

1





2



3

Levels of Family Foster Care

 <p>Unlicensed Caregiver (relative, kinship)</p>	 <p>Fully Licensed</p> <ul style="list-style-type: none"> • Additional policy requirements • Allowed to care for related and unrelated children • No placement maximums, with the exception of treatment foster care. 	 <p>Certified</p> <ul style="list-style-type: none"> • Adjusted policy requirements • Allowed to care for related and unrelated children • 30 day placement maximums 	 <p>Relative Waiver</p> <ul style="list-style-type: none"> • Adjusted policy requirements • Allowed to care for related children only. • Prohibited from caring for unrelated children • No placement maximums, with the exception of treatment foster care.
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← You Choose Which Level of Licensure You Want to Provide! →

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North Dakota Law, Rule & Policy

Licensing Related Law

- ND Century Code = NDCC 50-11
- ND Century Code = NDCC 50-12

Licensing Related Administrative Code

- Family Foster Homes = NDAC 75-03-14
- Certified Shelters = NDAC 75-03-14.1
- QRTP Rate setting = NDAC 75-03-15
- Licensed Child Placing Agency = NDAC 75-03-36
- Qualified Residential Treatment Program = NDAC 75-03-40
- Supervised Independent Living Program = NDAC 75-03-41

Licensing Related Policy

- 622-05 Licensing
- 623-05 Maintenance Payments
- 624-05 QRTP Placements/ Court Involvement
- 607-05 Shelter and Respite




Click Here: [SFN 1038](#)



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What is Foster Care?

- Foster care is temporary substitute parental childcare to children where a court has identified it is “contrary to the welfare” for a child to remain in the home.
- Includes the provision of food, shelter, security and safety, guidance and comfort on a 24-hour basis, to one or more children under 21 years of age to safeguard the child’s growth and development and to minimize and counteract risks to the child’s emotional health inherent in the separation from the child’s family.
- Foster care may be provided in a licensed family foster home or qualified residential treatment program (QRTP).




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Family Licensing – Authorized Agents



CFS Licensing Unit
State Homes



Nexus PATH Family
Healing



Tribal
Nations



Unaccompanied
Refugee Minor
Program



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Foster Care Provider Interview



Thank you, [Tara Erikstad](#), ND foster care provider!

Foster Care Providers are responsible for providing a safety service to children in need of placement by offering a safe and stable living environment for a child.

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Criminal Background Checks



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CBCU Provider Standards


1999	<ul style="list-style-type: none"> August 1, 1999 Providers licensed prior to August 1, 1999, were grandfathered in and a CBCU is not on file (24+ years ago) States were to develop safety standards and background check prospective providers
2001	<ul style="list-style-type: none"> August 1, 2001 (HB 1108) Added household member fingerprint-based checks – all those in the house age 18+
2006	<ul style="list-style-type: none"> July 27, 2006 (Federal Adam Walsh law passed and updated SSA 471(a)(20)) ND had been checking CAN Index and was in compliance already. CBCU does the index check as part of an initial background check.
2009	<ul style="list-style-type: none"> SFN 433 implemented
2016	<ul style="list-style-type: none"> August 9, 2016 CFS implemented the CBCU 6-month max in policy. If not licensed within 6 months, a new CBCU is required.
2022	<ul style="list-style-type: none"> April 1, 2022, the CFS Licensing Unit goes live Consistency in CAN Index checks, documenting efforts and filing background checks electronically Internal CFS Licensing Unit - QA Files Reviews started November 2022 to ensure these documents were in each file.

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CBCU – Safety Standards

Comprehensive ND CBCU Check Includes

- ND State Criminal Record Repository (non-public)
- FBI Criminal History Record (non-public)
- ND Child Abuse/Neglect Index (non-public)
- ND Sex Offender Registry
- ND Offenders Against Children Registry
- Interstate CPS Registry for each state of residence during the previous five years.
- ND Courts (public facing website)
 - On average, approximately 45% of the ND convictions are found here and are not on the subject's BCI or FBI record.
- MN Courts (public facing website)
 - On average, approximately 45% of the MN convictions are found here and are not on the subject's BCI or FBI record.
- Tribal Court, Child Welfare, and Sex Offender Registry (Only if the subject currently resides, or has resided during the preceding five years, on tribal land.)
 - Convictions and/or CPS records for cases that occurred on tribal land will not be found on ND Courts, BCI or ND CPS Index. If the offense was transferred to Federal Court, the conviction information should be on their FBI record.
 - If a registered sex offender is residing on tribal land, they are required to register on the tribe specific sex offender registry and not ND sex offender registry.



