

# Agency Level of Responsibility

The Level of Responsibility workgroup of the Foster Care Reimbursement Rates Committee was assigned to develop agency expectations to correspond with the tiered level of responsibilities within the Nebraska Caregiver Responsibility Tool. The expectations outlined in this document are recommendations for agency supported foster care responsibilities to the Department of Health and Human Services and responsibilities to the family.

Each level of responsibility builds off of and includes the lower tiered levels of responsibility. For example a level three would include levels one, two and three respectively. Each level of responsibility includes training, documentation and support expectations.

<b>Level 1: Essential</b>
This Essential level is derived from the existing DHHS CFS Agency Supported Foster Care and Pre-Adoption Service Attachment (effective July 1, 2019)
<b>Training</b>
<p>Providing and ensuring that caregivers complete the necessary pre-service educational curriculum. Providing and ensuring that caregivers have the necessary ongoing training and/or relative and kinship training to become licensed or maintain licensure.</p> <p>Training is relevant and enhances the foster or adoptive family's ability and capacity to meet the unique needs of children age 0 to 5 years old, and all other youth for whom they are providing care, including</p> <ul style="list-style-type: none"> <li>• use of the Reasonable and Prudent Parent Standard</li> <li>• how to talk with children placed in their home about setting healthy physical boundaries and how to talk to children about healthy boundaries.</li> </ul> <p>Ongoing training can be offered through a combination of face-to-face training, classroom training, web-based training, and reading materials.</p>
<b>Documentation to be provided to DHHS</b>
<ul style="list-style-type: none"> <li>• Agencies will ensure the Youth Care Bill of Rights is provided to age appropriate children in foster homes within 72 hours.</li> <li>• Develop a communication plan between the caregiver and the family of origin to ensure consistent communication to support the children, or document why a plan does not exist.</li> <li>• Respite plan including the use of regularly scheduled and crisis respite.</li> <li>• Specific and individualized Placement Support plan for each child to prevent disruption.</li> <li>• Provide information to the caregiver about transportation reimbursement</li> <li>• Written Summary Reports of supportive services, concrete supports, resources, training, one-on-one instruction, and guidance, medical, vision and dental check-ups, mental or behavioral health needs and services.</li> <li>• Support the Caregiver in completing the Court Caregiver Information Form and Youth Court Forms for the child's review court hearings.</li> <li>• All medical information including medication and dosage changes.</li> </ul>

## Services and Support

Agency will be readily accessible and responsive to caregivers for which support is being provided including:

- Face-to-face visits in the caregiver's home at minimum once per month and more frequently by request and/or as needed based on the needs of the caregiver, child or any combination thereof.
- More frequent phone calls may be necessary to maintain communication
- Review and discuss strengths, stressors and problem solve
- Assess for the current suitability
- Offer, refer or provide concrete supports such as transportation, more frequent face-to-face visits, and other resources to ameliorate the stressors
- Encourage and facilitate the use of planned respite
- Identify the need for, provide or make arrangements for, ongoing training and one-on-one instruction and guidance to help provide normalcy and meet the needs of the youth in their care
- Individualized caregiver support based on the needs of the caregiver and the child, and the unique circumstances experienced by the caregivers

Support will include ongoing communication (by phone, email or text) and will include being available to caregivers 24 hours a day, 7 days per week including holidays and weekends.

Support includes assisting the caregiver with transport the child as needed to, but not limited to:

- Behavioral health appointments
- Medical appointments,
- Extra-curricular activities, and
- Events with family of origin

Contributing to the well-being of the caregiver and the child in placement by:

- Communicating all known information about the child
- Assist the caregiver in making contact with the child's parent(s) following placement into the caregiver's home, barring any known safety concerns communicated in writing by DHHS
- Provide input in case planning and discharge planning by participating in Family Team Meetings, Case Planning, attending court hearings, Transitional Living Planning, when requested by DHHS or the family
- Proactively participate in discharge planning, including using a trauma-informed approach to prepare youth for transition

