Foster Parent Handbook

Journey to Excellence

Tennessee Department of Children's Services | Policy | April 2018
Dear Foster Family

The belief that all children, in all walks of life, are entitled to safety, permanency and well-being is a basic guiding principle in public child welfare work. For the population of children and youth who face custodial episodes, there are unique challenges, both for the child and for our Department in meeting their individual needs. As a Department, we could not begin to address the multiplicity of challenges without the strength of the partnership that we have with dedicated foster parents.

Each day you "step to the plate" and provide stability and a sense of normalcy for Tennessee's vulnerable in care population. In addition to opening your homes and hearts to children/youth in need, you provide encouragement, nurturing, coaching, mentoring, and uncountable other supports for both short term and long term custodial episodes. You each make sacrifices in your personal lives to enhance the lives of others.

On behalf of the DCS Division of Permanency, we "THANK YOU". Thank you for reaching out and being willing to help. Thank you for answering the telephone in the middle of the night when we are seeking a placement. Thank you for transporting for attending school conferences, CFTM's and court hearings. Thank you for the myriad of efforts that contribute to our shared objective of safety, permanency, well-being and normalcy in the life of each child that we touch.

With gratitude,

Sandra Wilson, Executive Director
Office of Assessments, Permanency and Independent Living Services

Anna Wiginton, Director
Foster Care and Resource Eligibility
Dear Foster Parent:

On behalf of the Department of Children's Services, I want to take this opportunity to personally thank you for opening your home to care for children who enter state custody from many walks of life. It is our job to connect those children with stable and devoted families, and ultimately permanency in a caring home.

As foster parents, your support enables our department to fulfill its mission of providing for and serving our state's most vulnerable children. You individually and collectively serve as advocates for Tennessee's children. Your willingness to provide supervision, guidance and nurturing through adoption or permanent guardianship is a testament to your commitment to our state's most vulnerable citizens.

Daily, we are reminded of the value that you each bring to the lives of our children. Thank you for your commitment and for representing the "heart" of Tennessee.

Sincerely,

Bonnie Hommrich
Commissioner
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Chapter 1
The Importance of Fostering

What Fostering Is
Foster parents care for children for many different reasons—from a place of personal mission, faith-based beliefs, a desire to expand their families and everything in between.

Foster parenting is assuring that children feel safe and heal from trauma, have positive role models in their lives, and have a parent who takes care of their physical and emotional needs while supporting and preparing them to achieve permanency.

What Foster Parenting is Really Like
Darlene B. and her husband, Robert, are foster parents in Tennessee. They have cared for 30 children during a five-year period. Darlene and Robert’s perspective on fostering is listed below.

At First
- Foster parenting means getting a call at 2 a.m. to accept children into our home, climbing out of bed and throwing on sweats to ready a room before the children arrive.
- Foster parenting means witnessing hurt and pain beyond belief as a child opens up and tells you of their past trauma.
- Foster parenting means constant juggling of medical, dental, therapist and specialist appointments in addition to meetings and court dates.
- Foster parenting means sleepless nights to comfort a scared child who wakens with night terrors, wet beds or other "accidents" and then trudging off to work the next morning with just a tad bit more make-up on to camouflage the bags from the sleepless night.

During
- Foster parenting means opening a child's mind and heart to a new environment full of love and new activities and watching as they delight in each new experience.
• Foster parenting means opening your heart as well to a parent who truly loves their child yet struggles with emotional or economic hardship, mental illness or addiction.

• Foster parenting means sharing in a child's joy as they sleep for the first time without a light on, or take their first step, or speaks their first word.

**After**

• Foster parenting means loving and caring for a child while they are in your home, then letting go.

• Foster parenting means saying a prayer each night for their well-being and delight when someone shares a happy encounter with a former foster child.

**Special Thoughts from Tennessee Foster Parents**

“I love seeing families put back together after reunification and the beauty of families being built upon through adoption” TN Foster Parent Laura M.

“Our last placement was an 11 year old girl. Her first night, we said: ‘You seem to be handling it so well.’ She said, ‘Well, it feels safe.’ That’s why we do it.” TN Foster Parent Ruth M.

“The blessing I get is so much bigger, and what they have taught me—oh, when I look back and think what I would have missed out on if I had said no.” Foster/Adoptive mother, Laura M.

**General Recruitment**

Recruitment efforts raise awareness of the need for foster homes for children and youth in the child welfare system. These efforts also increase the pool of foster homes so that Department of Children’s Services (DCS) can make placement decisions based on the best possible match for a child/youth and their needs. Each region is responsible for developing a regional recruitment plan based on specific needs.

General recruitment gets the message about the need for foster parents out to the general population. Some examples of current recruitment efforts are:

• Public service announcements
• Information booths at community events, such as Walk Me Home

• Community billboards

• Notifications in Church and community publications

• Specific foster care and adoption internet sites and events

**Targeted Recruitment**

Targeted recruitment focuses on specific families, neighborhoods, or communities who are best matched to care for specific children/youth in need of foster homes. Targeted recruitment can help assure that a child stays within their own community and school and close to family members.

**Individual Recruitment**

An individual recruitment plan is utilized once a child's permanency goal is changed to adoption or permanent guardianship and a permanent family has not been identified. The purpose of an individual recruitment plan is to find the best forever family for a specific child or sibling group.

The recruitment plan not only outlines the recruitment tools and strategies that will be used to help identify a family; it also identifies the current support resources that are available for the child. These resources can include the child's birth family, friends, neighbors, teachers, coaches, DCS and contract agency staff, current and former foster parents, etc. Anyone that has or has had a significant connection to the child is a potential resource and should be explored for the purpose of support and/or permanency. An individual recruitment plan is updated at least quarterly.

Many children/youth that are in full guardianship have a goal of adoption without an identified permanent family. These children/youth are referred to the FOCUS team which includes DCS, Contract providers, and Harmony Family Center. FOCUS stands for **Finding Our Children Unconditional Support**. The FOCUS team is responsible for identifying permanent families for those children in full guardianship with no family identified.
Maintaining and Retaining Great Foster Homes

DCS is committed to retaining and maintaining great foster homes. Here are some of the ways DCS respects and supports foster parents.

- Relief- Providing a respite care when foster parents need a break
- Mentorship Assigning an experienced and trained foster parent to nurture new foster parents
- Appreciation hosting events that honor foster parents for their contribution to the care of children/youth in care.
- Staff Support- being available to answer questions and listen to concerns, return phone calls and emails as soon as possible
- Collaboration- recognizing the role a foster parent plays in a child's life and obtaining foster parent input when making decisions
- Peer Support- Statewide Foster Parent Associations are an important way for foster parents to provide support, encouragement and advice to other foster parents
- Training- provide initial and ongoing relevant training experiences on issues that may be currently challenging foster parents
- Invite- include foster parents as part of the child’s team, and respectfully notify the foster parents in a timely manner of all court dates, CFTM's and foster care review board meetings.

Chapter 2
Types of Foster Care Placements

Levels of Care

The Department is committed to finding the most appropriate and least restrictive placement for children entering custody. DCS strives to make the first placement the best placement for each child. The best practice method helps match the needs of children with the strengths of
foster families if a foster home has been identified as an appropriate placement. When a child enters DCS custody their needs are assessed utilizing the Child and Adolescent Needs and Strengths tool (CANS) to determine the level of care and placement type. The Child and Family Team Meeting (CFTM) process brings together family members, school and community members, DCS staff and other identified persons to make decisions about all placement activities for the best interest of children in custody. CFTMs should be characterized by respect, honesty, inclusiveness and work towards building consensus in decision-making.

After carefully assessing a child/family's needs, this team comes together to discuss and decide upon the best placement setting for children. The Department initially attempts to place all custodial children in a relative/kin placement if there are no safety concerns and a relative/kin placement can meet the child's needs. If a relative/kin placement cannot be identified, a traditional DCS or provider foster home is identified to meet the child's needs.

**Traditional Foster Homes**
The Tennessee Department of Children's Services actively recruits, trains, and provides support to individuals and families interested in serving as foster homes to children in need.

**Kinship Foster Homes**
Kinship foster homes are family members other than the biological parents or persons identified who have a pre-existing relationship with the child and/or family.

DCS actively seeks relatives/kin to become foster parents for children in care. Statistics indicate children fare better when placed with relative caregivers. Additionally, federal mandates require DCS to complete a full diligent search for relatives at the initial point of contact with a family. As noted above, removal from the primary caregiver is always traumatic for a child, but if a relative/other significant person can be located and is appropriate for placement, the trauma can be greatly reduced. Additionally, the child is more likely to achieve permanency faster when placed with relatives/kin. Relatives/kin provide consistency and stability for a child in relation to family norms, culture, religion, maintaining relationships with extended family, genealogical history and other important connections that only a relative/kinship caregiver can provide.
The Home Study Process

The process for becoming a foster home typically takes four to six months. This process includes several weeks of interactive preservice training called PATH (Parents As Tender Healers), completion of full background checks, fingerprinting, reference checks, medical history including a recommendation from a licensed health care provider, a home study as well as other necessary processes. There are some circumstances that permit utilizing an expedited process to approve and utilize a foster home for placement. In these circumstances, the potential foster family is either related to the child(ren), or has a significant pre-existing relationship with the child/family which is referred to by the Department as a kinship relationship. In these cases, a national background check, an expedited home study including a complete walk through of the prospective kinship parent's home, followed by a strict review of the recommendations and findings by local regional administration may lead to a contingent approval for expedited placement. Upon approval, the child can be placed in the home with their relative/kin as long as the family is willing to complete the fingerprinting process within a very short time frame, immediately enroll in PATH classes, and complete all other training and paperwork required for the approval process.

All adults who reside in the home with the child(ren) and have a parental role must attend PATH classes and complete all requirements to become fully approved. Traditional foster homes should be fully approved within 90 days of PATH completion and Kinship foster homes should be fully approved within 120 days of the custodial child being placed in the kinship foster home, if there are no delays. In order to continue to be an approved placement, expedited foster parents/homes are required to meet continued training requirements, provide for the basic needs of the child, and follow DCS policy and procedures with regard to foster children and foster home requirements.

Policy Reference: 16.20 Expedited Custodial Placements

Special Supports for Kinship Homes

Kinship foster parents are required to follow all requirements, policies and procedures of DCS with regard to care of the children, compliance with visits, appropriateness and continued approval of the home, etc. Kinship parents are also required to complete additional training each year, including required core courses. Foster Parent Support can provide more information regarding training opportunities and requirements. Most regions have a designee
specifically trained and identified to work with kinship families to assist them through the process of placing relative children; often, this person is known as the Kinship Coordinator.

Policy Reference: 16.8 Responsibilities of Approved Foster Homes

Kinship caregivers require full disclosure of the options available to them to provide care for their kin or relative's children. There are also different options for family/kin who may seek custody of a child through means other than the kinship foster care program. Families must fully understand and explore each of these options to determine which option is best for the needs of their family. The options available to kinship caregivers include the following:

**Power of Attorney** is a legal document that allows the primary caregiver identified for the child to make legal, medical and school decisions regarding the child. This document remains in effect until it is revoked by the parent(s), which can occur at any time. A lawyer is not needed for this but both the caregiver and the parent(s) have to sign the document in front of a notary. Neither DCS nor the court system is involved with this process.

**Legal Custody** is an order from the Juvenile Court of jurisdiction that gives a person permission to care for a child and make decisions regarding the child's daily living, educational, and medical care. This Order may also have guidelines regarding the parents' visitation and phone calls with the child, as well as an Order for the parent to pay child support. The legal custody would remain in effect until the child(ren)'s 18th birthday or until the parent(s) regain custody granted by the Juvenile Court. Certain family members, including but not limited to the child's grandparent, aunt, uncle, sibling, or first cousin, who are granted custody of a child and have proof of their relationship, may be eligible for the Families First “Child Only” Program through DHS (Department of Human Services). Anyone who receives custody of a child may also be eligible for TennCare and food stamps by applying with DHS.

**Permanent Guardianship** is an order from a Juvenile Court Judge granting a caregiver permanent custody of a child. The child has to reside in the home of the caregiver for at least six months, the caregiver has to be committed to permanently caring for the child, and reunification and adoption cannot be in the child's best interest for permanent guardianship to be granted. The parents' rights do not have to be terminated. The guardianship order will address if and when a parent can visit and sometimes child support. Permanent guardianship can be terminated if the parent petitions the court, shows a change in circumstances, and it is
in the best interest of the child(ren). The permanent guardian may also be eligible for DHS services.

**Subsidized Permanent Guardianship (SPG)** is a guardianship assistance program available as a permanency option to children in DCS custody who live in kinship foster home and meet certain criteria. This option is reviewed on a case-by-case basis to determine if SPG is in the child's best interest and to ensure eligibility criteria had been met. This program is much like permanent guardianship, but the child must be in DCS custody and placed in a fully approved kinship foster home for at least six months to be considered for subsidy. SPG allows the child to leave DCS custody while allowing the relative to continue to receive monthly financial assistance from DCS. Birth parents keep their parental rights, which provides them the option of petitioning the court for a return of custody to them if they are in a position to do so in the future.

**Adoption** is when parental rights and responsibilities are transferred, through the court system, from a child's biological parents or current legal guardians to the adoptive family. Adoption should be utilized when a child/youth is unable to return to the parent(s) home and permanency through the creation of a new legal parental relationship is in the child/youth's best interest. In Tennessee, prior to a child being placed with a family for the purpose of adoption, the parental rights of all biological/legal parents must be terminated or voluntarily surrendered. If the child was in the guardianship of DCS or a licensed child placing agency prior to the initiation of adoption proceedings, the child may be eligible for an adoption subsidy and Medicaid benefits, if the child and prospective adoptive family is determined to meet certain eligibility criteria. Once the adoption has been legally finalized through the court, the child has the same rights and inheritance as the adoptive family's birth children.

Policy Reference:  [DCS Policy 15.11, Adoption Assistance](#)

**Relative Caregiver Program** provides respite and recreational opportunities, support groups for caregivers, children and teens, educational workshops, and emergency financial and/or start-up assistance (if eligible). Caregivers can make contact with the Program at any time while caring for the child(ren). A DCS representative can provide contact information for the Relative Caregiver Program in each region.