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CBCU – Safety Standards

Reminders:


- Initial on each applicant + adult household members
- Ongoing – We need to background check each adult living in the home.
- No subsequent background checks required, unless HHS has reason to pursue.

Examples Requiring a Background Check:


- Applicant is charged with a crime
- Son turns age 18 and is living in our home
- Farmhand (age 37) moves in from May to October
- Grandma (age 80) moves in so we can help her with in-home care

Examples Requiring Conversation/Notice that may lead to a background check:

- Daughter (age 19) comes home for the month of December between college semesters = No background check required!
- Neighbor is coming over everyday to help with in-home supports and care to the children, while provider completes radiation treatments = Case by case



* Any new adults moving into the home and non foster youth who live in the home and reach age 18 will need to complete a background check.



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What Are We Looking For?

- ✓ Safety
- ✓ Stability
- ✓ Commitment
- ✓ Understanding
- ✓ Consistency
- ✓ Structure
- ✓ Support
- ✓ Acceptance
- ✓ Teamwork
- ✓ Connection
- ✓ Flexibility
- ✓ Nurturing
- ✓ Willingness to learn

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Initial Onsite Visit

Highlights of the Process

- Onsite visits (up to 4 depending on needs/conversation) will be held to complete the assessment, discuss family needs and experiences
- Walk through of the home for safety
- Review of pertinent documents; SFN 1037, CAN check, training.
- Answer applicants' questions

Please note that if you have major changes: Address change, someone moves in or out, changes in banking information, criminal charges, etc. - **your licensing specialist should be notified immediately.**

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Annual Onsite Visit

Highlights of the Process

- 90 days prior to the yearly review, the Licensing Specialist will do a quarterly check in via telephone call and will schedule an onsite visit
- Onsite meeting will be held to discuss family needs and experiences
- Walk through of the home for safety
- Review of pertinent documents; CAN check, training hours.



Please note that if you have major changes: Address change, someone moves in or out, changes in banking information, criminal charges, etc. - your licensing specialist should be notified immediately.

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Renewal Licensing Process

Highlights of the Process

- 90 days prior to expiration, the renewal notification will be sent
- Annual forms and updated verifications (if applicable) will need to be submitted
- Renewal meeting will be held to discuss family needs and experiences
- Walk through of the home for safety
- Review of pertinent documents; renewal forms, CAN check
- Training hours



Please note that if you have major changes: Address change, someone moves in or out, changes in banking information, criminal charges, etc. - your licensing specialist should be notified immediately.

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ND Child Welfare Overview



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Safety Framework Practice Model

- Implemented in December 2020.
- Consistent child welfare practice, this is a statewide model that offers consistency.
- Intervention with families whose children are unsafe based on the presence of uncontrolled danger threats.



To Learn More, Click Here:
[Foster Care Provider Training - Safety Framework](#)

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Safety Framework Practice Model

Why was this new framework implemented in ND?



Children in foster care



Services and supports closer to home



Parental substance use



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Safety Framework Practice Model

What is the Overall Goal of the Model?



Children safe at home



Foster care numbers



Kinship placements



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Safety Framework Practice Model

What does it look like when a child is **SAFE**?

- ✓ No threats of danger exist within the family, **OR**
- ✓ Parents/caregivers possess sufficient protective capacities to control any threat, **OR**
- ✓ The child is not vulnerable to the existing danger.



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Safety Framework Practice Model

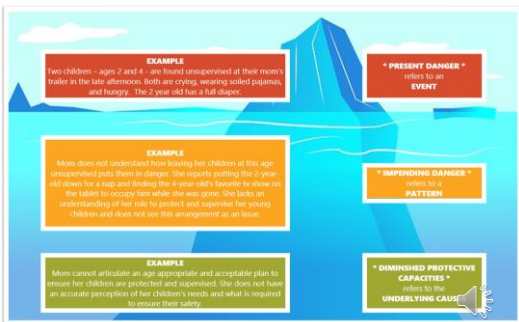
What does it look like when a child is **UNSAFE**?

- ✓ Threats of danger exist within the family, **AND**
- ✓ Children are vulnerable to such threats, **AND**
- ✓ Parents/caregivers have insufficient protective capacities or resources to manage or control the threats.



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Safety Framework Practice Model



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Safety Framework Practice Model

Safety Framework identifies present danger and impending danger threats and safety plans around the family to prevent removal. These safety determinations are profound elements to all households, not just child welfare.



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Child Protection Interview



Thank you, [Kirsten Hansen](#) from Children and Family Services!

Child protection workers have the first contact with families when a report of suspected child abuse or neglect is filed. They complete an assessment of the family's ability to protect the children in the home.



