

PROCEDURE

Series:	Operating Procedures	COA: N/A CFOP: N/A
Procedure Name:	Use of Respite and Other Foster Parent Supports for Level II -V	
Procedure Number:	OP-1010	
Revision #/Date:	(3) 02/03/12 (4) 06/03/15 (5) 09/01/16 (6) 06/20/17 (7) 12/12/19	
Review Date:	03/12/2020	
Effective Date:	02/10/06	
Applicable to:	All BFP staff, Licensed Family Foster Homes, and Foster Children being Served	

PURPOSE: It is the policy of Brevard Family Partnership to ensure respite services are provided in the best interest of the child and in accordance with administrative code. This also serves to provide the foster parents with clear guidelines in accessing respite services.

PROCEDURE:

Reference: 409.175(14) F.S., 409.803 F.S., 65C-13.033

Definition

Respite care is intended to provide a foster parent some time away from the demands of providing care to children placed in their home. Respite care is defined as a minimum of 24 hours away from the responsibilities of providing care and respite is provided annually for a maximum of seven days.

Respite Requests

Requests for respite are made directly to the BFP Intake Specialists by the foster parent seeking respite. Foster parents are required to provide a 30-day notice in advance of when the respite is needed unless exceptional circumstances exist due to an emergency situation for the foster parent (such as illness or death in the family). The BFP Intake Specialists are responsible for finding respite placements for children within the network of family foster homes. Once the respite placement is identified, the BFP Intake Specialist notifies the family foster home and assigned Care Manager of the placement change date and ensures that the receiving foster parent has all current clinical, behavioral, and medical information available. If a child is on a Child Placement Agreement (CPA) the Intake Specialist ensures the receiving foster parent is aware, provides a copy and confirms that the foster parent is capable of meeting all requirements of the plan. BFP evaluates each respite request as they are received on an individualized basis with the children's best interest at the forefront of planning. BFP embraces the philosophy of providing individualized child and family services versus a "one size fits all" approach. The need for foster parents to have access to respite for multiple reasons is critical. Securing and mobilizing adequate resources is the responsibility of the entire Brevard community.

A. Guidelines for establishing and securing appropriate respite providers:

1. Foster parents should attempt to make their own respite arrangements with friends and family members who are familiar to the child and who have been cleared through the background screening process to be in a caretaker role with foster children.
2. Foster parents are strongly encouraged to identify someone who is not a licensed foster parent to be their back-up. Respite does not have to occur in a licensed setting.
3. When a foster parent identifies someone they would like to complete the background screening process on, they should contact their Licensing Specialist for the proper paperwork.
4. Babysitters or non-licensed respite providers who have completed and been cleared through the background screening process are permitted to provide respite in their home. Babysitting does not have to occur in a licensed setting. If a foster parent is unable to coordinate their own respite, the BFP Intake and Placement Department is responsible for finding respite arrangements. The Intake Specialist takes the following into consideration in order to determine the most suitable, safe and nurturing respite home for a child: child and caregiver characteristics, strengths, needs, and resources available.
5. In the case of an emergency where the foster parent must be absent overnight and the child cannot accompany them, the foster parent may select a family or person who is well known to them to care for the child. In these instances, the following must occur:
 - i. The foster parent must ensure that the home is safe and is child proofed for the child's age and maturity level.
 - ii. The Dependency Care Manager (DCM) must be notified of the emergency arrangement.
 - iii. The licensing specialist must perform a local criminal and child abuse background check within twenty-four hours of the family or person who is caring for the child. A full background screening will be initiated the next business day. Foster parents are strongly encouraged to identify and screen multiple persons to provide care in emergency situations.
6. If a foster parent cannot locate a respite provider, the foster parent should contact an Intake Specialist five (5) business days prior to the respite being needed unless it is an emergency, such as a death in the family.
7. Upon a suitable respite provider being located, the Intake Specialist will consult with the Licensing Specialist for the respite provider to review the following information (to determine if approval is appropriate): number of biological, adopted, and foster children in the respite provider's home, number of foster children to be placed for the purpose of respite, sleeping arrangements and the number of caretakers available in the respite provider's home (single vs. two parent foster home).



8. In the event the child being placed for respite will put the respite provider over their licensed capacity or will bring the total number of children in the home to more than five (5), a waiver will need to be completed prior to the child's placement.

9. Without exception, any time a foster family has more foster children placed in their home than their licensed capacity and any time there are more than a total of five (5) children in the home, including foster, adoptive and biological children and relative or non-relative placements, a waiver must be completed and approved by the CEO or his/her designee prior to the respite period.

10. The Intake Specialist will notify the foster parent who made the request, the DCM and the Guardian ad Litem if applicable via email or by telephone a minimum of five (5) business days prior to the placement occurring of the respite provider's information, to include name, address, phone number and dates of the respite.

11. The primary foster parent must ensure the respite provider has the necessary Medical Consent and placement paperwork for each child at the time of placement. If the paperwork has not been provided by the DCM, the primary foster parent should make a duplicate copy of their paperwork.

12. The primary foster parent should notify the child's service provider (if applicable) of the planned move, provide contact information and scheduling to avoid unnecessary disruption or delay in service provision.

13. If the respite provider is within a reasonable distance from the primary foster parent's home, the primary foster parent is responsible for transportation to and from the respite provider's home. The respite provider is responsible for transportation of the child to and from school unless other arrangements were made and approved by all parties.

14. All care providers shall be furnished with written information on the children in their care including:

- (a) Telephone numbers for the case manager in case of an emergency,
- (b) Medical authorization and instructions on seeking medical care,
- (c) Medications, instructions for administering, and the log for recording proper administration of the medications,
- (d) Physicians' name and telephone number(s),
- (e) School,
- (f) Medicaid number; and
- (g) Medical, physical or behavioral concerns.



B. Guidelines for foster parents and respite care:

1. Efforts will be made to find a respite placement familiar to the child and who is familiar with his/her daily routines, preferred foods, activities and any needed therapeutic or medical care.
2. Respite providers are expected to respect the culture, race, ethnicity, language, religion, and sexual orientation of the child.
3. Respite providers are expected to maintain a child's involvement in school and extra-curricular activities, as well as offering activities appropriate for the child's interests, age, development, physical abilities, interpersonal characteristics, culture and special needs.
4. When a child in respite care experience injuries, health problems or changes in appearance or behavior, this information should be reported to the Dependency Care Manager (DCM) immediately. The DCM will then notify the Licensing Specialist to follow up with the family foster home within one business day for resolution.
5. Respite providers will not release the child to anyone other than the foster parents or another person who is approved by the foster parents.
6. When respite care is provided in response to a crisis, Brevard Family Partnership works with the respite provider to ensure support services and age appropriate interventions are implemented.

BY DIRECTION OF THE CHIEF EXECUTIVE OFFICER:

PHILIP J. SCARPELLI
 Chief Executive Officer
 Brevard Family Partnership Family of Agencies

APPROVAL DATE: 4/21/2020