### Levels 2 & 3: Enhanced & Intensive

#### Training

- Increased training is provided for caregivers as needs of the child increase and enhances the knowledge and experience level of the caregiver to meet the needs and maintain placement.
- Ensure the caregivers receive a minimum of 12 hours annually will be provided.
- Enhanced training is identified and provided to caregivers to support meeting the child's needs.
- Condition-specific training is expected for individualized caregiving support, including one on one coaching, mentoring and modeling interventions, such as de-escalation techniques.
- Agency staff receive training in condition specific medical needs to support caregiver

#### Documentation to be provided to DHHS

- Detailed summary of child's appointments, caregiver's interventions and training, and support provided by the agency to the caregiver to meet the enhanced and intensive needs of the child in placement.
- Documentation of condition specific training and certification obtained by Agency staff working with the caregivers and children.
- Case plans and monthly summaries demonstrate the increased frequency of contact, interventions and support provided by the Foster Care Specialist and supporting Agency.

#### Services and Support

- Agency provides altered levels of support, services and interventions depending on the child and caregiver's enhanced and intensive needs.
- This includes increased contacts with the caregiver and visits to the home depending on the required level of support to maintain the stability of the placement.
- Support caregiver's at child's appointments, as appropriate, and support caregiver's understanding of child's unique needs, techniques and interventions required of the child's medical and behavioral needs.
- Agency staff assigned to the caregiver are trained and can demonstrate and model specialized skills to support the child, including modeling skills for caregivers and parents.
- Agency is expected to provide staff experienced with supporting caregivers of children with trauma, and common behavioral needs commonly associated with child abuse and neglect and the foster care experience to adequately support caregiver's ability to meet the child's needs.
- Agency can seek out and provide suggestions for community resources and respite that matches the child's enhanced and intensive needs.
- For caregivers supporting transitional aged teenagers, the Agency will ensure the caregiver has access to life skills assessments and related findings, classes, and services. The Agency will ensure the caregiver has the skills to demonstrate, mentor and coach teens ages 14-19 to prepare the youth and their parents for success following discharge.
- Agency consistently demonstrates the importance of caregivers engaging, mentoring and coaching parents to prepare them for the child's return, and/or to support their participation in transitional planning.

#### Level 4: Specialized

The Specialized Level is derived from service agreements for Professional Foster Care through PromiseShip and the Administrative Office of the Courts and Probation.

At this level, it would not be appropriate to provide care for more than two children at the specialized level of responsibility.

#### Training

Caregivers must have at least two years of experience being a Caregiver or have career/life experience relevant to meeting the needs of youth.

Ensure caregivers receive training specific to child such as:

- Complex behavioral needs who have been, or at risk of being placed in, a congregate care facility,
- Significant physical, and/or developmental disabilities requiring specialized in-home medical care,

Minimum of 18 hours of annual advanced training such as:

- Medical equipment, medical interventions
- Certified technique in verbal de-escalation
- Supervision and support of high and very high risk probation youth, and specialized populations such as youth who have sexually harmed and youth with developmental disabilities
- Caring for youth after institutional placements

#### Documentation

Foster Care Agency will submit a monthly report that contains:

1. Summary of the service and contacts for the month
2. Descriptions of the interventions provided, including any behavioral health services and psychotropic medications
3. Description of any critical incidents or crisis interventions;
4. Documentation of progress by the youth and family;
5. Details of engagement and collaboration with the family;
6. Description of barriers impacting progress;
7. An assessment of the continued need for Specialized level of responsibility;
8. Any other recommendations or information.

Ensure the support plan contains Restorative Goals. These may include:

- Behavioral Goals (increase or decrease in identified behaviors),
- Medical treatment (medical regimes),
- Educational and community goals and/or
- Reintegration goals.

#### Services and Support

- Enhanced support to caregivers include more frequent contacts, hands on training, coaching, modeling, or other individualized support.
- Through the Agency Provider, the youth, caregiver(s) and family will receive
  - A Specialized Caregiving Support Plan;

- Enhanced respite planning;
- Clinical interventionist components and appropriate supports such as:
  - Nurse oversight, clinical oversight, clinical consultations, clinical or behavioral interventions, and/or Family Preservation.
- Specialized supervision;
- Skilled training.
- Arrange for, facilitate, and coordinate qualified respite to meet the specialized needs of the child.
- Additional Supports to meet the child's needs are provided and paid for by the Agency.