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Overview of Child Welfare in ND



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Overview of Child Welfare in ND

Safety (Protection/Prevention)	Permanency	Well-being
<p>Prevention</p> <ul style="list-style-type: none"> • Home Visiting • Behavioral Health & Substance Abuse Services • Kinship ND <p>Protection</p> <ul style="list-style-type: none"> • Child protection services • Shelter Care • Foster Care • Child fatality review panel • Parent Resource Centers 	<ul style="list-style-type: none"> • Family Reunification • Adoption • Guardianships • Interstate compacts for the placement of children • Independent living services 	<ul style="list-style-type: none"> • Family preservation services • In-home case management • Children in Need of Services • Respite care • Nurturing Parent programs • Parent aides • Family centered engagement

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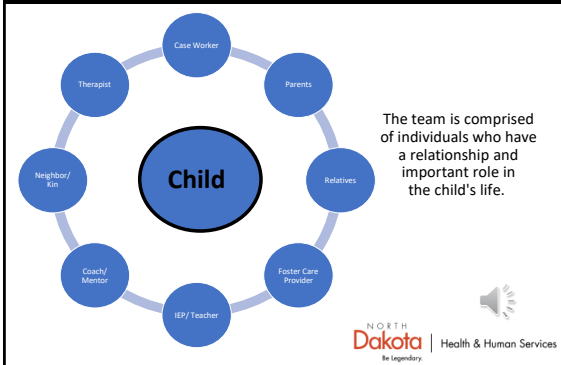
Child Welfare in ND

Dept of Health & Human Services	Private Providers	Tribal Social Services	Human Service Zones
<p>Human Service Center</p> <ul style="list-style-type: none"> • Crisis teams • Intensive in-home services (therapy & treatment, skills training, behavior mod) • Targeted case management <p>Children & Family Services (CFS)</p> <ul style="list-style-type: none"> • Administration of policy • License foster homes • Coaching of field staff • Oversee quality service and system delivery • IV-E Eligibility 	<ul style="list-style-type: none"> • Foster homes, including therapeutic foster care • Safe shelter for crisis • Human trafficking supports • Unaccompanied minor services • Targeted case management • Adoption services for children in foster care and the families adopting them • Title IV-E Prevention Services 	<ul style="list-style-type: none"> • FRAME entry and foster eligibility determinations • Joint practice model and ICWA training • Native American Training Institute supports (training, billing, IEP (IWCA Family Preservation)) • FMAP service contracting • IV-E agreements boost access to funding 	<ul style="list-style-type: none"> • Receives child abuse and neglect reports from central intake • Assess present and impending danger • Safety planning • Case management • Assess and build parent capacities • Provide safe supports for children and families • In home supports • Parent aides • Recruitment and Retention • CHINS (Children in Need of Services)
<p>Division of Juvenile Services (DJS)</p>	<p>CFS works closely with DJS specific to children in need of out of home treatment, which results in a foster care placement.</p>		

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The Child's Team?



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ROLES & RESPONSIBILITIES

Custodial Agency (Zone, DJS, Tribal Nation)	Foster Care Provider
<ul style="list-style-type: none"> Comply with child welfare law, rule and policy. Provide training to all staff to ensure compliance with law, rule and policy. Engage families to prevent removal. Collaborate with the court system. Complete initial and ongoing relative searches. Arrange for a least restrictive, most appropriate placement. Manage the day-to-day needs of the child in foster care: court, placement, visitation, medical, childcare, education, visitation. Engage in ongoing communications with child's foster care provider, parents and others. Assess and address the ongoing needs of the child, child's parents, and foster care providers. Facilitate monthly face-to-face visitation Lead a quarterly CFM and make final decisions regarding the case plan for the child. Transport the child to foster care providers' home for introduction and help settle the child into their new placement. Collect and bring the child's belongings to placements, complete an initial inventory and track the items. Resolve concerns that may arise in the child's placement. Submit paperwork to Children & Family Services Foster Care Sub-Adopt Eligibility unit for reimbursements Recruit and retain licensed foster homes. 	<ul style="list-style-type: none"> Provide safe care and basic needs to children in placement. Provide input concerning case planning goals and tasks, services and permanency achievement for the child. Communicate with professionals to ensure services are offered/delivered. Receive support and training to provide quality care and services to children in placement. Request services or assistance from the child's case worker. Notify the case worker of any issues the child may be experiencing. Participate in the planning of family visitation (parents, relative, siblings). Participate in child events, appointments, school functions as determined appropriate for the child. Participate in and identify culturally appropriate events and activities to maintain connections for the child. Attend court hearings as a party to the case. Foster care providers submit reimbursement receipts timely to the custodial case worker. Foster care providers sign acknowledgment of child placement options, recognizing foster care is intended to be temporary and all members of the child's team is working to achieve timely permanency.