Policy Reference:  [16.59 Disclosures of Legal Options and Available Services for Relative Caregivers.](#)
**Contract Agency Homes**

DCS contracts foster care services with provider agencies. Examples of contract services include trauma therapy, sex offender treatment, drug and alcohol treatment, mental health treatment specifically targeted to diagnosed issues, family centered therapy, and a multitude of other milieus. DCS and contract agencies strive to provide the necessary services in a family based setting. Therapeutic foster parents are provided more training and support to care for children whose emotional, behavioral, or mental health needs are more significant than what a traditional foster home can provide. Often, Foster Parents with contract agencies have access to more assistance on-call during evening and weekend hours, and receive more contact visits from caseworkers in the home.

**Shared Homes**

There are times when a foster home approved through DCS or an agency may need to become a shared home to meet the needs of a child placed in the home. Such times may include situations in which a sibling group is in care and the children require different levels of care or a child in a DCS foster home may experience a change in circumstance which requires additional supports and services of a provider agency. In these situations, DCS and the contract agency will come to an agreement that the home can be shared between the two agencies to service a specific child or sibling group, and a specific contract will be negotiated between the Regional Administrator and the Director of the contract agency.

Policy Reference: **16.11 Shared Foster Homes**

**Medically Fragile Foster Homes**

Occasionally, children entering custody have special medical needs that require a higher level of care. A child with special health care needs has a serious illness or condition documented by a licensed health care provider that may become unstable and change abruptly, resulting in a life-threatening situation. The child's health condition is stable enough for the child to be in a home setting only with frequent monitoring by a licensed health care provider. The medically fragile child requires frequent time-consuming administration of specialized care or treatment which is medically necessary. The care needs may be related to a chronic and/or progressive illness or a more acute, time-limited condition.

Some medically fragile children/youth may also have behavioral and/or mental health conditions.
Foster Parents who wish to become medically fragile providers must undergo specific, intensive training on medical treatment for these children beyond the regular CPR, Medication Management, and First Aid training that all foster parents must complete. Certain provider agencies recruit, train and certify foster homes for children with special medical needs.

**Residential Care**

Occasionally a child’s treatment needs exceed what can be offered or accomplished in a family home setting. In these cases, a residential placement may be deemed appropriate. Children with a need for intensive drug and alcohol, sexual predatory behaviors, severe mental health issues or extreme self-injurious behaviors may need this type of treatment setting or residential psychiatric treatment. Some children need treatment that can best be offered in a peer setting such as a group home.

**Chapter 3**

**Foster Parents’ Role in the Child’s Permanency**

Foster parents play a vital role in the lives of children by preparing them for the next step along the road to permanency. Whether children return to their birth family or are adopted, foster parents nurture children along the path. The foster family will either provide legal permanency or support the child in finding legal permanency. Foster parents often maintain a life-long connection.

**Life Story Books**

Life Story books are developed for children who enter custody. The book is designed to preserve and document their life events prior to placement in custody and while being in foster care. They help children integrate past experiences with current circumstances and process their feelings. The Life Story Book also helps children maintain connections with important people and events in their lives.

Foster parents and Family Service Workers (FSW) work together to create and update the books. The Life Story book should be updated often with important events in the child’s life. This can be done by taking pictures, creating drawings, and documenting accomplishments and awards, etc. Foster parents can be creative with additions to the book and involve the age appropriate child in deciding what goes into the book. The Life Book goes with the child anytime there is a placement change and when the child reaches permanency.
The use of a life book is critically important for children who will be placed for adoption as well as for children who will return to their birth families as it shares their unique life story.

Policy Reference: 16.8 Responsibilities of Approved Foster Homes, Guidelines for Life Story Books

**Participation on the Child and Family Team**

Foster parents are critical members of the team that will make important decisions around the care and welfare of the children in their home. The teaming process means that foster parents are invited to attend all Child and Family Team Meetings for children placed in their care. It is very important that foster parents share information and ideas on how the child is adjusting, feeling and progressing. If a child is not adjusting and progressing while in care then it is critical to know if additional supports and/or services to the child or to the foster parents might stabilize and maintain the placement. If the child must move to a new placement, then the foster parent is a partner in assuring that all information about the child including future appointments, school work, medications, etc. is shared and transitioned with the child and that the child experiences as little trauma as possible.

**Responsibility of Child and Family Team Members**

- Believe in the group’s ability to be effective
- Be respectful and demonstrate courteous behavior to all
- Remember the purpose and goal – to provide opportunity for family and others to participate in developing solutions
- Watch for non-verbal messages
- Listen and seek to understand other points of view
- Communicate cooperative intentions
- Recognize the family's expertise
- Build on strengths – identify, ask about, share, encourage, compliment
• Support the talents and abilities of others

• Be honest, fair, specific and behaviorally descriptive in what is said

• Know personal biases, prejudices and “hot spots” and make sure that they do not affect the ability to provide balanced input and leadership in the meeting

• Make sure that what is said is understandable to all

• Speak directly to group members, not about individuals as if not present

• Acknowledge and accept emotions and disagreements as natural and to be expected. Stand in the other person's shoes

• Separate issues and concerns from the people discussing them

• Stay open, flexible and creative. Consider the merit of each idea

• Maintain energy throughout the process

**Participation in Court Hearings and Proceedings**

Foster parents are encouraged to participate in their foster children's court hearings whenever possible unless deemed inappropriate by DCS or court staff. Foster parents should be prepared to testify and answer questions the courts may have about the child's well-being, school, visitation, etc. Foster parents must abide by their foster parent contract which states they will not file any petitions in court pertaining to their foster children.

**Selecting an Adoptive Parent for a Child**

If a child has been placed in a foster home for twelve (12) months or more and the child becomes legally free for adoption, that foster family will be considered as the possible first choice to adopt the child, as long as the foster family can meet the child's needs and the Child and Family Team has determined that adoptive placement with the foster family is in the child's best interest. If a child is in full guardianship of the Department and the current foster family chooses not to adopt, the Permanency Specialist and the child's Family Service Worker (FSW) will convene a meeting with members of the Child and Family Team to gather information
about the child. This information is used to write an Individualized Recruitment Plan, which outlines the next steps to identifying an adoptive home for this child. These steps may include searching the database of available homes that might be a match for this child as well as efforts to recruit a new foster home. If the foster family identifies a potential adoptive family, they should notify the team so that a CFTM can occur to discuss the family. Until the team makes a decision to determine if the family is a potential adoptive placement, the foster family should not introduce the child and family, discuss placement with the child and/or family, or share information about the child with the family. Once a prospective adoptive family is identified by the team, the Permanency Specialist will meet with the family to present the Presentation Summary of the child. The Permanency Specialist will also discuss the child's eligibility for adoption assistance. Full disclosure of all information about a child must be presented to the prospective adoptive family. If the family wants to move forward with adoption, pre-placement visits will begin prior to the child being placed in the home. The child must reside in the home for no less than a six month period before adoption can take place. Once the decision is made to adopt, the Permanency Specialist helps the family to secure an attorney, and obtain an attorney fee letter and subsequent approval. The attorney files a petition to adopt and secures a court date.

Policy Reference:  CFTM Guidelines for Selecting a Permanent Family

**Working with the Birth Family**

Working with birth families can be one of the most challenging, but rewarding roles of foster parents. Many foster parents enjoy this high level of contact with birth families and feel that they are genuinely contributing to the success of the child and their family. There are several ways the foster family can help mentor a birth family; here are just a few:

- transport parents with the child to medical appointments
- call the child's parents on the phone to give them updates on their child's well-being
- give parents pictures of their child
- share copies of homework and report cards with family
- encourage parents to complete steps to their permanency plans
• talk with the parents at the visit

• refer to child as “your child” to birth parents

• help birth parents locate community resources

• share child’s Lifebook with parents

• provide transportation to and from the parent’s home for visitation

• attend parenting classes with parents, and

• serve as a support to family following reunification

The decision to utilize these strategies should be made with the child’s Family Service Worker.

**Foster Parents Can Assist in Finding Great Foster Families**

DCS knows foster, adoptive and kinship parents are the best recruiters when they share their experiences with family, friends and acquaintances. DCS and foster parents work as partners in recruiting efforts. Foster parents are encouraged to participate in recruitment activities. Below are some other ways to get involved in foster parent recruitment:

• Talking to friends, families, co-workers about the rewards of fostering children

• Participating in pre-service and ongoing training

• Participating on a PATH Expert Panel

• Sharing experiences with new foster parents

• Joining foster parent associations and/or support groups

• Organizing recognition and/or appreciation efforts and events

Speak with your Foster Parent Support (FPS) worker about opportunities to support foster parent recruitment.
**Participating as a PATH Trainer**

PATH is taught by a trainer and a foster parent co-trainer who have received PATH T4T (Training for Trainers). Having a foster parent co-trainer as part of the training process gives PATH participants first-hand knowledge of what life is really like as a foster parent. The foster parent co-trainer is able to share experiences, advice, and lessons learned with prospective foster parents. This adds a lot of value to the PATH training experience. Talk with a FPS worker for more information about the requirements and benefits of becoming a foster parent co-trainer.

**Dual Approval of Foster Parents**

The Department of Children’s Services' philosophy is “first placement, best placement”. All DCS foster homes are approved as dual homes to support this philosophy. Dual approval means the home may serve as either a temporary foster placement or a permanent home for a child should adoption or permanent guardianship be determined as an appropriate goal for a child placed in their foster home. These homes allow children to achieve permanency sooner when reunification is not possible because a child must reside in an approved foster home for at least six months before adoption or permanent guardianship can occur.

**The TPR Process**

Termination of parental rights, otherwise known as TPR, is the process of permanently severing a parent’s rights to their child. There are several different reasons that permit the Department to terminate a parent’s rights. These reasons are explained to the parents at each permanency plan meeting. The Department must make reasonable efforts with the birth family before filing for TPR. This involves providing services and assistance to the family to help them address the issues that led to the removal and any new issues that would prevent the family from being reunited. TPR is a very difficult legal process and can take a lengthy time to complete in the court system. State law requires the court to hear a TPR case within six (6) months of filing unless the court finds an extension is in the child’s best interest. Once TPR is granted, the court will award full or partial guardianship to the Department. Full guardianship gives the Department the right to place a child for adoption. The parents have the right to appeal the TPR decision up to 30 days after the Judge signs the termination order. The adoptive family must wait 30 days to make sure that the family does not appeal the decision before the adoption process can begin.
Chapter 4
How Decisions are Made

Decisions are made about children in foster care through the Child and Family Team Meeting (CFTM) process, and other reviews described below. Child and Family Team Meetings (CFTM) are the central decision-making point in the life of a child’s case. These meetings bring significant people to the table including but not limited to birth family, foster parents, DCS staff, teachers, medical professionals, service providers, friends, godparents, and anyone else identified by the family as having significant input to the situation. Meetings are held at critical times: permanency plan development, placement change, return home, termination of parental rights, or whenever a team member believes it necessary to call a meeting. DCS is always present at the meetings and facilitates the discussion. Decisions must comply with DCS policies and be in the best interest of the child. Safety and well-being must always be preserved. Recommendations are made based upon these reviews; however, the ultimate decision lies with the court.

The Child and Family Team Meeting (CFTM) Process

Team members include (but are not limited to): birth family, neighbors, foster parents, service providers, educational providers, DCS Staff and other agency staff persons. Members of the Child and Family Team can request a meeting at any time to discuss issues of concern. All members of the team are equal and have an equal voice. Foster parents are encouraged to participate in all CFTMs regarding the children they are parenting and are strongly encouraged to attend any disruption and placement stabilization CFTM. It is a foster parent’s right and responsibility to attend and offer information that can be helpful to the team. However, a birth parent can request a foster parent not attend a CFTM. Common goals of the CFTM are to:

- Learn what the birth family hopes to accomplish
- Set reasonable and meaningful goals
- Recognize and affirm family strengths
- Determine family needs
- Find solutions to meet family needs
• Design individualized supports and services to match the family needs and build upon their strengths

• Achieve clarity about responsibility of assigned tasks

• Develop and achieve a workable case plan for each child and family

• Achieve the ultimate outcome of safety, permanence, and well-being of the child and family

• Build a team of people who care about the child and family

Role of Team Members
The child has important responsibilities during the CFTM. All children and youth who are 12 years of age and older are included and prepared to participate during the CFTM to the extent that is age-appropriate. In some cases, children younger than 12 can participate in the CFTM, according to his or her maturity level and ability to understand. Arrangements will be made to escort younger children out of the meeting and provide supervision when the discussion of sensitive or difficult topics must take place. It is critical that the child:

• Acknowledge his/her current family situation

• Adapt to his/her new environment

• Participate in the team’s discussion and join the work towards meeting the permanency goals

Birth family members, especially biological parents, are a vital part of the CFTM process. Their critical role is to:

• Acknowledge their current family situation

• Work with the team to establish a permanency goal and action steps

• Work towards meeting the goals of the permanency plan
• Provide support to their child, both emotional and otherwise as they are capable

• Provide continuity by maintaining a continuing relationship with the child

Birth parents and biological family have particular responsibilities to DCS. Those responsibilities are as follows:

• Keep DCS informed of current address, phone number, and other contact information

• Work with DCS staff, foster parents, service providers, and child towards the permanency goal

• Keep open communication with DCS. Respond to phone calls, keep appointments, and maintain consistent communication and/or visits with the child

• Provide a safe, nurturing and loving family for the child's return

• Provide financial support

• Work with the Foster Parents and CFT to provide for your child's needs and meet the permanency goal

The participation of biological family/birth parents will vary from case to case, however the importance of the biological parents to the child should never be minimized.

Foster Parents also play a vital role in these meetings, as they bring current and relevant information to the meeting. Critical ways foster parents are important to the CFTM are as follows:

• Attending and participating in CFTMs

• Providing input to case decisions and permanency plans

• Supporting the implementation of those plans
Additionally, foster parents nurture the child and maintain the balance of the child’s existing family. On a daily basis, foster parents accomplish the following:

- Provide day to day care

- Tend to emergency medical needs, notifying the FSW as quickly as possible if there is an occurrence of an illness or accident requiring a physician’s care or hospital visit.

- Protect the child’s personal information by strictly following DCS confidentiality policy and notifying the FSW if anyone inquires about the child’s identity

- Contact DCS immediately if the child leaves the home by runaway or with someone unauthorized.

