
- Freedom of Information and Protection of Privacy Act*, 65

- Guardianship, definition of, 8
- Guardianship expenses, 45
- Guide for assessing relief care providers, 75

- Health care, 27
- Health Care Passport, 18, 28, 79,
- Homemaker services, 46, 81
- Home support services, 46
- Home visits, 21, 56
- Hunting, 37

ICBC, 36
 In care, definition of, 1, 81
 Income tax, 39, 54, 80
 Infant development services, 46
Infants Act, 7, 9, 30, 31, 66
 Injury to foster parent, 30
 Insurance, 36, 38, 45, 52, 53, 54
 Interim custody, 66

 Jobs, children's, full- or part-time, 35, 40

 Lawsuits, 38
 Legal matters, 35, 38
 Legal status, 7, 8, 30, 31, 36, 79
 Life Book, 18, 80
 Long-term care, 9
 Lost cheques, 43

 Marriage of child in care, 8, 35, 36
 Medical assessment, 27, 27
 Ministry of Children and Family Development (MCFD), 1, 3-7, 9, 10, 14, 17, 22, 26, 29, 31, 38, 43, 47, 52-53, 56, 58-60, 62-63, 73-74, 79, 81
 Missing children, 29

 Ombudsperson, 57, 60, 69
 One-time-only payment, 44, 45
 Out-of-home living arrangements, 65
 Out-of-province children, 8

 Passports and visas, 33
 Per-diem payments, 9, 44
 Permission-to-travel letter, 33
 Physical punishment, 22, 23, 24, 29, 51, 67
 Placement of children, 1, 6, 7, 9, 10, 13-16, 26, 30, 39, 40, 43, 44, 52, 57-59, 64-67, 79
 Plan of Care, 3, 15, 16, 19, 21, 24, 25, 33, 43, 46, 49, 50, 56, 58, 66-68, 70, 74, 78, 79, 81
 Positive parenting methods, 21, 23
 Pre-placement checklist, 79
 Pre-placement visit, 14, 79
 Pregnancy of child in care, 31
 Private school, 26, 45
 Prudent parent, 5, 11, 26, 48, 49, 70, 82
 Public Guardian and Trustee, 35, 60

 Regional Foster Parent Support Agencies, 3, 56, 58, 60
 Regular family care home, 10
 Relief care provider assessment, 50, 51, 71, 72, 75-78
 Relief to foster parents, 9, 10, 11, 46, 48, 50, 51, 52
 Representative for Children and Youth, 60, 69
 Respite care, 9, 10, 18, 50
 Restraint, physical, 24
 Restricted family care home, 10
 Review, annual, see Annual review
 Rights of children in care, 5, 6, 22-25, 37, 48, 55, 60, 62, 67, 68, 69, 73
 Rights of foster parents, 58, 59

 Schools, 13, 17, 18, 25, 26, 35, 40, 43-45, 47, 65, 70, 79, 80
 Seat belts, 32
 Separation, dealing with feelings of, 4, 19, 21, 60
 Service delivery principles (CFCSA), 63
 Short-term care, 9
 Smoke-free environment, 22, 23, 82
 Social worker, 1, 5-8, 11-20, 22, 24-41, 43-51, 53, 55-60, 63, 65, 67-71, 73, 77-80
 Special Needs Agreement, 9, 66
 Specialized family care, 9, 10
 Start-up expenses, 44
 Summer camp, 34, 47
 Supplementary relief, 52
 Supplementary supports, 45
 Support Services Agreement, 9, 10, 50, 82

 Temporary custody, 35, 66, 82
 Transportation, 30-33, 35, 43, 45, 78
 Travel, 8, 32-34, 45
 Travel by air, 33
 Trusts, 35, 60

 Vacations, 13, 32, 34

 Waivers of liability, 34
 Wilderness and other outdoor activities, 34
Wildlife Act, 37
 WorkSafeBC, 54

 Youth, definition of, 82
 Youth transitioning to adulthood, 39, 46, 80

Quick Reference

Emergencies - Other useful resources

Ministry of Children and Family Development After Hours Line

For emergencies outside office hours (usually 8:30 a.m. to 4:30 p.m., Monday to Friday), foster parents can call the ministry's After Hours Line:

- In Vancouver, the North Shore and Richmond, call 604-660-4927
- In the Lower Mainland from Burnaby and Delta in the west to Maple Ridge and Langley in the east, call 604-660-8180
- For the rest of the province, call toll free at 1-800-663-9122

Poison Control Centre - 1-800-567-8911 from anywhere in B.C.

Helpline for Children - to report child abuse or neglect

- Dial 310-1234 from anywhere in B.C. 24 hours a day (**no area code required**).

Quick reference for emergencies, disasters, accidents and injuries

www.mcf.gov.bc.ca/foster/pdf/foster_parents_emergency_info.pdf

Local fire department _____

Local police _____

Local hospital emergency room _____

Local crisis information line _____

Additional numbers you may wish to fill in yourself

Child's social worker Name: _____

Telephone: _____

Resource social worker Name: _____

Telephone: _____

Ministry District Office _____

Delegated Aboriginal Agency Office _____

Doctor/Physician Name: _____

Telephone: _____

Local Foster Association _____

Mental Health Centre _____

Public Health Centre _____

Probation Officer Name: _____

Telephone: _____

Other important numbers

_____	_____
_____	_____
_____	_____