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WHAT IS PERMANENCY?



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Permanency Plan Options

What is the goal for this child?

<p>Reunification: Returning home is the #1 goal. This is selected when the parents have a willingness and ability to provide safety for their child. This outcome is most successful when completed within 6 months to a year.</p>	<p>Relatives: Utilized when the child can live safely with a relative and maintain relationships with other family members.</p>	<p>Guardianship: This option is utilized when a child has a connection with a family and the family is willing to provide for a child permanently but unable or unwilling to adopt. Parental rights do not need to be terminated.</p>	<p>Adoption: When a child is attached or could make an attachment to a new family. Parental rights are terminated. Parental rights are granted to the adopting parents.</p>	<p>APPLA: Another Planned Permanent Living Arrangement is for those age 16+ when adoption and guardianship is not an option. Children may be living in an independent living setting.</p>
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Human Service Zone Interview



Thank you, **Briana Denning** from Burleigh Human Service Zone!
Zone case workers ensure child safety and engage families in efforts to plan and work toward permanency goals for the child under the temporary custody of their public agency.



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Child Placement Process



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WHAT SHOULD I HAVE ON HAND?

What items are necessary to have ready when I am choosing to foster?

- ✓ Basic toiletries for children (toothbrushes, toothpaste, deodorant, kids' shampoo/conditioner, etc.)
- ✓ Pajamas for your age preference
- ✓ Blankets
- ✓ First Aid supplies
- ✓ Toys and books
- ✓ Age-appropriate items for your age preference (babies need bottles, diapers and wipes, teenage girls may need menstrual supplies.)
- ✓ Snacks
- ✓ Night light
- ✓ If you're unable to keep things on hand, try to have a plan to quickly access needed items.



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What is "Removal"?

As you can imagine, there are many people and agencies involved in what you will often hear referred to as "removal."

Children are removed when it is determined that danger exists, and the children are no longer safe in the home. Removal from the care of a parent/guardian is a legal action that requires law enforcement or a temporary court order.

Providers Role in Removal?

- Foster care providers do not have responsibilities or authority related to removal proceedings.
- Your involvement will begin when you are called and asked if you will accept placement. You made need to decide quickly and be prepared to accept the child in your home.
- Awareness and empathy that a removal from parents and the familiar home is traumatic and create a crisis for the child and family.



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Example of call for placement - Removal in progress

PAUSE video to read example

You may be the first call or the 15th...

Case Worker: Hi! This is Sally with Human Service Zone. I am looking for placement for two teens; 13 year old boy and 15 year old girl. Removal occurred because a CPS report was received that the children have been home alone for an undisclosed amount of time. We arrived onsite and it appears to have been weeks with no adult supervision, food, etc. We are not aware of where the parents are. The children stated they have no family in North Dakota. The 15-year-old thinks she can stay with her friend, but she doesn't want to leave her brother alone. The family is known to have domestic violence and substance use concerns. The children are well mannered but are very scared. Would you be able to care for these two until we can determine next steps in the case? I suspect it will be minimum 7 days, but potentially 30 days until we can locate parents or relatives.

Provider: I am interested. I can take both of them, so the kids stay together. When would you like to bring them to my home?

Case Worker: Thank you so much. Can I bring them at 4:00pm?

Provider: Sounds good, meet you at the house at that time.



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Example Call Placement Preference

PAUSE video to read example

Case Worker: This is Sally with Human Service Zone, and I am looking for placement for a sibling group of 4. I see you have four openings, but a preference for 0-5. I am wondering if you would consider accepting the siblings ages 3 (girl), 6 (girl twin), 6 (girl twin) and 9 (boy)?

State Provider: I do prefer younger ones, but those ages are pretty close! I will have to do some rearranging of bed space to accommodate the sibling group. When do you need the placement?

Case Worker: ASAP, but if you cannot take them today, could we plan for tomorrow? The older kids are in school, but the 3-year-old would need daycare. The daycare is by the elementary school. We can discuss temporary bed space if you need a few days to move the beds around.

State Provider: Yes, I can have the beds moved by this weekend. I'll be meet you at my house at 4:30pm to get the kids settled in and discuss more details. Please bring their belongings with you at that time.



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Immediately After Placement

What to expect...

1. Upon placement, providers should receive a phone call from the agency within the first few days of placement.
2. A case worker will be assigned, and they will be your primary contact regarding the child in your home. The case worker will talk through any questions or concerns you have as well as provide you with any additional pertinent information they have learned as they look more into the situation and form the case plan.