- Assist in the emotional and physical preparation for the child to return to the family home or be placed for adoption

- Provide routine transportation for medical appointments, family visits, and extracurricular activities

- Support the child as he/she visits with family and report any unusual circumstances to the FSW

- Work with the child to develop a life book

- Inform the child’s FSW of any progress, issue, or need. Particularly advise of any physical or emotional problems, including sexual acting-out behavior or aggression.

**DCS staff** are required to be at every CFTM. Their primary tasks are to:

- Assess the child and family and meet the day-to-day needs of the child

- Facilitate team members in the development of a Permanency Plan that meets the needs of the child and his/her family
• Facilitate activities and/or secure services that assist in the accomplishment of the permanency goals

• Authorize payment of board, clothing, and allowance within the foster home

• Provide supportive services to the foster parents as needed and required in order for the foster parents to maintain a safe and comfortable living environment and nurturing atmosphere for the child

As the representative of the child's legal custodian, the DCS FSW has the following specific responsibilities:

• Oversee the daily care while the child is in out-of-home placement, including regular face-to-face contact with the child and foster parent

• Assure that the child's medical and dental needs are met

• Assure that the child and his/her family have reasonable visitation as directed by the court or the Child and Family Team

• Be available to the child and the foster parent

• Be present for all CFTMs, hearings, and reviews

• Maintain open communication with foster parents

The Facilitator is a DCS Case Manager with advanced training in mediation and facilitation of meetings. A Facilitator is required for certain types of CFTMs including the Initial CFTM and Placement Stability CFTMs. Facilitators are especially helpful in challenging situations.

Foster parents are encouraged to have contact with birth families in order to gather needed information about the child's likes, dislikes, favorite foods, fears, and favorite belongings. Foster parents are also encouraged to mentor birth families in preparation for potential reunification. Foster parents are bound by the same rules of confidentiality as DCS staff and need to be informed regarding the child's fears, anxieties, history of abuse, and family relationships to enhance their ability to nurture the child.
**Permanency Plan**

The Permanency Plan is a document that identifies the goal for the custodial child and outlines the steps necessary to achieve that goal. Permanency plans can have a sole or dual goal of Reunify with Parents, Exit Custody with Relatives, Permanent Guardianship, Adoption or Planned Permanent Living Arrangement. The plan must be developed within 30 days of the date of custody and is reviewed or updated at least annually. The Permanency Plan must be approved ("ratified") by the court within 60 days of the date of custody. Foster parents are encouraged to attend the Permanency Plan CFTM and offer valuable input to the team.

**It is important to understand that there is a federal requirement that the Department conduct an ongoing diligent search for relatives. This process starts within the first 30 days of custody and continues throughout the life of a case.**

Policy Reference: [16.31 Permanency Planning](#)

**Quarterly Progress Review**

This Review determines the progress made toward accomplishment of the permanency goal and is conducted by the Foster Care Review Board (FCRB) or the court. The FCRB is a group of citizens appointed by the court who review progress at 90 days and every six months thereafter. DCS provides the FCRB a written report of the family's progress and the date of the next review. If a child has a court hearing during the same month that a review by the FCRB is due, or if the county of jurisdiction does not have an FCRB the court hearing will substitute for this review. Foster parents and the Child and Family Team should be notified of the FCRB meetings and are encouraged to attend or provide written information for the review.

Policy Reference [16.32 Foster Care Review and Quarterly Progress Reviews](#)

**Permanency Plan Hearing**

In addition to the court hearing to approve the initial plan, a hearing will be held within 12 months of custody and every 12 months thereafter until permanency is achieved or a child turns 18. This hearing is held before the juvenile court judge or magistrate, or other court of competent jurisdiction. Child and Family Team Members, including foster parents, should be
notified of the Permanency Plan hearing and are encouraged to attend. Some judges will want to review a case more often than annually. Children are required by statute to be at their annual permanency hearing unless they are placed out of state or there is a compelling medical documentation permitting them to attend. These requirements differ from court to court and judge to judge. Court hearings are lengthy and confidential. Please be prepared to stay all day.

Policy Reference: 16.33 Permanency Hearings

**Adoption and Safe Families Act (ASFA)**

ASFA stands for Adoption and Safe Families Act. ASFA is federal child welfare legislation that was passed into effect in 1997. ASFA focused on improving the safety of children, helping to support families, assisting with adoptions, and finding other permanent homes for children. ASFA requires states to consider termination of parental rights in certain situations, including but not limited to: when a child has been in foster care for 15 of the last 22 months, a court has determined a child to be an abandoned infant, when the birth parent has committed murder or voluntary manslaughter of another child of the parent, or a felony assault committed by a birth parent that has resulted in serious bodily injury to the child or another child. There are exceptions to ASFA and the terminating of parental rights if the child is placed with a relative, there is compelling evidence that termination is not in the best interest of the child, or if the state agency has not provided comprehensive services to the parent necessary for reunification.

If a child is considered “legal risk”, meaning DCS is pursuing termination of parental rights but may not have legally secured this yet, or in “full guardianship” of the state, which is when all parental rights have been severed, a team of staff members and the child and family team will begin the process of identifying a pre-adoptive placement for the child. The process by which this is done may vary slightly, according to regional protocol. Generally, a team of staff work together to identify approved foster families interested in adoption who “match” the needs of the child. Family strengths and needs are compared to the strengths and needs identified for the child. This is a very deep and thoughtful process used to select the best possible life-long family for each individual child.
Chapter 5
Maintaining an Approved Foster Home

Becoming a foster parent takes commitment and dedication. Once approved, this same commitment and dedication is required to maintain an approved foster home that is in compliance with all DCS policies and procedures, as well as the concepts taught in PATH training. This chapter will discuss the responsibilities of an approved foster home.

**Responsibilities of Foster Parents**

Approved foster parents must comply with all DCS policies, procedures, and concepts discussed in Parents as Tender Healers (PATH) Training. In a foster home, household rules must be clearly communicated to the child and written down so any age appropriate child can read and understand them. Structured daily household rules may include clear and concise household rules, acceptable and unacceptable behaviors, and possible consequences for unacceptable behavior.

**Foster Home Addendum Requirements**

When certain changes occur in a foster home the FPS worker is required to complete an addendum to the home study. All changes should be reported to the FPS worker immediately. Some changes include, but are not limited to, change in address, change in placement preferences, change in phone number, change in employment, change in name, etc. It is extremely important to report new adult household members immediately, including adult children who return to the home after a period of absence. This also includes any adult that may be visiting in the home for more than 14 days. Internet, local criminal background checks, DCS database checks, and fingerprinting must be initiated or completed for these adults within one working day of their arrival at the foster home. It is of the utmost importance that the new adults, the foster parents, and DCS staff work together to make sure all of these things occur.

Failure to report significant changes, especially those related to adults moving into the home, could affect the status of the foster home and may result in termination of foster care board payments, and could possibly cause an overpayment that would have to be reimbursed to the state.

Policy Reference: [3.3 Overpayments Made to Foster Parents](#)
(Note: Anyone who resides in the home or shares the same address must be considered a household member. This includes adult children in college who list the foster home address as their address.)

**Health Needs**

All foster parents should receive a copy of form **CS-0727, Initial Intake, Placement and Well-Being Information and History** which provides information on the child’s health status, medications and special needs. This form should be taken to every health appointment and shared with the healthcare provider.

Each child must have routine medical and dental exams and treatment. Early Periodic Screening, Diagnosis, and Treatment (EPSDT) screening exams are scheduled within 72 hours of a child entering custody and subsequent screenings are completed according to the periodic schedule established by the American Academy of Pediatrics (AAP). Annual screening for children age three years and older must occur within 365 days from the previous screening. Children under age three will be seen on a more frequent basis according to the AAP schedule:

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<tr>
<th>Schedule of Doctor's Visits</th>
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Results of the EPSDT screening exams are sent directly to the Regional Health Unit and then to the FSW. The FSW should share the screening results with foster parents after the Regional Health Unit processes the documentation. Any identified or recommended EPSDT follow-up services must be arranged as soon as possible. The FSW can assist with arranging appointments with other health care professionals as needed.

Please feel free to request copies of policies **20.7 EPSDT** and **20.12 Dental** from the FPS worker or the child’s FSW or visit the link for all DCS policies: [Policies & Procedures - TN.Gov](https://www.tn.gov).
Whenever a child receives any type of health services (except for the EPSDT screening and psychiatric medication appointments), form **CS-0689 Health Services Confirmation and Follow-Up Notification** should be given to the health care provider with a request that the form be completed or the information provided. Once completed, the form must be forwarded to the child's FSW. This form is then sent to the Regional Health Unit for processing. For blank copies of this form, please contact the FPS worker or the child's FSW.

In the event of a medical emergency, foster parents must immediately obtain emergency assistance for the child. The FSW or on-call worker should be notified of this as soon as possible. TennCare Select has a Nurseline which is available anytime, day or night to ask if the child should be taken to the ER or to ask a nurse any health related questions. The number is 800-262-2873.

Foster parents must follow all healthcare provider's orders for each child in their care. Foster parents cannot make any changes in a child's treatment or prescription medication unless approved by the prescribing provider.

Foster parents are required to maintain form **CS-0630, Foster Home Medication Record**, for each child placed in their care who is prescribed medication. This is required for both short and long term prescriptions. The medication record should be updated daily or as deemed necessary by the prescription. It should be turned in to the child's FSW each month.

Children who are prescribed psychotropic medications for mental health and/or behavioral issues should be seen at a minimum every 30-90 days by the prescribing provider. Appropriate informed consent must be obtained in order for a child in custody to receive psychotropic medication. Only the biological parent/guardian or the Regional Health Nurse (in the absence of the parent) can sign an informed consent for psychotropic medications. Consent is documented on form **CS-0627 Informed Consent for Psychotropic Medications**. The FSW, foster parent, or agency caseworker CANNOT provide consent for psychotropic medication. The child cannot start taking the psychotropic medication until consent is given. Each time a child is seen for a psychotropic medication management appointment, form **CS-0629 Psychotropic Medication Evaluation** must be completed by the prescribing provider and forwarded to the FSW or Regional Health Unit for tracking.
Additional information regarding consents is available in the Healthcare Consent Guidelines for Youth in DCS Custody. Please feel free to request copies of the guidelines from your RPS worker or the child's FSW.

If a child requires hospitalization, they are expected to return to the foster home once released by medical staff. Once back in the home, the foster parent must maintain follow-up care as directed by the treating physician.

Foster parents must also ensure that a child's nutritional and activity needs are met by providing well-balanced meals and regular large muscle exercise. Healthier Tennessee has a free tool for foster families called Small Starts for Families. It has many free, easy ideas and resources to help build healthier, lifelong habits. It is available at healthiertn.com/families.

**Education**

All school-age children must be enrolled in a Department of Education (DOE) accredited school setting. They should attend school daily and have their education needs met according to DCS policy. Any school problems should be reported to the child's FSW. Disciplinary action by the school must be reported to the FSW immediately.

Foster parents are encouraged to attend multi-disciplinary team (M-Team) meetings, Individual Education Plan (IEP) development meetings, as well as other school-related meetings for children in their care.

**Discipline**

Foster parents are responsible for maintaining appropriate discipline of the child by correcting the child's behavior when necessary and discussing any problems with the FSW. All consequences for behaviors are to be age appropriate and timely. All foster parents must sign and abide by form CS-0553, DCS Discipline Policy. The following forms of discipline must not be used with children in DCS custody:

- Corporal Punishment such as slapping, spanking, or hitting with any object
- Excessive exercising such as running laps, repetitive sit-ups, etc.
- Cruel and unusual punishment
• Assignment of excessive or inappropriate work

• Denial of meals and daily needs

• Verbal abuse, ridicule, or humiliation

• Permitting one child to punish another child

• Chemical or mechanical restraints, such as (but not limited to) use of psychotropic medications to subdue a child or youth

• Denial of planned visits, telephone calls, or mail contact with birth family, attorney, siblings, FSW, or pre-adoptive family

• Seclusion

• Threat of removal from the foster home

**Routine Transportation**
Routine travel is included in the foster home board rate and is an expectation of a foster parent. At times, frequent transportation may be required for things such as multiple appointments, alternative school, etc. If an unusual amount of transportation is required, the Child and Family Team will discuss the responsibilities of each team member.

DCS staff, usually the FPS worker, can request reimbursement for trips over fifty miles one way. This may be reimbursed at the regular state travel rate at the time the travel takes place. Travel will only be reimbursed for the portion that exceeds fifty miles. For example, if the trip is fifty-five miles one way, then the foster parent can be reimbursed for five miles each way.

The Regional Administrator (RA) can approve requests for unique travel situations. The foster parents should discuss these situations with the FSW before the trip is made.

**Extra-Curricular Activities**
Extra-Curricular Activities for children in care should be encouraged and monitored. DCS will make efforts to request the consent of the birth parents when special activities occur. However,
DCS may give consent or authorize the foster parent to give permission for special activities. Foster parents should assist the child in making appropriate choices in activities. Information on the activities should be regularly communicated with the birth family.

**Social Media Guidelines**

**Confidentiality Is Key**

Social media connections are an important part of many families' lives, and thousands of Tennesseans use these channels to share and connect with friends. When it comes to sharing information about youth in state custody on social media sites, foster parents must use their best judgment and remember confidentially is a must -- even in the digital realm.

**Before You Post**

Foster parents and relative providers who use social media sites can post photos and videos on social networking sites that include foster children and youth, if the following conditions are met:

- Posting family photographs must be discussed within the Child and Family Team and agreed upon by the whole team, which includes birth parents, if they are active and involved, and the child, if age appropriate
- The children are not identified by name
- The children are not identified as foster children
- There is no discussion on social media sites and websites about the child, the child's case or the child's family
- Secure your privacy settings and location settings
- Talk to the youth and make sure he or she is comfortable with sharing information and images

**Religion**

Foster families should make arrangements for children to participate in the religion or faith of their choice. Any issues or questions that may arise should be discussed with the FSW.
**Shared Parenting**

Foster parents share the planning and caring for children with the birth parents, DCS, and private providers. When parental rights are intact, shared parenting must take place through direct contact with the birth family, unless otherwise indicated by DCS and the Child and Family Team. Foster parents must assist the FSW and actively support the visitation plan outlined in the child’s permanency plan. Foster parents are a crucial part of supporting the birth family connection and aiding in the reunification process. If parental rights are terminated or surrendered, the foster parent must continue to respect the child's feelings about the birth family and support the child as they move forward to permanency.