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Within 30 Days of Placement

1. Every child in foster care is required to have a Child Family Team Meeting within 30 days. This meeting will be facilitated by their case worker. Others in attendance may include agency supervisor, child's parent/caregiver, HHS staff, and sometimes additional representatives from other agencies, as needed.
2. Typically, the child will be assessed for any medical needs through a health assessment or a well child exam. They will also be assessed for vision and dental needs. Some children will require additional follow up with medical specialists or other services (for example, Speech, occupational, physical and or mental health therapy).
3. Children ages 0-3 will be referred to the Right Tracks program for a developmental assessment and follow up services when appropriate.



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Court Highlights

Court Hearings

States Attorney (Zone/DJS)

Defense Attorney (Parent)

Guardian Ad Litem (Child)

Notice of Hearings

Providers with children in placement receive notice of a hearing:

- Courts are sending a notice of hearing dates/times to Custodial Agency, Attorneys and Guardian ad litem (GAL)
- Case managers are required by policy to forward the notice of the hearing date/time to relevant parties, including the provider in many cases to ensure the child is aware of the hearing date.
- A notice is informing all parties of a scheduled date. The notice of hearing is not the same as being asked to testify in court. A notice is not a subpoena, nor is it a summons.

If interested in more information specific to court proceedings in ND, the resources slide at the end of the orientation will route you to an online training.

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Ongoing Placement

Foster Care Case Worker create a plan for each child's case. This plan includes but is not limited to:

- Specific needs of the child and how they will be met
- Goals for parents/caregivers
- Visitation plan with parents/caregivers
- Permanency plan – reunification, placement with relatives, adoption, guardianship and APPLA
- The case worker is the custodian for the child and the only one with the authority to change the care plan.

It is important to note that plans can change during the child's time in foster care.

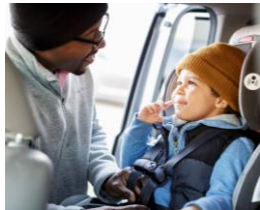


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TRANSPORTING CHILDREN

Who is Responsible to Transport?

Foster care providers are asked to provide the service and accommodate transportation to school, events, appointments, and visitation for the child in foster care, much the same as they would for their own child in their home.



However, EVERYBODY (foster care provider, the custodian, the relatives, birth parents, etc.) can be considered and plan developed to support the needs of the child. If a child has many appointments in one week, it takes a team effort.

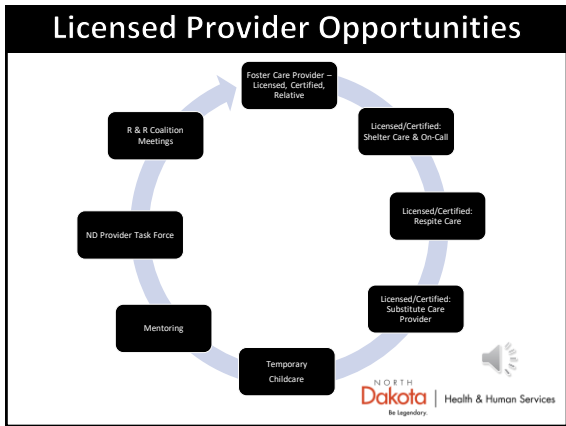


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Provider Opportunities



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Shelter Care - Respite Care - Substitute Care

	Shelter Care	Respite Care	Substitute Care
Policy	607-05-35-40-01	607-05-70-45-20-01	624-05-15-47
Definition	Temporary care during which a child needs a safe bed outside of the home.	Temporary child care for a child with special medical, emotional, or behavioral needs, which require time-limited support, supervision and care.	Temporary care of a child when the licensed foster care provider is unavailable for more than a portion of one day.
Length/Duration	No greater than 7 consecutive days Providers must comply with licensing standards regarding permanent vs. temporary bed space.	Overnights = No greater than 4 consecutive days Non-overnights = 12 hr/wk No limit on the number of requests	No greater than 14 consecutive days, so long as the home has permanent bed space. Substitute care cannot exceed 7 consecutive days, if using temporary bed space per licensing standards.
Referral Form or Provider Agreement	SFN 928: Licensing Specialist completes with foster care provider SFN 931: Worker/Case Manager completes after Shelter Care episode W-9 completed by provider and blank voided check, if needed	SFN 929: Worker/Case Manager submits to CTS for gltor review/approval W-9 completed by provider and blank voided check, if needed	Not applicable A licensing amendment is <u>not required</u> for substitute care. However, the custodian must ensure compliance with permanent vs. temporary bed space.

Please note: You are responsible to make payment arrangements for substitute care!