**Mandatory In-Service Training for Foster Parents and KEEP**

The Foster Parent Training Program offers learning opportunities that support adoptive, foster and kinship parents to provide a safe, nurturing and loving environment for the children in their care.

Foster parents must receive continuing education training after approval. There are specific classes that foster parents must attend during the first and second year. Foster parent training is mandatory for all parents and must be completed by June 30th annually.

All foster parents are required to receive 15 hours of In-service training depending on the type of children fostered. The family's status will determine the appropriate training track. Foster parents should reference Policy [16.8, Responsibilities of Approved Foster Homes](https://www.tn.gov/dcs/program-areas/training/tpd/fpt/t/opportunities/online-training.html) and In-Service Training Requirements for Foster Parents.

Both members of married or unmarried couples must complete all training requirements. Any additional adult household members in a caretaking role must complete all training requirements.

In-Service training credit may be obtained in various ways. Some of the training options are:

- Computer based training can be accessed on our webpage at [https://www.tn.gov/dcs/program-areas/training/tpd/fpt/t/opportunities/online-training.html](https://www.tn.gov/dcs/program-areas/training/tpd/fpt/t/opportunities/online-training.html)
DCS facilitates an annual foster parent conference that offers an opportunity for foster parents to learn from each other, meet DCS staff and service providers and complete annual training requirements during the course of one weekend. The conference also offers an opportunity for parents to attend workshops on specialized topics in addition to those offered throughout the year. Parents can choose to commute or to stay in one of the conference hotels. Conference fees include some meals, snacks and hotel rooms if applicable.

See more at: https://www.tn.gov/dcs/program-areas/training/tpd/fpt/t/opportunities/conference.html

Community Sponsored Workshops on specific topics are offered through local foster care associations, community partners, and DCS

Approved video and books may be used for individual study. A list of approved media training can be accessed on our webpage at https://www.tn.gov/dcs/program-areas/training/tpd/fpt/t/opportunities/media.html

Process for receiving credits for these trainings is as follows:

- Complete Foster Parent Elective Training form-CS1000 or https://www.tn.gov/dcs/program-areas/training/tpd/fpt/t/opportunities/external-credit.html or
- Complete Sign-in sheets at training site
- Receive a certificate from completed course. The foster parent keeps one copy for personal records and shares one with their FPS worker.

Independent Living training is available for Foster Parents and staff who work with adolescents to prepare youth for life on their own.

CPR/First Aid and Medication Administration are required prior to approval. These trainings must be completed once every two years, without lapses. Foster parents who receive CPR/First Aid training outside of DCS need to ensure that the card or training certificate clearly documents training in both First Aid and CPR. The Medication Administration Refresher is a two hour course.
Foster parents who are willing and appropriate to parent youth who have been adjudicated delinquent must complete the computer based course Parenting the Justice Involved Youth and Trauma Informed Parenting Strategies.

Keeping Foster and Kinship Parents Trained and Supported - KEEP is an evidence-based support and skill enhancement education program for foster and kinship parents of children aged 4 to 12. The program supports foster and kinship families by promoting child well-being and preventing placement breakdowns.

The Foster Parent Training Calendar is updated on the DCS website. Additionally, Foster Parent Support Workers are asked to personally notify their foster parents of training courses, events, and to encourage their attendance.

If you have questions or need additional information regarding Foster Parent Training you may visit the following link:
https://www.tn.gov/dcs/program-areas/training/tpd/fpt.html

**Foster Home Reassessments**

All foster homes must be reassessed for continued approval on a biennial basis. This is done to assure the safety and well-being needs of children placed in foster homes are being met. This biennial review is a joint process that requires participation and interaction between the foster parents and DCS. A packet of the required paperwork will be provided by the FPS worker and a home visit will be scheduled, prior to the reassessment due date, to allow time for review and approval of all reassessment information.

The reassessment process consists of the FPS worker conducting a home visit to obtain information for the Foster Home Assessment or Re-Activation form and Home Safety Checklist.

During this reassessment process the foster parents provide an updated copy of driver's licenses, vehicle registrations, and vehicle insurance. The vehicle's make and model on the registration and insurance must match. Vehicle information should be provided throughout the year and at the time of expiration to keep the foster home case file in compliance. Copies of training certificates for all required training during the reassessment year should be given to the FPS worker if they were not submitted throughout the reassessment year as the training occurred.
Foster parents also review and sign the DCS Discipline Policy, Foster Parent Oath to Abide, Foster Home Disaster Plan, Foster Home Disclosure Acknowledgement and HIPAA Notice of Privacy Practices-Client Acknowledgement forms, complete the Monthly Family Financial Income and Expenditures form and attach proof of all income reported on the form, complete the Authorization for Release of Information form and have a licensed physician, nurse practitioner or equivalent health care professional complete the Foster Parent/Other Adult Medical Report documenting acceptable physical and emotional health for foster parent during the reassessment. All other household members are required to complete Medical Self Report and the Authorization for Release of Information if they are 18 or older.

Local Law Enforcement, Internet Records, and Driving Record checks will also be completed by DCS for all adult household members.

**Performance Improvement Plans (PIP)**

Performance Improvement Plans, previously referred to as Corrective Action Plans, must be completed with foster homes when a policy is violated or a validated concern is expressed. The purpose of the PIP is to make a plan to correct a problem, not to punish the family. PIPs are completed by the FPS worker and approved by the FPS Team Leader. The PIPs will be fully discussed with the family and the family will be asked to sign the PIP. PIPs are time limited and should last a maximum of 90 days (unless a shorter timeframe is required by the PIP). They will be reviewed periodically during the timeframe to ensure progress is being made towards correction of the issue. Failure to complete a PIP or repeating the issue that caused the PIP could result in closure of the home.

**Foster Home Closure Process**

Some foster homes request closure of their home for various reasons. If the home is closed in good standing, it can re-open as described in the Reactivation section of this chapter. If the home is closed involuntarily by DCS, the home will not be closed in good standing. If it is determined that a home should be closed, appropriate DCS staff will meet with the family to discuss the decision for closure. The family will be given a letter stating the reasons for closure and explaining the supervisory review process. If the family believes that their home was closed unjustly or unfairly, they should follow the directions in the letter to request the supervisory review process. A supervisory review must be requested in writing within ten calendar days of the date of the closure letter. An upper level supervisor will be designated to receive this request and meet with the family to discuss the closure reason.
Policy References: 16.8 Responsibilities of Approved Foster Homes, 16.16 Denial or Closure of Foster Homes, Protocol for Re-Activation or Re-Classification of Foster Homes.

**Interagency Foster Home Transfers**

If foster parents request a transfer from their current agency to another agency or to DCS, all case file documentation is shared with the accepting agency. This means all current assessments; background checks and incident reports are transferred to the requesting agency. Agency transfers should not take place during the time an active placement of a child or youth is in the foster home. Children's placements will not be disrupted to accommodate agency transfers. Foster parents should work directly with the Foster Parent Support worker (FPS) or supervisor in order to initiate the transfer process.

**Reactivation**

If a foster home that closed in good standing decides they would like to re-open, they should contact DCS. If the home has been closed for a period in excess of two (2) years, applicants will be required to re-take PATH training or a Department-approved equivalent. A new home study will be completed. If the home has been closed for less than two years, completion of form CS-0692, Foster Home Assessment or Re-Activation is required to re-open the home. All forms must be updated and new criminal history checks completed. Also, homes being reactivated must have up-to-date CPR/First Aid and Medication Administration training before the home can be re-opened.

**Chapter 6**

**Rights of Foster Parents**

**Foster Parents’ Bill of Rights**

Public Chapter 270 was approved into law by the 100th Tennessee General Assembly on May 7, 2009. The Foster Parents’ Bill of Rights Act amended T.C.A. Section 37-2-415 relative to the rights of foster parents. The Act addresses the procedures foster parents can use when it is believed DCS or any agency under contract to DCS has failed to abide by any of the tenets. Foster parents are encouraged to educate themselves regarding the 25 tenets and follow the outlined procedures regarding grievances.
(1) The department shall treat the foster parent(s) with dignity, respect, trust and consideration as a primary provider of foster care and a member of the professional team caring for foster children;

(2) The department shall provide the foster parent(s) with a clear explanation and understanding of the role of the department and the role of the members of the child's birth family in a child's foster care;

(3) The foster parent(s) shall be permitted to continue their own family values and routines;

(4) The foster parent(s) shall be provided training and support for the purpose of improving skills in providing daily care and meeting the special needs of the child in foster care;

(5) Prior to the placement of a child in foster care, the department shall inform the foster parent(s) of issues relative to the child that may jeopardize the health and safety of the foster family or alter the manner in which foster care should be administered. The department shall fully disclose any information regarding past or pending charges of delinquency as a juvenile, criminal charges, if charged as an adult, and previous hospitalizations, whether due to mental or physical issues;

(6) The department shall provide a means by which the foster parent(s) can contact the department twenty-four (24) hours a day, seven (7) days a week for the purpose of receiving departmental assistance;

(7) The department shall provide the foster parent(s) timely, adequate financial reimbursement for the quality and knowledgeable care of a child in foster care, as specified in the plan; provided, that the amount of such financial reimbursement shall, each year, be subject to and restricted by the level of funding specifically allocated for such purpose by the provisions of the general appropriations act;

(8) The department shall provide clear, written explanation of the plan concerning the placement of a child in the foster parent's home. For emergency placements where time does not allow prior preparation of such explanation, the department shall provide such explanation as it becomes available. This explanation shall include, but is not limited to, all information regarding the child's contact with such child's birth family and cultural heritage, if so outlined;
(9) Prior to placement, the department shall allow the foster parent(s) to review written information concerning the child and allow the foster parent(s) to assist in determining if such child would be a proper placement for the prospective foster family. For emergency placements where time does not allow prior review of such information, the department shall provide information as it becomes available;

(10) The department shall permit the foster parent(s) to refuse placement within their home, or to request, upon reasonable notice to the department, the removal of a child from their home for good reason, without threat of reprisal, unless otherwise stipulated by contract or policy;

(11) The department shall inform the foster parent(s) of scheduled meetings and staffings concerning the foster child, and the foster parent(s) shall be permitted to actively participate in the case planning and decision-making process regarding the child in foster care. This may include individual service planning meetings, foster care reviews, and individual educational planning meetings;

(12) The department shall inform a foster parent(s) of decisions made by the courts or the child agency concerning the child;

(13) The department shall solicit the input of a foster parent(s) concerning the plan of services for the child; this input shall be considered in the department's ongoing development of the plan;

(14) The department shall permit, through written consent, the ability of the foster parent(s) to communicate with professionals who work with the foster child, including any therapists, physicians and teachers that work directly with the child;

(15) The department shall provide all information regarding the child and the child's family background and health history, in a timely manner to the foster parent(s). The foster parent(s) shall receive additional or necessary information, that is relevant to the care of the child, on an ongoing basis; provided that confidential information received by the foster parents shall be maintained as such by the foster parents, except as necessary to promote or protect the health and welfare of the child;

(16) The department shall provide timely, written notification of changes in the case plan or termination of the placement and the reasons for the changes or termination of placement to
the foster parent(s), except in the instances of immediate response for Child Protective Services;

(17) The department shall notify the foster parent(s), in a complete manner, of all court hearings. This notification may include, but is not limited to, notice of the date and time of the court hearing, the name of the judge or hearing officer hearing the case, the location of the hearing, and the court docket number of the case. Such notification shall be made upon the department's receiving of this information, or at the same time that notification is issued to birth parents. The foster parent(s) shall be permitted to attend such hearings at the discretion of the court;

(18) The department shall provide, upon request by the foster parent(s), information regarding the child's progress after a child leaves foster care. Information provided pursuant to this subsection shall only be provided from information already in possession of the department at the time of the request;

(19) The department shall provide the foster parent(s) the training for obtaining support and information concerning a better understanding of the rights and responsibilities of the foster parent(s);

(20) The department shall consider the foster parent(s) as the possible first choice permanent parents for the child, who after being in the foster parent's home for twelve (12) months, becomes free for adoption or planned permanent living arrangement;

(21) The department shall consider the former foster family as a placement option when a foster child who was formerly placed with the foster parent(s) is to be re-entered into foster care;

(22) The department shall permit the foster parent(s) a period of respite, free from placement of foster children in the family's home with follow-up contacts by the agency occurring a minimum of every two (2) months. The foster parent(s) shall provide reasonable notice, to be determined in the promulgation of rules, to the department for respite;

(23) Child abuse/neglect investigations involving the foster parent(s) shall be investigated pursuant to the department's Child Protective Services (CPS) policy and procedures. A CPS case manager from another area shall be assigned investigative responsibility. Removal of a foster
child will be conducted pursuant to Tennessee Code Annotated and departmental policy and procedures. The department shall permit an individual selected by the membership of the Tennessee Foster Care Association to be educated concerning the procedures relevant to investigations of alleged abuse and neglect by the department and the rights of the accused foster parent(s). Upon receiving such training, such individual shall be permitted to serve as advocate for the accused foster parent(s). Such advocate shall be permitted to be present at all portions of investigations where the accused foster parent(s) are present; and all communication received by such advocate therein shall be strictly confidential. Nothing contained within this item shall be construed to abrogate the provisions of chapter 1 of this title, regarding procedures for investigations of child abuse and neglect and child sexual abuse by the department of children’s services and law enforcement agencies;

(24) Upon request, the department shall provide the foster parent(s) copies of all information relative to their family and services contained in the personal foster home record;

(25) The department shall advise the foster parent(s) of mediation efforts through publication in departmental policy manuals and the Foster Parent Handbook. The foster parent(s) may file for mediation efforts in response to any violations of the preceding tenets.

(b) In promulgation of rules pursuant to subsection (a), the department shall provide forty-five (45) days written notification of public hearings, held pursuant to the Uniform Administrative Procedures Act, compiled in Title 4, chapter 5, to the president of the Tennessee Foster Care Association and the president’s designee.

**How Disagreements are Resolved**
As a foster parent and partner with the Department regarding the care and safety of children, if you feel a tenet of the Foster Parent Bill of Rights has been violated, the following procedure must be followed to file a complaint. First, three (3) requirements must be met:

a) The complainant is currently an approved foster parent,

b) There has been failure to follow a tenet of the Foster Parent Bill of Rights; and

c) Such failure has caused or could cause harm to a custodial child OR such failure has inhibited the foster parent’s ability to follow the permanency plan.
PROCEDURE:

1. Report:

Foster parents should first report to the Department or Private Provider Agency for which they serve as a foster home.

a) Foster parent informs either the DCS Family Service Worker or Private Provider Case Manager immediately of the harm or potential harm to the child OR informs either the DCS FSW or Private Provider case manager of the inhibited ability to comply with the permanency plan.

b) If the foster parent believes that the child is in imminent risk of harm, the Child Abuse Hotline should be contacted immediately at 877-237-0004.

2. Response:

DCS Regions and Private Providers follow local protocol to resolve the issue. Each Private Provider and DCS Region has a written protocol that should be followed in the event of a foster parent’s issue. A copy of this protocol is provided to foster parents during the PATH Training process. The Private Providers or DCS Regional protocol outlines the process and provides information to the foster parent regarding the Bill of Rights and the Advocates Program.

3. Unsatisfactory or Inadequate Resolution:

a) Foster parents should contact either the DCS Family Service Worker (FSW) or Private Provider Case Manager’s supervisor. The supervisor follows steps outlined in local protocol, which includes a CFTM. The supervisor invites the Regional Foster Parent Advocate to the CFTM.

b) Private Provider Foster Parents should contact the Private Provider Agency Executive Director or their designee to address issues for which resolution has not been achieved.

c) If attempts by the supervisor are not successful, the issue is reviewed at the DCS Regional Office level. This review includes an in-person interview between the foster parent and the Regional Administrator or designee and a review of the CFTM summary noted above.
i. DCS Foster Parent(s) should contact the Regional Administrator or his/her Designee in writing.

ii. If the issue cannot be resolved at the Private Provider agency level, Private Provider Foster Parents should contact the DCS FSW and supervisor for resolution and if they cannot resolve the issue, should contact the appropriate DCS Regional Administrator or his/her designee, in writing.

iii. The Regional Administrator or Designee notifies TCCY Ombudsman, the Executive Director of Child Permanency or designee, the Private Provider designee, and the Regional Foster Parent Advocate that a complaint has been received.

iv. The Regional Administrator may schedule a conference call or meeting with a representative of the Office of Child Permanency, and the Private Provider (if a Provider Foster Parent) to discuss the issue and develop resolution. If necessary, the representative of the Office of Child Permanency may consult with Legislative & Constituent Services (LCS). This step is left to the discretion of the Regional Administrator.

v. The Regional Administrator/Designee provides a written response to the Foster Parent and Private Provider, when appropriate, within 30 days of the postmarked complaint. Statewide Lead Advocates and the Division of Foster Care are copied on the response and the TCCY Ombudsman Program is notified.

4. Requests/Notification

If attempts by the RA/Designee are not successful, the foster parent may request, in writing, a Central Office review. Requests must be sent via certified mail to:

Tennessee Department of Children's Services
C/O Executive Director of Child Permanency
UBS Tower, 9th floor
315 Deaderick St.
Nashville, TN 37243
Requests may also be emailed to the Executive Director of Child Permanency at FosterParent.EIDCS@tn.gov. Emailed requests are acknowledged via automated email. A request is not considered as being received unless the automated email has been received by the sender.

a) The TCCY Ombudsman Program, the Regional Administrator, Tennessee Advocacy Program, and the Private Provider designee (if a Private Provider Foster Parent) are notified that TDCS has received a complaint from a foster parent.

b) The department conducts the review and provides a written response to all appropriate parties within 30 days of the postmark on the written request. The review includes an in-person interview with the foster parent. A representative of the Division of Foster Care and Adoption and others, as appropriate, may be included in the meeting with the foster parent. All other parties (Foster Parent Advocate, Private Provider, TCCY Ombudsman, etc.) are copied on the response.

Note: A foster parent may make a report or complaint to the TCCY Ombudsman Program at any time.

SIU Due Process
SIU is the Special Investigations Unit that conducts investigations of allegations of child abuse and neglect that occur while a child is in DCS custody and residing in a DCS or contract agency placement. These investigations are conducted in a timely and impartial manner, placing the utmost importance on the safety and well-being of the child. The Special Investigations Unit strives to protect children from harm while being family focused and culturally responsive to the children and families. For more information on the procedures of the Special Investigation Unit please see Chapter 9.

The Foster Parent Advocacy Program
The Advocacy Program was established in 1997 as a result of new legislation surrounding the TN Foster Parent Bill of Rights. Advocates are specially trained to assist DCS and Private Provider Foster Parents when the need arises.

Every foster parent has the right to an Advocate for representation and support. By law, any foster parent under an SIU investigation has the right to an advocate’s representation.
Advocates are well versed in DCS policy and procedures; they are skilled in providing interpretation and clarification when questions arise. Advocates provide assistance, support, and representation to foster parents in grievances and appeals with DCS. The Advocacy Program and DCS work in a partnership to ensure that foster parents receive support they need to successfully care for the children placed in their home. Foster parents can request an advocate by contacting the regional Foster Parent Support staff person.

**Multi-Ethnic Placement Act**
The Department of Children's Services ensures that the adoptive/foster care placement of a child will not be delayed or denied on the basis of the race, color, or national origin of the adoptive parent or the child involved. Any consideration of race must be narrowly tailored and individualized, focusing on the best interests of the child. Consideration of race as a factor in the selection of criteria requires a review by the Directors of Foster and Adoption Services or their designees. All relatives who might serve as a child's caregiver must be considered first choice.

For additional information regarding the multi-ethnic placement, refer to policy [16.2 Multi-Ethnic Placement Act/as Amended by the Inter-Ethnic Adoption Provision of 1996](#).

**Travel Reimbursement**
Routine travel is included in the daily foster home board rate and is an expectation of being a foster parent. Only trips over 50 miles one way or multiple trips made within a week are reimbursable at the regular state travel rate. The extraordinary travel should be discussed and agreed upon in the Child and Family Team Meeting.

Some examples of extraordinary travel may include and are not limited to the following:

1. Special school placement where regular school bus run is not available

2. Hospital placement of child where ongoing foster parent support is necessary to the child's recovery process

3. Medical, Mental Health, or other types of therapy sessions outside of the 50 miles
Removal of a Child from a Foster Home

All foster parents are entitled to a written notice of removal upon movement of a child/children from their home. This occurs on form CS-0450 Notice of Removal of a Child from a Foster Home. A CFTM should be held anytime there is a need to remove a child from a foster home to establish a successful transition plan.

Foster parents that have cared for a child in their home for twelve (12) consecutive months or longer have appeal rights to the 14-day written notice of removal of children from their home. The appeal process is as follows:

1. When the Child and Family Team (CFT) decides that a child needs to be removed from a Contract Provider or DCS Foster Home for non-safety issues, DCS Family Service Worker (FSW) provides foster parents with at least a 14-day notice as soon as the team decides it is necessary to move the child. The appeal form is given to the foster parents at the same time the Notice of Removal is provided. A copy of this document is filed with the Administrative Procedures Division and a copy placed in the child and foster home case file.

2. The Appeal must be filed within 10 business days after the received date of the written notice.

3. The foster parents can only file an appeal if the child has been in their care for 12 consecutive months or more.

   - DCS staff provides the foster parents with form CS-0403, Appeal for Fair Hearing Form, which the foster parents should complete and either mail or fax to the address or number listed below. If the allotted time has passed, the appeal will not be heard.
   - If the foster parent does file an appeal, then the removal of the child is put on hold, a CFTM is scheduled, and the child remains in the care of the foster parents.

4. A 14-day written notice of the Department's intention to remove foster child/children from the Foster home is NOT required under the following circumstances:

   - The child is returned to their parent(s) or legal guardian.
   - A Court Order requiring removal of the child from the foster home.
   - The foster parents request the removal of a child.
- The child has been in the foster home less than twelve (12) consecutive months.
- An emergency situation exists where harm or imminent danger exists.

5. The Administrative Procedures Division has 45 business days to receive, schedule, conduct hearings and produce an initial order. It is important that these appeals and the summary be faxed when received.

Contact Information:

Administrative Procedures Division  
C/O Department of Children's Services  
Plaza Tower- Metro Center  
200 Athens Way, 2nd Floor, Suite B  
Nashville, TN 37243  
Phone: 615-741-1110  
Fax: 615-741-4518

For more information regarding the appeal process, refer to policy 16.27, Notice of Removal from a Foster Home on the Department of Children's Services website.

**Respite Care and Other Events**

Respite is the paid and unpaid short-term planned or emergency care of a child or children in order to provide temporary relief to caregivers who are responsible for the routine care of children. Foster parents are allowed two respite days a month or a maximum of 24 days of respite per year which is covered in the foster care board payment. Respite payments and arrangements are the responsibility of the requesting foster parent.

Respite requests that exceed the built-in allowance are considered supplemental respite care and can be requested for special circumstances and in cases of family emergencies. Supplemental respite care requests are submitted to and approved by regional leadership.

The Protocol for Reasonable and Prudent Parenting allows foster parents flexibility in decision making as to when youth in foster care can participate in activities that are intended to maintain a child's health, safety and best interests while encouraging the child's emotional, academic and developmental growth. The goal of exercising the reasonable and prudent parent standard is to attempt to normalize experiences for youth in care.
Outings and overnight stays with friends, family of foster parent(s) or relative(s) of the child should be considered under reasonable and prudent parenting. Any such event over forty-eight (48) hours should be reported to the child's FSW.

Foster parents should use their best judgment (defined as “would you leave your biological child with this person?”) when making respite, outings, and overnight stay decisions. Foster parents should ensure any medical or safety information needed to keep the foster child or other children safe are shared with the respite provider including medication and safety plans. Refer to the Protocol for Respite Care and Other Events for guidance and reporting requirements.

Chapter 7
Financial

Foster Care Board Rates
DCS Foster Care Board Rates are tied to the USDA cost of raising a child in the urban south, and include housing, respite, food, transportation, clothing, children's allowance and miscellaneous items. Normal child-related activities and expenses are included in the monthly foster care board rates. Current foster care board rates can be found here or by visiting our DCS webpage at www.tn.gov/dcs. Foster parents for contract agencies should contact the agency in which they are approved for specific guidelines.

Please refer to DCS Policy 16.29, Foster Home Board Rates for more information.

Extra Foster Care Expenses
The Department's position on extra expenses includes:

- **Christmas** Voluntary donations to foster children are placed in a special fund which allocates money for special needs including Christmas. Some Foster Parent Associations also provide and purchase items for Christmas and other times during the year. Additionally, the Faith-Based Community may be utilized to provide gifts to children in foster care. The Community Advisory Boards (CAB) may be
considered as well. Each year the fiscal department releases a SANTA memo outlining any funds available for foster children/youth.

- **Birthday** DCS does not provide money for birthday gifts. The expectation is that the foster family will provide necessary birthday items. Many local Foster Parent Associations encourage membership in order to provide birthday gifts and money for DCS children. Additionally, the Faith-Based Community may be utilized to provide gifts to children in foster care. The Community Advisory Boards (CAB) may be considered as well.

- **Vacations and Family Trips** DCS does not provide money for family trips/vacations. The expectation is the foster family will include foster children in family trips or family vacations. If a foster family chooses not to include foster children in family trips or vacations, then respite arrangements must be made with other foster families or relatives of the present foster family. As needed the Family Service worker, Foster Parent Support or Contract provider staff should be notified of respite needs so they can assist in making arrangements.

- **Graduation** Assistance with graduation and senior year expenses are available for eligible children through the Chafee Independent Living Funds. Some of the expenses that are covered include: testing fees, tutoring, summer school, senior pictures, graduation invitations, year books, and class rings. In order to receive assistance with senior expenses, the foster parents and the Family Service Worker should make requests approximately 3-4 months prior to the funds being required. If foster parents incur their own graduation expenses, they may not be reimbursed. For more information, please refer to the Independent Living services grid by visiting this link: [https://www.tn.gov/content/dam/tn/dcs/documents/youthintransition/staff-info/ILWrapGrid.xlsx](https://www.tn.gov/content/dam/tn/dcs/documents/youthintransition/staff-info/ILWrapGrid.xlsx) and notify the Family Service Worker or Independent Living Specialist for their assistance in accessing these funds for eligible young adults.

- **Other Special Expenses** Before expenditure is incurred the foster parents should consider the urgency of the need and discuss it with the Family Service Worker. Out-of-pocket expenses (e.g., travel, clothing, medical, etc.) are only reimbursable if pre-approved by the Family Service Worker. Out of pocket expenses must be adequately documented and receipts must be included.
**Educational Costs**

The majority of the children in the foster care system are educated through the local public school system. Justification for any other educational source must be approved by the Regional Administrator, Executive Director, and/or Central Office. If a child has been expelled and cannot return to school, the foster parents should contact the Family Service Worker and Foster Parent Support Worker for assistance. For extracurricular or additional school costs, such as summer school, band, sports, ROTC, etc., the foster parents are asked to consult with the FSW, Independent Living Specialist, Foster Parent Support Worker, and/or Contract Agency to inquire about available funding.

**Medical Expenses and TennCare Updates**

Most children in foster care have health care coverage through TennCare Select. Some children have health coverage from their parents' private insurance. Private insurance always pays first. The child's Primary Care Provider (PCP) should accept both. The foster parents should check with the FSW or the Regional Health Advocacy Representative regarding the procedure and paperwork for children not covered by TennCare. Foster parents may want to remember the following points regarding use of TennCare:

- The child should have a TennCare card or other insurance card. If the proper insurance card for the child was not received, please contact the FSW.

- TennCare cards should always be taken to the doctor, dentists, emergency room, hospital or other health care providers. Providers need the information on the card to bill TennCare for services.

- The FSW assigned to the child will help identify the child's PCP through TennCare Select, the child's assigned TennCare MCO (Managed Care Organization).

- Use the child's TennCare Pharmacy card to secure prescription medications for each child.