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EXAMPLES

Shelter Care	Respite Care	Substitute Care
<p>Shelter care may be needed when:</p> <ol style="list-style-type: none"> 1. Present danger exists 2. Mom is experiencing a behavioral health crisis and is admitted to the local psych unit. It is known mom has support of her mother coming to live in the home until further notice. Children need shelter care until grandma arrives. 3. Dad is arrested for an outstanding warrant. It is known he will be released from jail following his court hearing on Monday. Children need shelter care for four nights. 4. Mom is under the influence and engages in a dispute at a hotel. Law enforcement calls the Human Service Zone for assistance. Mom states her sister can come stay with her, but she cannot arrive until tomorrow. Children need shelter care for one day. 	<p>Respite care may be needed when:</p> <ol style="list-style-type: none"> 1. Child is destroying property; child and foster care provider both need a weekend to regroup. 2. Child's behaviors challenge daily routine; foster care providers need a weekend break. 3. Foster care provider is attending a family event and the child in foster care is autistic with a feeding tube, his needs exceed his ability to comfortably join the family for the weekend. 4. Unlicensed grandma is caring for twin toddlers who require extra supervision. Grandma is tired and could benefit from two afternoons per week. 5. A mother of a substance exposed newborn would like to participate in day treatment services and needs a break from the high demands of her baby. Respite is provided for six hr/wk. 	<p>Substitute care may be needed when the licensed foster care provider is:</p> <ol style="list-style-type: none"> 1. Going on vacation for a week, 2. Attending a funeral out of town and will be gone all weekend, 3. Having a medical procedure and would benefit from 4 days of support and coverage, 4. Attending a concert overnight, 5. Going to a wedding where children are not invited, 6. Transporting a child to a medical procedure out of state and cannot take all of the children with them, 7. Painting bedrooms and spring cleaning, and do not want kids in the home for the weekend.

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PAUSE video to read example call for Substitute Care...



Provider #1: This is Sally, a licensed foster care provider living in Williston. Kelly from the Zone said she spoke with you about possibly providing substitute care in a couple weeks? The Zone gave permission to seek substitute care for the weekend as we have a family wedding. I have a 3-year-old and 5-year-old girl in placement. I am looking for coverage/help from Friday at 5:00pm until Monday at 7:15am. Are you available?

Provider #2: Yes, Kelly did alert me. Welcome to our provider network!! I heard you are newly licensed. That weekend is available for us, we have two young girls as well and would love to have your girls for the weekend. It will be fun!

Provider #1: Great...Thank you! I will plan to reimburse you the daily rate for Fri, Sat and Sun (3 nights) and will bring a check when I pick up the girls on Monday morning at 7:15am. I plan to come early so I can bring them to daycare. Here is my phone number, we can text and make arrangements as it gets closer. Thanks again.



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PAUSE video to read example call for Respite...



Case Worker: This is Sally with Human Service Zone and I am looking for respite for a 4-year-old girl starting with pickup from school on Monday through drop off at school on Thursday morning. This child was removed two weeks ago after exposed to substances confirmed with positive hair test. She is displaying symptoms consistent with withdrawal and sensory processing concerns. She is not showing aggression, does not talk much, is whimpering often and having trouble sleeping. We are looking for respite for a few days so current foster home can get some rest.

Provider: Ok. If she is going through withdrawal, are there other medical needs I need to be prepared for? Does she run around at night if she's not sleeping?

Case Worker: She has been seen by a doctor and there are no further medical needs, we are mostly seeing the withdrawal symptoms in the lack of sleep, tearful and restless. She points a lot of the time at what she wants. She is not running around, just whimpers throughout the night. Does well being rocked and held.

Provider: Yes, I think we can help out for a few days. I can call the Zone on-call if I run into any problems.



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WHO DO I CALL...

Custodial Agency – Case Worker

- Returning a call! Yes – I am willing to accept the child into placement
- Child EMERGENCY
- Child has a need, placement is disrupting, or I think I need respite
- Medical appointment went well, but the clinic does need the child's Medicaid number
- School teacher has concerns and wants us both there for the IEP meeting next week
- When is the next court hearing?
- Child's parents are asking me questions at visitation, can you please connect with bio mom.
- I'm going to a funeral and would like all of our kids to go to my parents this weekend, can we discuss if they are approved for substitute care so all of the children can stay together?
- When is the next Child and Family Team meeting?

Licensing Specialist

- I am moving to a new home next month, what are the next steps?
- I am having trouble connecting with the child's case worker, any ideas?
- I need training about autism, where would I get that?
- We are adopting our son; We need to add him as a household member!
- My husband and I are getting divorced, he plans to move out and not remain licensed.
- All Household Changes (death, moving in, moving out, separation, remodeling, etc.)
- We have had a family emergency and need to be placed on HOLD, no calls for the rest of the month
- I had trouble with speeding tickets and better inform the licensor
- I was charged with a DUI, I am going to court and do not think I will be convicted. My hearing is in 4 weeks.