**Clothing and Allowance**

When a child first enters state custody, DCS staff is required to make every effort to obtain the child's clothing from their parents or guardians. DCS may provide an initial clothing allotment or obtain clothing through resource linkage if the child's clothing is inadequate. Amounts vary
depending on the child’s age. Adequate clothing should be provided throughout the length of
the child’s placement, utilizing money received for the foster parent board payment. All
clothing and personal items purchased for the child from clothing allotments or board
payments should be given to the child when the placement ends.

Foster Parents should give children an allowance at a rate consistent with the child’s age and
developmental status. This allowance should be a minimum of one dollar a day and is
expected to be provided from the money received for the foster home board payment.
Allowance money should be given to the child directly in an effort to help the child learn money
management. Any questions or problems regarding allowance should be discussed with the
FSW. Refer to policy 16.29, Foster Homes Board Rates and Protocol for Clothing and
Allowances for more information.

Reimbursement for Damages
Foster parents may be eligible for reimbursement of damages made by a foster child/youth by
submitting a claim form with the State of Tennessee Claims Division. Please refer to the Claims
Department through the state of Tennessee https://www.tn.gov/tdot/transportation-
legal/claims.html to complete the necessary documentation/form.

Liability Insurance
A foster parent under contract with DCS may wish to secure liability insurance to offset any
potential liability. Many Local Foster Parent Associations have information regarding liability
insurance and community contacts.

Federal Income Taxes
Foster parents should consult the Internal Revenue Services (IRS), their tax preparers,
accountants, or CPAs for current tax laws and information pertaining to custodial children
placed in their homes.

Day Care Expenses
In order for foster parents to receive day care services, they should be employed. Usually, “stay
at home” parents are not eligible for day care. However, there may be special circumstances in
which a child may need to develop a social skill, etc. that day care may be in the best interest of
the child. Contact the Family Service Worker and/or Fiscal staff for regional protocol.
**DCS Foster Home Board Payment Verification**

All DCS Foster families are required to verify the daily board rate for each child in their care two times per month. Phone-in and online verification calendars are located on the DCS website at [https://www.tn.gov/dcs/program-areas/fca/current/verification-calendars.html](https://www.tn.gov/dcs/program-areas/fca/current/verification-calendars.html). DCS foster parents are asked to use ONE (1) of the two verification processes below. Do not use both.

**Phone-in Verification Process**

On designated Verification days, please call the following number: **877-318-5064**.

Follow voice directions for the phone-in process.

- Have foster parent SSN and PIN available.
- Have TFACTS person ID for the child available. (person ID numbers are on the child’s placement contract)
- Have the dates of care for the child: begin date and end date. If there is a question about these dates contact the FPS worker in the region.

**Foster Parent Verification Portal (online)**

Foster Parents can verify foster care pay periods online.

The online service is simple. When a foster parent logs in, the system knows them and shows the children for whom they need to verify; they only have to enter dates and submit. The online system also allows foster parents to request a replacement PIN, which is mailed.

Foster parents can access the online service with some of the same information that is used for the phone-in system. Just follow the simple steps below:

1. Go to **Foster Parent Verification**
2. Enter Foster Parent SSN and PIN to Begin
3. When the verification page loads, enter start and end dates. The dates must be within the same calendar month and for one pay period at a time.
4. Enter dates that the child was actually in the home. It is okay to leave a row blank.

5. Review the dates for accuracy.

6. Once a quarter the foster parent will be required to answer a set of three questions prior to submitting the verification. Please answer the questions.

7. Submit the information.
If submit is successful, the confirmation page will be displayed and that is the last step.

Follow easy steps as directed within the online portal.
Chapter 8
The Core Practice of Fostering

Foster Home Selection for Children
In determining the number and ages of children to be cared for in any foster home, the following factors are considered, but not limited to: the foster parents' stamina, capacities and skills to care for the child/children; as well as space and/or physical accommodations in the foster home. The children will need to have their own bed and not more than two (2) children share a bedroom without proper approvals. Children three (3) years of age or older may not share a bedroom with the foster parents, except for brief periods of illness or emotional distress. Children of the opposite sex shall not be allowed to share bedrooms. Exception to this is if the children are siblings that are age four (4) or younger.

The Department wants foster parents who have the ability to team with birth families. The foster family should have the ability to work with mentors and assist birth families towards the goal of reunification. If difficulties arise in teaming with a birth family, issues should be reported to the Family Service Worker and dealt with individually or in a Child and Family Team Meeting format. Local law enforcement can be contacted in the rare situations where safety of a child or family is believed to be compromised. The Department also wants to ensure that the foster family has the capacity to deal with more than one birth family at a time if children are from multiple families. Foster parents need to have the ability to team with the Department for the best interests of the children and families.

Foster Home Limitations
DCS policy requires that foster parents and DCS staff assist in maintaining these limits within their homes:

- No more than two (2) children under the age of two (2), including the birth children and adopted children, in the home.

- No more five (5) total children, including the foster parent's birth and adopted children, in the home.

- No more than two (2) foster children in a Therapeutic or Medically Fragile Foster Home.
Respite care is a temporary situation and must be discussed with the Family Service Worker and Placement Services Division. Placing children for respite constitutes consideration given the number of beds available and provision of proper supervision. See Respite Care and Other Events section for additional information.

For additional information regarding limitation of the foster home, refer to the Department of Children's Services website for Policy Reference: Guide to Placement Exception Categories.

**Accepting a Placement**

When a child needs a foster family, someone from DCS calls and talks to the foster family about the child. During this time, the Department provides the foster family with all known information about the child to assist the family in making a placement decision. The foster family has the opportunity to ask questions. Unless the child has history with the Department, the Department may only know the information provided by the child, family and others involved with the child's case. The foster family will likely be asked to make a decision about accepting the child into the home. If a family does not accept the placement or asks for time to think or discuss with other family members, the placement search continues until a placement is located for the child. Due to the time sensitive nature of placement, regional placement staff may grant or deny a short amount of time for the placement discussion. If the foster family accepts the placement, DCS worker will bring the child to foster home. Form **CS-0565, Daily Rate Child Placement Contract**, form **CS-0727, Initial Intake, Placement and Well-Being Information and History** and at least a change of clothing should accompany the child. This contract is the foster family’s authority to care for the child. This contract contains information about what foster parents are required to do for the child, i.e. health care, education, travel, etc. The DCS employee leaves a fully signed and executed copy of the contract with the foster family.

**Foster Parents’ Employment Obligations**

A foster family should be financially stable without relying on a board payment. If the foster family members work during the day, safe and nurturing day care services to children under school age must be provided. Use of the Broker Day Care system is advised if foster parents both have a documented need for this service due to full- or part-time employment. In order to request Broker Day Care assistance the foster parents need to contact the FSW to start that process. Once approved the foster parents must follow instructions of the Broker Day Care assistance program to maintain and renew child care. Care for the children in the event of
emergencies is also the responsibility of the foster parents. DCS staff refer to the Foster Home Disaster Plan (CS-0871) on file for contact information in emergency situations. Foster parents must keep the Case Managers advised of where foster children are in all situations.

**Supervision Guidelines**

Foster parents are advised that the following are “general” guidelines. Foster Parents, by virtue of their approval, can utilize trusted friends and family to assist with temporary, short-term child care (babysitting) arrangements. Foster parents are responsible for making good choices in child care options. Child care guidelines for foster parents need to be established on an individual basis for each child and with the approval of the Family Service Worker. Consideration must be given to the physical, emotional, and mental maturity of the child as well as the circumstances if they are expected to supervise younger siblings. General Guidelines are as follows:

- Children zero (0) through age nine (9) are not to be left unsupervised.
- Children 10-12 may be left unsupervised for a maximum of two (2) hours.
- Children 13-14 may supervise younger children for a maximum of four (4) hours.
- Foster children under 18 are not to be left unattended overnight.

State law effective July 1, 2006 makes it a crime to leave a child six (6) and under alone or with another child under the age of 13. While state law and Child Protective Services Policy do not refer to a particular age for children to be left unsupervised, consideration should be given to:

- Supervising child has clear expectations and guidelines of what to do
- Supervising child has a high level of maturity and capability of following through with expectations
- Consideration given to whether the supervising child or child(ren) needing supervision has a disability and the supervising child’s ability to provide for needs in spite of or related to the disability
- Supervising child’s ability to adequately supervise younger children
• Supervising child has immediate access to a responsive adult by telephone or in person

• Supervising child knows what to do in an emergency situation

• Supervising child has contact numbers readily available

• Length of time should be based on time of day (day vs. night)

• Children being supervised are responsive to supervision

For additional information regarding limitation of the foster home, refer to the Department of Children's Services website for Policy Reference: 31.17, Child Care Assistance Program.

**Prudent Parenting**

The reasonable and prudent parent standard is characterized by careful and thoughtful, parental decision-making that is intended to maintain a child's health, safety and best interest while encouraging the child's emotional, academic and developmental growth. This will generally be impacted by the child's length of stay in the placement and the foster parent’s understanding of the child's strengths and needs.

Foster parents adhere to their own practice of care by determining whether to allow a child or youth in his or her care to participate in age and developmentally appropriate activities. Examples of such activities include, but are not limited to extracurricular enrichment, and social activities that may include: dating, outdoor activities, “hanging out” or “sleepovers” with friends, art classes, poetry readings, prom, sports, clubs, vocational & volunteer activities, hobbies, religious/cultural events, field trips, driver’s education, birthday parties, etc.

Extra-Curricular Activities for children in foster care should be encouraged and monitored. DCS will make efforts to request the consent of the birth parents when special activities occur. However, DCS may give consent or authorize the foster parents to give permission for special activities. Foster parents should assist the child in making appropriate choices in activities. Information on the activities should be regularly communicated with the birth family.

These experiences allow youth to build skills, while developing talents, and healthy relationships with peers and supportive adults. New experiences and opportunities--even healthy risk taking--help youth discover who they are and learn important decision making skills.
when they are supported by nurturing caregivers. For a list of considerations in exercising the prudent parenting standard and understand the foster parent’s role in normalcy and social, emotional and academic growth, please refer to Protocol for Reasonable and Prudent Parenting Supplemental to DCS Policy: 16.3, Desired Characteristics of Foster Parents and 16.8, Responsibilities of Approved Foster Homes.

**Tennessee Child Passenger Safety Law**

The Department of Children's Services requires all potential and active foster parents to follow all safety restraint laws and requirements as determined by the TN Department of Safety. All seats used by foster parents must meet Federal Motor Vehicle Safety Standards and must be installed as per manufacturer’s instructions. Provision is made for the transportation of children in medically prescribed child restraints. A doctor's prescription is to be carried in the vehicle utilizing the modified child restraint at all times. The below information provides the size, weight and age requirements for child safety seats and restraints.

- Never place an infant or small child (under age 12) in front of an airbag

- Booster seats require both lap and shoulder belts

- Foster parents are encouraged to contact their local safety officer to come to their home to ensure proper installation of child car seats. Foster parents should also be advised not to use car seats that were previously in a car during an accident and to be mindful of expiration dates on child safety seats as well
<table>
<thead>
<tr>
<th>Child's Age/Weight/Height</th>
<th>Type of Seat</th>
<th>Location of Seat</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-1 year/20 lbs or less</td>
<td>Rear-facing</td>
<td>Rear seat (if available)</td>
</tr>
<tr>
<td>1-3 years/greater than 20 lbs.</td>
<td>Forward-facing</td>
<td>Rear seat (if available)</td>
</tr>
<tr>
<td>4-8 years/less than 4'9&quot; tall</td>
<td>Booster Seat</td>
<td>Rear seat (if available)</td>
</tr>
<tr>
<td>Over 8 and 4'9&quot;</td>
<td>Seat Belt System</td>
<td>Rear seat (if available)</td>
</tr>
<tr>
<td>13-17 years</td>
<td>Seat Belt System</td>
<td>Not specified</td>
</tr>
</tbody>
</table>

DCS conducts driver safety checks on all foster parents as well as any individuals identified as regularly transporting foster children. These checks are conducted during the home study process and at each reassessment period. Anyone who transports foster children should have a valid Tennessee license (within 30 days of residing in Tennessee), as well as current insurance and registration. Current proof of these documents should be provided for foster parents’ files on an ongoing basis.

**Signing Permission Forms**

- Permission Forms and releases should be discussed within the framework of the Child and Family Team meeting.

- Biological Parents, foster parents and DCS staff should communicate ongoing interests of the child that may require written permission.

- Every day decisions such as school trips, school lunch forms, club permission slips can be handled by the foster parents with consideration given to the input of the biological parents. If there is any question or doubt as to approval, always contact the Family Service Worker for consultation.

- All major decisions, such as surgeries, oral surgeries, counseling, or behavioral health services must be reviewed and discussed within the Child and Family
Team Meeting with the DCS Health Unit Nurse in attendance and/or informed of the medical need.

**Responding to Runaways**

- Foster parents should immediately call the local law enforcement in their area to report the child's runaway status.

- Foster parents should contact the Family Service Worker (FSW) immediately following the notification to law enforcement. On-call staff can be contacted after hours and on weekends for emergencies. The emergency hotline number is 1-877-54-ABUSE.

- The FSW, with assistance of the foster parents complete an [Absconder/Runaway/Escapee/Recovery Checklist (CS-0705)](#) with detailed information and a picture of the child. This form is presented to local, state, or other law enforcement agencies to assist with locating the child.

For additional information regarding runaways refer to the Department of Children's Services website for Policy Reference: **31.2 Responsibilities Regarding Runaways, Absconders, and Escapees**.

**Incident Reporting**

Any event affecting a child or a program's operation that is potentially of serious consequence is considered an incident. Best practice and program fidelity compel DCS to record and track incidents for the children/youth they serve. Tracking incidents provides the Department with both quantitative and qualitative data to monitor and support program efficacy.

DCS Foster Parents should report all incidents to the designated regional staff persons, DCS Foster Parent Support Staff, who receive incident reports (IRs) during regular business hours and on-call staff after regular business hours. DCS Foster Parent Support Staff submit IRs on custodial children/youth that are in the care and control of DCS foster parents.