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Communication

- Please answer your phone. Case workers will understand if you are unwilling or unable to take a placement. Saying “no” doesn’t mean you will not get called again.
- Phone numbers from agencies will show as “Potential Spam” “Healthcare” “Unknown” or “Public Service” - if you prefer not to answer, please make sure voicemail is not full and they will leave a message!
- Return phone calls or texts.
- It is best to establish communication expectations with each case worker you work with right away. Some will prefer email or text as opposed to calling. Ask what information they want to know immediately vs. what can wait.
- Please be sure to let case worker know your preferred communication frequency and style. The goal is to work cohesively as a team in a way that works for all involved most of the time.



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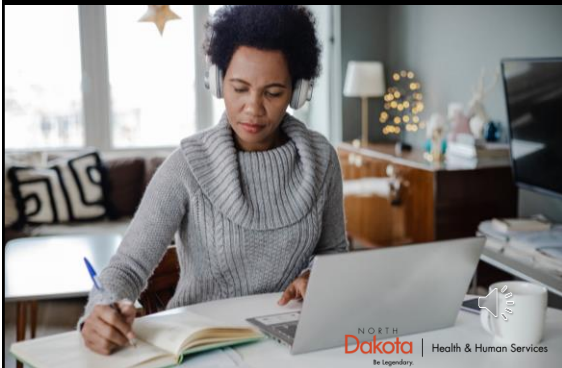
Confidentiality

- Confidentiality and discretion are necessary in each child’s case.
- As a foster care provider, you may at times have access to sensitive information related to active investigations and court proceedings. Information is only to be shared with those that have a need to know. An allowable example of sharing would be disclosure of a child’s abuse or neglect history to their medical provider.
- Information pertaining to a child’s case is never to be shared with anyone outside of the custodial agency, without a release of information. For example, if an employee at the child’s school asks you if the people arrested last weekend are the child’s parents, an appropriate response would be “I am not authorized to discuss any details without a signed release of information.”
- Pictures of children in foster care must be discussed with the custodian.



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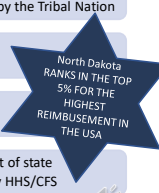
Provider Reimbursement




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ND Maintenance Rates

State Homes	<ul style="list-style-type: none"> Reimbursed by HHS/CFS
Tribal Affidavit Homes	<ul style="list-style-type: none"> Title IV-E cases: Reimbursed by HHS/CFS Tribal 638 cases: Reimbursed by the Tribal Nation
Nexus PATH Homes	<ul style="list-style-type: none"> Reimbursed by Nexus PATH
Respite/Shelter Homes	<ul style="list-style-type: none"> Reimbursed by HHS/CFS
Out of State Homes	<ul style="list-style-type: none"> ND children may be placed out of state Reimbursed their state rate by HHS/CFS



North Dakota RANKS IN THE TOP 5% FOR THE HIGHEST REIMBURSEMENT IN THE USA



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WHAT DRIVES REIMBURSEMENT?

In order for HHS/CFS to reimburse providers, there must be:

- Foster Care Provider** (*licensed, certified or approved*)
- Child - Placement Entry**
- Child - Valid Court Order**
- Child - Has an Approved Care Plan**
 - CFTM must be held within 30 days of entry, case worker must enter an updated care plan into FRAME within 45 days of initial placement and every 90 days thereafter.*

If there are costs associated with irregular payments (clothing, child, care, etc.), the agency case worker must submit approval and receipts to Children and Family Services (Foster Care Sub Adopt Eligibility Unit) via email at cfscaunit@nd.gov



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REIMBURSEMENT DELAYS

When should I expect my first reimbursement for a child?

- ✦ New entries need their eligibility determined, which may take 3-6 weeks depending.
- ✦ Once all necessary data/paperwork is processed, HHS/CFS can process reimbursement.
- ✦ After initial determination is made, cases are faster to process. However, they do require data entry changes to ensure proper payments are made.

Why do payment delays happen?


- ✦ Missing information
- ✦ Delays in data entry from the custodial agency
- ✦ Delays in court orders being given to the custodial agency
- ✦ Receipts not submitted timely

How long should I wait before I call someone?

- ✦ The standard check write is the 2nd to last working day of the month.
- ✦ If not reimbursed within the first week of the following month of service being offered, call someone.

Who should I contact?

- ✦ Custodial case worker
- ✦ Case worker will contact the CFS FCSA Eligibility Unit and identify the issue.



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Mandated Reporting

<p>Call CPS Intake at: 1-833-958-3500</p>	<p>A 960 is a child abuse and neglect report</p>
<p>If a CPS report is filed, the process will take time.</p>	<p>Link to training here Home - PCAND</p>

Yes! Foster care providers are mandated reporters and are required to report when knowledge or suspicion is received/known.

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Abuse and Neglect Allegations

Examples of Allegations

- ✓ Birth family accusations – seeking out bruises or neglect
- ✓ Previous abuse being reported again (later date)
- ✓ Children being triggered from past trauma who share details today

Reminders

- ✓ The identity of the reporter is protected by state law. We cannot share who reported.
- ✓ Licensing Specialist will offer you supports through this time such as peer mentor or another provider to talk to who had a previous experience.
- ✓ It can be very upsetting to be named as the subject of a report of suspected abuse or neglect.

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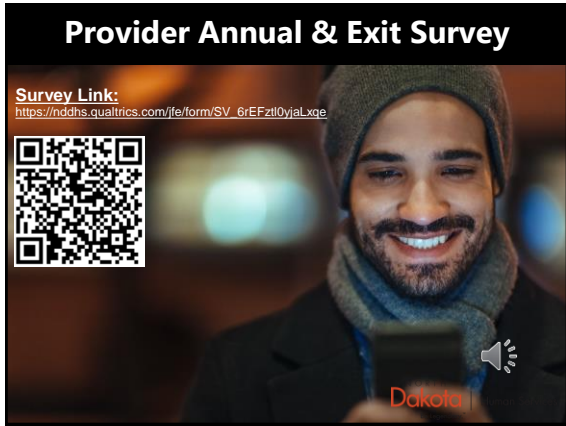
Let's Wrap Up



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Provider Annual & Exit Survey

Survey Link:
https://nddhs.qualtrics.com/jfe/form/SV_6rEFz10yjal_xqe

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NDHHS CFSI Booths

Recruitment & Retention
 Join a local Coalition



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Recruitment - Provider Engagement

- Foster Providers are the best recruiters. Your “word of mouth” matters!
- Participate in regional coalition meetings
 - Walk in parades
 - Participate in information booths at community events
 - Consider speaking to church or service groups about fostering
 - Serve as a panelist at inquiry meetings




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Glossary of Terms

960- Child Abuse and Neglect Report (SFN 960)
 AASK- Adults Adopting Special Kids (the adoption agency we use)
 CFM – Child and Family Team Meeting
 CFS- Children and Family Services
 CTM – Custodial Team Meeting
 DDPM- Developmental Disabilities Program Manager (if a child qualifies for Early Intervention, the program manager is involved too)
 DSY- Dual Status Youth
 EI- Early Intervention
 EMP- Extra Maintenance Payment
 FC- Foster Care
 FCE- Family Centered Engagement Meeting
 FSS- Field Service Specialist
 ICPC- Interstate Compact for the Placement of Children
 ICWA – Indian Child Welfare Act
 IEP – Individual Education Plan
 IFSP- Individual Family Service Plan (also Early Intervention related--the meeting to make goals and plan)
 IH- In Home
 IL- Independent Living
 PCFA – Protective Capacities Family Assessment
 PCPA- Protective Capacities Progress Assessment
 PRTP- Psychiatric Residential Treatment Facility
 QRTF- Qualified Residential Treatment Program
 SFPM- Safety Framework Practice Model
 TCO- Temporary Custody Order
 TFC- Treatment Foster Care



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Moment of Gratitude



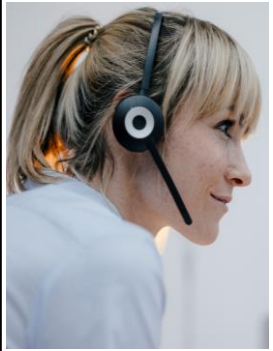
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- Tara Erikstad**, Foster Care Provider (Williston)
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- Brianna Denning**, Zone Supervisor (Bismarck)
- Jenny Smyth**, Licensing Specialist (Fargo)
- Jennifer Thoreson**, Licensing Specialist (Fargo)
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- Kelsey Bless**, CFS Licensing Unit Admin (Statewide)
- Jennifer Hinze**, Nexus PATH (Statewide)
- ND Provider Task Force** (Statewide)
- Foster care providers and Zone case workers**. (Cass)
- Diana Weber**, CFS SFPM Statewide Administrator (Statewide)



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CFS UNIT CONTACT INFORMATION



Email Inbox: cfslicensing@nd.gov
Phone: 701-328-2322
 (CFCA) *Creating Foster Care Awareness*
 1-888-334-1330
Mail: Children and Family Services
 CFS Licensing Unit
 600 E. Boulevard Ave #325
 Bismarck ND 58505-0250

Recruitment and Retention line
 at **1-833-FST-HOME**



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