Incidents should be reported to the DCS Foster Parent Support Staff as soon as the DCS foster parent is aware. DCS Foster Parent Support Staff will gather information that meets incident reporting requirements and appropriately document those incidents into TFACTS.
The IR/TFACTS system is for reporting incidents with custodial children which include but are not limited to the following:

- Abduction
- Major Event at an Agency
- Runaway/Escape
- Serious injury to a child/youth
- Emergency Use of Psychotropic Medication(s)
- Restraints (all, with the exception of the use of mechanical restraints in routine transports)
- Sexual Abuse as defined in Policy 18.8, Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and Prison Rape Elimination Act (PREA).
- Any incident that results in injury or hospitalization of child/youth

Allegations of abuse or neglect that require an IR should also be called into the Child Abuse Hotline at 1-877-237-0004.

Policy Reference:

DCS Policy 1.4 Incident Reporting

Protocol: Steps in Reporting Incidents for DCS Foster Homes

Terms and Definitions of Incidents

Death of a Child/Youth in DCS Custody

The impact of the death of a child is felt widely and will affect many different people. DCS policies 20.27, 20.29, and 20.57 outline the steps to take in these tragic situations. Foster parents should know that if a child dies while in the foster home, the body should not be touched or moved. Law enforcement should be immediately contacted to complete a proper investigation and to transport the body to the proper facility. DCS staff should be notified immediately as well so they can support you and follow through the proper procedures. If the death occurs in a hospital setting, the staff will ensure proper notification takes place. Birth Family notifications are made by DCS staff and should be in person when at all possible. The
Department will provide for the funeral and burial of children who die while in TN state custody if the birth family cannot be located or is unable to afford the expense.

In planning for funeral arrangements following the death of a child in DCS custody, priority will be given to the birth parents' wishes. The Family Service Worker will also consider the wishes of the foster parents. This is especially true if the foster parents have had a close relationship with the child and if the child had been in their home for a significant amount of time. If the two parties are not in agreement, the Family Service Worker or another neutral person will attempt to mediate a compromise.

Policy Reference:

20.27 Child Death/Near-Death Rapid Response
20.29 Systems Analysis Review, 20.57 End of Life Decisions for Children in Custody/Guardianship
Protocol for Death of a Child/Youth in Department of Children’s Services Custody/Guardianship
CS-0993, Child Death/Systems Analysis Review: Attendance and Confidentiality Agreement

Chapter 9
Legal Issues for Foster Parents

Abuse Allegations and Investigations
Special Investigations Unit, or SIU, investigates allegation of abuse against foster parents. Special Investigations Unit staff adheres to the same Child Protective Services policies that are outlined in Chapter 14 on the Department of Children’s Services Policy and Procedure webpage. All information gathered is strictly confidential and strong attention is given to the privacy of the individuals involved. Foster parents who are either directly or indirectly involved in an SIU investigation should be aware of certain investigative procedures. Becoming familiar with the process will hopefully ease fears and result in better communication and a timely resolution. SIU investigators respond to all kinds of allegations and work with foster parents all over the state on a daily basis. Cooperation, understanding and communication are important aspects for both the investigators and foster parents. SIU investigators are highly skilled and respectful of the challenges faced by foster parents.
Referrals involving abuse or neglect are made to the DCS Central Intake Hotline at 1-877-237-0004. Hotline staff screens calls concerning abuse or neglect for the entire state. The hotline counselors gather the information and a screening decision is made concerning the allegations and severity. If the referral meets criteria for assignment, it is assigned for investigation. SIU investigators begin an investigation by assessing risk to the child. If a child is currently in the presence of or is being cared for by the alleged perpetrator, it is necessary to take immediate action. This may include, but is not limited to: a safety plan/agreement (depending on the circumstances), immediate response to where the child is located, contact with law enforcement, and/or requesting respite placement until the case can be investigated further. If the alleged perpetrator is a foster parent, notification is sent to DCS Central Quality Improvement Division and the foster home is placed on suspended admissions for the duration of the SIU investigation. The suspended admission prevents new children from being placed in the home until the home has been deemed clear of safety concerns. The foster parent is notified of their right to an advocate. If the foster parent does not know the name or have information concerning the advocate, the investigator must obtain the information and provide it to the foster parent. It is the responsibility of the foster parent to make contact with the advocate. It is the investigator’s responsibility to set up the interview with the child. The interview must be conducted in a neutral, non-threatening and private environment. Typically, investigations are conducted by trained forensic interviewers at Child Advocacy Centers.

A copy of all sex abuse and severe physical abuse referrals are sent to the District Attorney's office. These cases are worked with a team approach, referred to as CPIT (Child Protective Investigative Team). CPIT teams comprise law enforcement, SIU, District Attorney, medical staff and others as needed. The cases are worked together and the final classification is the result of a team approach.

Investigators interview the alleged victim first and then all children in the home, including birth and adoptive children. Investigators talk to all witnesses before interviewing the perpetrator. The perpetrator interview is conducted by law enforcement and/or the SIU investigator, depending on the seriousness of the allegation. After all information is gathered, a classification decision is made.

SIU cases are classified as unsubstantiated, unsubstantiated with concerns noted, or substantiated. If a case is unsubstantiated, SIU will send notification to DCS Central Quality Improvement Division and the suspended admissions will be removed unless the foster home is required to be reviewed by Foster Home Quality Team (FHQT). If the case is unsubstantiated
with concerns noted, it must be reviewed by FHQT before the suspended admissions is removed. If a case is substantiated, the alleged perpetrator will receive a letter from the Department concerning the indication and appeal process.

**SIU Level I Due Process**
SIU Emergency (formal) File Review: A due process proceeding is required for all substantiated classifications to individuals who currently volunteer, foster, and/or work directly with children. This includes approved foster or adoptive parents, employees, teachers and child care workers. Exception: This does not include if the substantiated abuse happened when the custodial child was on runaway status, trial home visit or on a home pass. SIU does not investigate those types of allegations; they are addressed by local CPS staff.

**SIU Level II Due Process**
Administrative Hearing is a due process proceeding offered to individuals who have been substantiated by the Department. This proceeding is the final process that is offered by the Department and usually follows an emergency file review and is completed by an administrative law judge.

**Foster Home Quality Team (FHQT)**
Foster Home Quality Team (FHQT) is a committee of DCS personnel from different program areas including quality improvement, risk management, foster care, training, placements, health and the foster parent advocacy program. A foster home must be reviewed by FHQT if any of the following have occurred:

- A SIU investigation closure is unsubstantiated with concerns
- A foster family has prior FHQT history or two prior investigations
- A SIU investigation was involving a child’s death
- A child with sexual behaviors was identified as a result of the SIU investigation
- A Safety Plan and/or Performance Improvement Plan (PIP) was implemented during the SIU investigation
- A foster home has been substantiated, but overturned through due process
- A foster home has been closed in bad standing and wants to re-open
- A foster home was been closed in good standing, but an inquiry has been added due to concerns and the foster home wants to re-open
- A FHQT member has concerns about or requests to review a foster home
Upon FHQT’s review, a recommendation is provided to the local regional DCS staff and or contract agency when applicable. Common outcomes of the FHQT include lifting the suspended admission on the foster home, adding training, a PIP, or a Safety Plan as needed before lifting the suspended admission, recommending the foster home is no longer used and/or closing of the home by region or contract agency; or lifting the suspended admissions with restrictions (age, gender, or specific child). Foster homes may be brought back for additional reviews as needed before lifting the suspended admission. The contract agency may ask for a secondary review of the case if they disagree with the decision made by the FHQT. This review includes the contract agency staff. If the region and FHQT cannot reach an agreement regarding a case, the case is presented to the Deputy Commissioner of Child Programs and Assistant Commissioner of Quality Control for a final decision. This information can be located in the *Protocol of Foster Home Quality Team*.

**Reporting Abuse and Neglect**

Tennessee Law requires anyone who suspects child abuse and/or neglect report it to DCS. Anyone who knowingly fails to make a report commits a Class A misdemeanor and can be fined up to $2,500. If a foster parent suspects that any child, including the child placed in the foster home, has been abused and/or neglected, it must be reported. The toll-free phone number for the CPS Central Intake is: **1-877-237-0004**.

For more information, or to make a report via secure email, please visit [https://apps.tn.gov/carat/](https://apps.tn.gov/carat/)

**Lawsuits Brought Against Foster Parents**

If a foster parent is sued, the FSW and the FPSW should be notified immediately. All lawsuits have strict response time limits, therefore the FSW or the FPSW will need to consult with the DCS Legal Division as soon as possible. The foster parent may be entitled to representation paid for by the state or for representation by the State Attorney General's office.

**Guardian Ad Litem**

This is a person appointed by the court to protect the interests of a child in a legal proceeding.

Each dependent and neglect child in foster care must, in accordance with state law, be appointed a lawyer, called a Guardian ad litem (GAL), to represent children who are committed to DCS legal custody as dependent and neglected children. **Rule 40** is included here as a
guideline so that foster parents will know what to expect in the required interaction between the GAL and any dependent/neglected child in their care. This rule can be found at https://www.tncourts.gov/rules/supreme-court/40. If foster parents have concerns about a GAL, those should be communicated with the child's Family Service Worker.

**Court Appointed Special Advocate**

Many times, the court will appoint a CASA, or Court Appointed Special Advocate, to review the circumstances of a child’s case and to report to the court. The CASA’s report is based on interviews with significant persons associated with the case, including foster parents, and reflects what is in the child’s best interests. CASAs are trained volunteers. Often, they bring an objective view to the case. They are interested in keeping the child safe while quickly moving the child through the court process. For more information, please visit National CASA - Court Appointed Special Advocate Association - CASA for Children: Advocating for Abused and Neglected Children.

**Education Issues**

Every region has an Education Specialist whose primary function is to assist DCS custodial children with education issues (refer to DCS policy 21.14). The foster parent should first contact the Family Service Worker (FSW) for education questions and/or to notify him/her of school situations. The FSW must provide the foster parent and the local public school with an “Education Passport” (refer to DCS policy 21.19) for every student in the legal custody of DCS. A complete Education Passport includes not only the form, but also the applicable education/school/disciplinary records of the child. If a foster parent does not receive this packet, it should be requested from the FSW. If a child is having disciplinary troubles at school, the FSW should be contacted immediately. (See DCS policy 21.16).

School trip authorizations and similar permissions are addressed in the **Protocol for Respite Care and Other Events**, which reviews safe and appropriate parental decision-making topics on an individual basis.

Foster parents are an integral part of the IEP (Individual Education Plan) process for children in special education because they can provide daily insight to the child's current school performance. The biological parent, however, must be notified and/or included in the IEP process as long as educational rights have not been removed through the court. The school system must make diligent documented efforts to contact the biological parent. If unable to
locate the parent or if parental rights have been terminated, the local school system may do any of the following:

1. Proceed with the IEP meeting if parent retains rights but is unable to attend.

2. Ask parent to allow appointment of a surrogate on his/her behalf.

   **If parental rights have been terminated, child's parents are deceased, and/or the child is categorized as a Ward of the State, then the school may:**

1. Appoint a trained surrogate parent from the school system's required Surrogate Parent List.

2. Request and train the foster parent to serve as the Surrogate Parent if the child has lived in the foster home for less than one year. (Please note, however, that the school system is not required to appoint the foster parent as surrogate under these circumstances.)

3. Automatically appoint the foster parent as surrogate parent if the child has lived in the same foster home for more than one year and is willing to serve as the surrogate.

If requested, the foster parent is encouraged to fill the role of Educational Surrogate as defined under Individuals with Disabilities Education Act (IDEA).

**Confidentiality Guidelines**

Permanency Plans, psychological of any kind, and court documents are private. No documents regarding the child should be provided to a school by a foster parent unless attached by the FSW to an Education Passport (DCS policy 21.19). Private facts about the child's biological family or situation should not be provided to any school official without approval from the FSW or Education Specialist. Medical and legal information allowed to be shared with schools is limited only to what is necessary to keep the child and others at school safe. Any questions regarding sharing of pertinent information should be addressed by the DCS Medical Unit Nurse or any DCS legal counsel.
HIPAA (Health Insurance Portability and Accountability Act of 1996) is United States legislation that provides data privacy and security provisions for safeguarding medical information and allows for all information to be shared with a physician.

**Placement Contracts**

*Daily Rate Child Placement Contract* is a legal binding agreement between DCS and approved expedited and traditional foster parents that outlines the responsibilities of both parties. This contract provides foster parents with the authority to care for the child placed in their home and contains information pertaining to what the foster parents are required to do for children placed in their home, i.e. health care, education, travel, etc. This contract also prohibits foster parents from attempting to adopt, file a petition to adopt, or take any steps whatsoever to adopt children placed in their home without consulting with Department staff and holding a CFTM in which it is determined adoption is in the child's best interest. When applicable, both foster parents, in addition to DCS FSW and DCS Supervisor are required to sign the placement contract. The DCS employee who transports the child will provide the foster parent with a signed copy of the placement contract.

**Chapter 10**

**Moving Toward Independence**

*Services for Youth and Young Adults between the Ages of 14-26*

The journey towards independence begins for most young people in their early teens as they begin learning skills and developing relationships that will allow them to successfully navigate a complex world, provide for their daily care needs, and reach their goals. Independent Living Services are not a substitute for permanent connections to caring adults, but rather a complement to those relationships.

The purpose of Independent Living and Transition Planning is to build a network of relevant supports and services for youth in state custody, or exiting state custody to adulthood, in conjunction with regional support workers and youth. Life skills assessment is part of the planning process. This assessment is required annually by all youth ages 14 and older to assist in determining the independent living needs to be identified in the youth's independent living/transition plan. Foster parents are vital to each youth's preparation for adult living, by helping to implement actions steps on the youth's independent living/transition plan.
Youth and young adults may be eligible to receive Independent Living Wraparound Services that support developmentally appropriate activities, scholarships to help them pursue post-secondary education, and opportunities to develop life skills. The youth’s Family Service Worker and Independent Living Specialist can be consulted for additional information about these services. (Please refer to the IL Contact List to get in touch with your regional Independent Living Specialist.

Young adults who exit DCS custody at or after age 18 may receive Extension of Foster Care (EFC) services based on meeting certain eligibility requirements, which include remaining in school and not being in a secure facility. Young adults who voluntarily participate in Extension of Foster Care Services are provided continued access to services such as placement (including foster home placements), Independent Living Wraparound Services, scholarships, ongoing case management, and court oversight. Extension of Foster Care Services are available up to age 21.

**DCS Policy 16.51, Independent Living and Transition Planning** and associated protocols describe the types of planning that must be accomplished to ensure youth/young adults’ needs are met. This planning is done within the Family Permanency Plan and appears in its own section. Here are some things to know:

- Youth in DCS custody 14-16 years of age have an Independent Living Plan section, which focuses on life skills.

- Youth in DCS custody 17 years of age and older have a Transition Plan section that focuses on their transition from custody as adults.

- Young adults receiving Extension of Foster Care Services have a Transition Plan section that focuses on reaching the completion of an educational goal, or transition to services for adults if they have special needs.

More details about Quality Independent Living and Transition Planning for Youth can be found in the “Planning for Independent Living and Transition to Adulthood” presentation available on the DCS website.

The Independent Living or Transition Plan Section of the Family Permanency Plan should reference the types of Independent Living Services youth and young adults need. **DCS Policy 16.53, Eligibility for Independent Living Services** and associated protocols describe the
categories of Independent Living Services available, to include eligibility for those services. The services may include:

- Life Skills Assessment and Life Skills Instruction/Coaching (foster parents will likely be asked to help with these).

- Independent Living Wraparound Services.

- Post-Secondary Scholarship Services (potentially up to age 24, depending on the service): Education and Training Vouchers (to age 23) or State Funded Scholarship (to age 24).

- Independent Living Allowance: for young adults receiving Extension of Foster Care Services.

- Continuation of Placement Services: for young adults receiving Extension of Foster Care Services.

- Contracted Services: LifeSet, which is provided through a public/private partnership and grant by Youth Villages, Inc., Services from Resource Centers (where available) can be accessed until age 26.

More details about Independent Living Services can be found in the “Services Available Under TN DCS IL” tip sheet available on the DCS web site.

In some cases, young adults ages 18-21 are eligible for Extension of Foster Care Services if they exit DCS custody to adulthood, based on the eligibility guidelines set forth in DCS Policy 16.52, Extension or Re-Establishment of Foster Care Services for Young Adults. At any point between emancipating from state custody (at or after 18) and turning 21 years old, otherwise eligible young adults may return to DCS and request to receive Extension of Foster Care Services.

There are times when the team may determine that another option for service, such as Transitional Living, may be more appropriate based on a young adult's needs.
More details about Extension of Foster Care Services to 21 can be found in the “Extension of Foster Care Services” presentation and the “Independent Living Handbook” available on the DCS website.

**Transition to Services for Adults**

For some young people with developmental limitations or severe and chronic mental illness, a transition to services for adults may be the most appropriate step for them as they reach the age of 18 or 19 (for delinquent youth). Longer term services for adults are not provided by DCS, but by various other programs and service options such as the Employment and Community First (ECF) CHOICES, the Department of Intellectual and Developmental Disabilities (DIDD), the Department of Mental Health, the Department of Vocational Rehabilitation, TennCare related services, and Social Security income. These services may be voluntary, or decided upon by the youth’s conservator (if one is appointed) when a young person does not have the capacity to make decisions independently. The Child and Family Team should include members with expertise in the youth’s disability, such as ECF and TennCare staff, mental health service providers, the DCS regional psychologist, or the regional health unit nurse. Additional information can be found in DCS Policies **19.7, Transitioning DCS Youth with Serious Psychiatric Disorders into Adult Behavioral/Mental Health Services** and **19.8, Transitioning Youth to the Department of Intellectual and Developmental Disabilities (DIDD) Adult Services**.

**Chapter 11**

**Supports for Foster Parents**

**Foster Care Associations**

The Tennessee Foster and Adoptive Care Association (TFACA) is a nonprofit organization that functions as an advocacy support group for foster parents throughout the state of Tennessee. TFACA provides programs and services to create an environment that encourages and motivates foster and adoptive parents, and other interested members of the community, to work together to promote the general welfare of foster children. TFACA facilitates communication and interaction between foster and adoptive parents and others concerned with the growth and development of foster children. TFACA also serves as the spokespersons for foster and adoptive parents and the children under their member’s care and in DCS custody.
The Purpose of TFACA is:

- To encourage and motivate participation of foster parents and other interested persons or organizations

- To encourage communications between foster parents and other persons concerned with the growth and development of foster children in their care and custody

- To develop a better understanding by the general public of certain inherent problems in providing foster home care

- To act as Trustee of any funds or property the association may receive under specific grant or agreements or under any will, or to have and exercise the right to hold and manage such funds

- To be the spokesperson for foster/adoptive parents in Tennessee and children under their care and custody regarding any legislative actions and governmental programs affecting their health and welfare

Benefits of TFACA Membership

The Board of TFACA is passionate about improving the lives of Tennessee’s foster children. TFACA recognizes the importance of foster and adoptive parents and are spokespersons for them and the children under their care.

The following are some benefits of TFACA Membership:

- To provide a support team and united voice with the State of Tennessee and National Foster Parent Association (NFPA) regarding legislation and policies affecting foster parents

- Representation across Tennessee to identify trends or problems and work towards a solution as the liaison with the Department of Children’s Services.

- TFACA is the foster parent’s voice in creating DCS policies to include legislative changes, board rate increase, etc.
• Regional Directors are identified in each region to assist local foster care associations develop and remain strong to support families on a local level.

• Regional Advocates ensure all foster parents’ rights are being protected.

• A Mentor to help new foster parents’ navigate through the system during their first case.

• TFACA sponsors/hosts events such as the 5K Walk Me Home which raise funds for enrichment activities for Tennessee’s Foster Children and raises awareness for foster care.

This event allows for Foster Children to attend or participate in activities otherwise not affordable. These activities include, but are not limited to, school/church trips, camps, sporting equipment and musical instruments/lessons.

• TFACA awards scholarships to deserving High School graduates each year.

• Representation in statewide work groups and events geared for recruitment and retention of foster parents.

• Representation at NFPA annual conference, bringing back information updates and changes from a national level to Tennessee.

• Discounts to attend the annual conference which provides relevant and high-quality training for foster parents, as well as a great place for networking with other foster parents.

Policy Reference: **16.8-Attachment 4-Guidelines for Foster Care Associations**

**Mentorship Program**

The Mentorship Program provides additional support to newly approved Traditional and Kinship Foster Parents by connecting them with seasoned foster parents who can provide them with support, understanding and knowledge related to fostering and the child welfare system. Some of the supports can include:

• Provide guidance and reassurance
- Lend a supportive ear to families in crisis
- Offer suggestions for child/family needs
- Assist families in understanding and navigating the DCS system, policies and procedures
- Assist families in developing and improving their skills and knowledge

**DCS Support**
The Department was instrumental in organizing and the implementing foster care associations and believes strongly in their positive capacities. DCS and Associations have a collaborative team approach with working towards the common goal of safe, secure and nurturing homes for Tennessee children. This support is demonstrated by:

- **Communication** - Encouraging Family Service Workers to communicate their confidence in the local and state associations to new and existing foster parents and to inform them of special events and trainings sponsored by local and state associations.

- **Participate** - Family Service Workers are encouraged to attend meetings and to be active participants in the associations. The relationship between the associations and DCS staff will benefit from ongoing and mutual team work.

- **Liaison** - The associations are assigned a staff liaison by the DCS Regional Administrator to act as a conduit between the foster parents and DCS.

DCS provides the resources and opportunities for additional training and on-going support and resources.

**Walk Me Home Enrichment Fund**
The Walk Me Home Enrichment Fund was established for the sole purpose of supporting and enriching the lives of children and youth in foster care, custodial kinship care, along with Expedited Kinship Care and in special circumstances- adoptive placements. All requests for financial assistance are made by submitting an application, which is located on the TFACA website or by contacting a member of the Walk Me Home Enrichment Fund Committee.
Requests may be made by DCS foster parents, Kinship families of children/youth in custodial care, and Private Provider foster parents. It is permissible for adoptive parents & Expedited Kinship foster parents to submit an application for assistance; however these determinations will be made on a case by case basis, based on availability of funds, and present circumstances. Funds may only be accessed when all other resources have been exhausted (e.g. flex funding, DHS, TennCare or appeal process if medical need, scholarships, Chafee funds, local association funds, community organizations, civic groups, churches, CABs, school system, corporations).

The Walk Me Home Enrichment Fund may be accessed to provide assistance to children and youth in the following areas:

- Summer Camp (one or two weeks- not child care summer camps)
- Therapeutic Camp
- Musical Instruments (rental or purchase)
- School Supplies (special circumstances)
- Extracurricular school fees for sports, clubs, etc.
- Class Trips
- Church Trips
- Classes/Lessons (e.g. piano, ballet, art, gymnastics-short term)
- Registration Fees for child care (special circumstances)
- Emergency Needs for Kinship Families (e.g. bedding, clothing, misc. items)

*Please note this is not an all-inclusive list.

Applications for assistance will be reviewed by the Walk Me Home Enrichment Fund Committee. Determinations will be made on a case-by-case basis, dependent on the individual needs of the child or youth and subject to the availability of funds.
Chapter 12
Frequently Asked Questions and Topics of Interest

Youth and Employment: Foster youth are allowed to work while in school or during summers as long as their grades are acceptable and the employment remains within the guidelines of the state/federal Child Labor Laws.

- As a condition of continuing to receive services past their 18th birthday, a youth must be employed at least part time.

- Foster parents may not sign waivers permitting youth to work in excess of state and federal Child Labor Laws.

- Please refer to the Child Labor laws chart from the State of Tennessee and the United State Department of Labor for specifics on age and hours of work allowed.

Photo ID Cards: Youth in custody will find many reasons to obtain a state-issued photo ID card. In order to obtain a photo ID for a custodial youth, please follow the steps below:

- Request that the youth’s FSW contact the regional IL Program Specialist for a photo ID application form. This form verifies that the youth is in custody. The FSW must sign the form.

- Take the youth and the form to the local Department of Safety office to obtain the ID.

Driver’s License: Can teenage foster children get a driver’s license? Who signs? Department of Children’s Services staff may not sign consent for a foster child to secure a driver’s license. A foster parent may, but is personally accepting financial responsibility for that youth. Should a foster parent decide they want to allow the child this opportunity, they should adhere to the following guidelines:

- If parents are available, they should be consulted.
• Insurance coverage must be provided by the foster parents, the child, or birth parents.

• The department must verify that the child is properly insured.

• If the child leaves the foster home, the foster parent should notify the Department of safety of this fact and of their intent to discontinue financial responsibility.

**Marriage of a Minor:** What is the policy regarding marriage of a minor foster child? A child under 16 years of age is prohibited by Tennessee law to marry without a waiver from an appropriate court. A youth between the ages of 16 and 18 years of age cannot marry without the consent of the parents, guardian, next of kin, or party having custody of the child.

Policy Reference: [1.24 Marriage Request for Youth in Custody of the Department of Children’s Services](#)

**SIU Frequently Asked Questions**

Q: Why is the investigation taking so long and why haven’t I heard from anyone?

A: Investigators make an initial assessment and try to gather as much information as possible. Typically, they are waiting on a response from law enforcement, the results of a medical exam or statements from witnesses. The investigation does not stop after the initial child interview. There are many factors that can delay the process. You may contact the investigator, SIU supervisor or foster parent advocate to voice concerns. Investigators are under strict timeframes for completion (60 days) and cases usually take several weeks to complete.

Q: How do I prepare for an SIU investigation?

A: Be knowledgeable of DCS policies and keep accurate records. Stay informed and communicate concerns to appropriate DCS staff. Keep a current phone list for DCS staff, contract agencies and know how to contact your foster parent advocate. Document all concerns and potential problems and address them with DCS staff, to prevent them from becoming a CPS investigation. Plan to attend foster parent events where SIU staff make presentations. This is an opportunity to meet the staff and have open dialogue about concerns. Foster parents should make themselves along with other household members available to SIU. Be honest and cooperative during an investigation.
Q: What can I ask during an SIU investigation?

A: Foster parents can ask about the allegations, but the SIU investigator cannot reveal the identity of the referent. Foster parents can ask if they are the subject of an investigation. However, the investigator will decide at what point in the investigation certain information is shared. Cooperation is essential and strict confidentiality rules must be followed.

Q: Will I know when the investigation is over?

A: Yes, the case closure notification is sent to DCS Staff. Recommendations are made by the Regional Administrator to determine if the foster home will be utilized for future placements.

Q: Will my foster child be moved during an investigation?

A: Frequently during an investigation, the SIU investigator will ask that a child be placed in respite until a determination is made. If the foster parent is named as the alleged perpetrator, the alleged child victim and foster parent must be separated. This prevents any future allegations being made and protects both parties. The SIU investigator along with local DCS staff will make a team decision about whether or not the child(ren) need to be removed or placed in respite.

Q: Will I be falsely accused?

A: There is a possibility that a child placed in the foster home may try to manipulate the placement or lash out by making a false allegation. Please know that SIU investigators understand that foster parents have opened their home and hearts to a child. SIU investigators are highly trained and they are sensitive to these issues. They will determine as quickly as possible if there are concerns and make recommendations as needed.

Finally – Stay informed, be proactive, partner with the Department, ask questions and KNOW HOW TO REACH THE REGIONAL ADVOCATE!!
Terms, Acronyms and Definitions

Family in “Good Standing”: Any fully-approved family that is currently taking foster child placements and complies with all on-going training requirements. Or, a family that has decided to close their foster home and discontinue their fostering experience and the system reflects the positive closure reason of “closed in good standing”.

Family in “Bad Standing”: Any current or previous foster family who has violated DCS policies or been non-compliant with foster home requirements. Or, a family whose foster home has been closed due to non-compliance with foster home requirements or violating DCS policies; the system reflects the negative closure reason of “closed in bad standing”.

FSW or Family Service Worker: This is the DCS employee known as the child’s case manager.

CFTM/Child and Family Team Meeting: This is the meeting held in conjunction with the biological family, their supports, the foster parents, DCS and the child if age appropriate. This teaming is where all focus is on what is in the “best interest” of the child and how does the team make decisions that will enhance this child’s life.

SIU/Special Investigations Unit: This is a formal unit assigned to investigate child abuse allegations within foster homes.

DCS Health Advocacy Unit Nurse: This is the nurse who is available to assist foster parents & FSW’s with any questions regarding the medical and dental care of the foster child.

Commonly used DCS acronyms can be located at the website below:
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