

Stronger FAMILIES Together

South Dakota

Foster Parent Handbook

South Dakota Department of Social Services

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Dear Foster Parent,

Thank you for the commitment you have made to open your home and your heart to children by becoming a foster parent. Being a foster parent is an opportunity to help support a child and their family while they work through a challenging time in their lives. Foster parents are essential in the reunification of families and help to change the lives of parents and children in our communities.

Being a foster parent can be challenging and very rewarding. This Foster Parent Handbook was designed with the challenges you may face when providing care to children in foster care in mind. It is my hope that the information and resources provided in this handbook will help guide you through your journey as a foster parent.

Thank you for your continued willingness to support children and families in South Dakota!

Sincerely,



Becky Nelson
Administrator

To the Foster Parent

This handbook was developed to provide foster parents information on topics related to being a foster parent, and guidance on day-to-day activities of children in their care. The content of the handbook emphasizes the role of foster parents working together with birth parents and a Family Services Specialist (FSS), as members of a professional team, to achieve positive outcomes. Where relevant, the topics below contain information on Division of Child Protection Services (CPS) policies and procedures, South Dakota Codified Laws (SDCL), and South Dakota Administrative Rules (ARSD).

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Visit our website at
dss.sd.gov/childprotection

For information about becoming a foster parent visit
StrongerFamiliesTogether.sd.gov

To report child abuse and neglect call:
877.244.0864

Acknowledgements

The Division of Child Protection Services (CPS) and the Office of Licensing and Accreditation (OLA) would like to thank the individuals who contributed to the development of the South Dakota Foster Parent Handbook. Foster parents had the opportunity to participate in seven focus groups conducted statewide. The Foster Parent Workgroup membership included 11 foster parents, three members of the South Dakota Legislature, a representative of a private child placement agency, an attorney who represents children in abuse and neglect cases, a young adult who spent time in foster care, and six staff from CPS. The members brought a wealth of experience and knowledge to the workgroup. The workgroup, which was brought together to research and develop the handbook, met on a regular basis to contribute ideas and feedback on the handbook as it was written.

Members of the workgroup included:

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Foster Parent Bill of Rights

1. The right to be treated by the Department of Social Services Division of Child Protection Services (CPS) and Office of Licensing and Accreditation (OLA) with dignity, respect, and consideration as a professional member of a child welfare team.
2. The right not to be discriminated against on the basis of religion, race, creed, gender, marital status, national origin, age, or disability.
3. The right to receive training and support to enable the foster parent to provide quality services in meeting the needs of children in their care.
4. The right to be notified of information about the child as DSS becomes aware to ensure the safety and wellbeing of the child(ren) in care and the foster family.
5. The right to be apprised of laws and guidelines of foster parenting and to be kept informed of any changes in a timely manner.
6. The right to consider placement of a child(ren) in the foster home or to request, upon reasonable notice, removal of the child(ren) from the foster home without fear of reprisal of any adverse effect on being assigned any future foster or adoptive placements.
7. The right to receive timely financial reimbursement according to the child placement agreement between the foster parent and the Division of Child Protection Services.
8. The right to participate in the planning of visitation of the child(ren) with the child(ren)'s family.
9. The right to receive notice about court reviews and an opportunity to be heard regarding the child(ren) placed in their home.
10. The right to provide input concerning the plan of services for the child(ren), have input considered by DSS, and to be provided a written copy of the child(ren)'s individual treatment or case service plan in a timely manner, as well as a reasonable notification of any changes to the plan.
11. The right to contact a staff person representing DSS when an emergency arises, 24 hours a day, seven days a week, for the purpose of aiding the foster parent in receiving departmental assistance.
12. The right to be considered, where appropriate, as a placement option when a child(ren) who was formerly placed with the foster parents has reentered the foster care system.
13. The right to be considered, where appropriate, as a placement option when a sibling of a child in your care enters the foster care system.
14. The right to be considered, where appropriate, as an adoptive placement option for a child(ren) in your care whose permanency plan is adoption.
15. The right to be provided a fair and timely investigation of complaints concerning the operation of a foster home.
16. The right to be given advanced notice, whenever possible, when a child(ren) is to be removed from your home.
17. The right to communicate with professionals who work with the child(ren) in foster care, including, but not limited to, therapists, physicians, and teachers who work directly with the child(ren).

Foster Parent Training

Foster parents are required to have 30 hours of training prior to becoming a licensed foster parent, and six hours of training each year prior to relicensing. OLA utilizes Parent Resources for Information, Development, and Education Training or Unity to train prospective foster parents and adoptive parents.

Foster Care and Adoption Pre-Service Training

Foster Care and Adoption Pre-Service Training is the curriculum for prospective foster and adoptive parents. The purpose of Foster Care and Adoption Pre-Service Training is to provide concrete information on the roles and responsibilities of parents who foster and/or adopt as well as the knowledge, skills, and attitudes they need in order to effectively parent children who have experienced trauma, separation and loss. Foster Care and Adoption Pre-Service Training consists of a self-assessment, classroom-based and self-paced training videos.

The themes covered in the training are:

- Reunification, Maintaining Children's Connections, Child Development;
- Creating a Stable, Nurturing, Safe Home;
- Attachment;
- Cultural Humility and Parenting in a Racially and Culturally Diverse Family;
- Separation Greif and Loss;
- ICWA;
- Trauma Related Behaviors and Trauma Informed Parenting;
- Effective Communication;
- Impact of Substance Abuse, Mental Health;
- Parenting a Child with Sexual Trauma;
- Connections with Birth Families After Adoption.

CPR/First Aid Training:
In addition to the Foster Care and Adoption Pre-Service Training noted above, applicants will be provided First Aid and Cardiopulmonary Resuscitation (CPR) training.

Unity

Unity, also known as **Extending our Families through Unity** is a one-of-a-kind, user friendly curriculum based on traditions and cultures of Indian people. It is designed to address issues Native American foster parents have identified as important to prepare perspective foster parents for their critical role as care givers for Indian children. In Native cultures, children are considered sacred beings. The underlying philosophy of this training is to help children grow to meet their potential in mind, body, spirit, and emotions.

Unity consists of nine sessions offered over 30 hours of training which include the following topics:

Foster Parent Orientation
This session addresses working as a professional team member to care for children in foster care.

Human Growth and Development
This session discusses the physical, mental, social, moral/spiritual, and emotional development of children, and why some children may have developmental delays.

Attachment and Loss
This session discusses the affectionate bond between people, as well as the feelings and experiences of children entering foster care.

Protecting, Nurturing, and Meeting Needs through Discipline
This session is an in-depth examination of the definition, and role of discipline in teaching responsibility and decision-making skills.

Historical Trauma and Intergenerational Grief
This session addresses the historical trauma and intergenerational grief as they relate to parenting and healing.

Effects of Addiction on Children
This session enables participants to put the issues in perspective, as many children in foster care have experienced addiction in their families which contributes to child abuse and neglect.

Child Abuse/Neglect and Sexual Abuse
This session discusses the two main reasons children are removed from their homes. The session addresses ways foster parents can help children relate to themselves and others in a healthy way.

Promoting Permanency Outcomes
This session examines permanency through the eyes of a child.

Kinship Care and Self-Esteem
This session addresses divided loyalties, setting boundaries, and parenting a relative.

Additional Training for Foster Parents

Foster parents are required to complete six hours of additional training prior to renewal of their license each year. Training opportunities may be provided by the following:

- Licensing Specialist
- Foster Parent Association
- Self-instruction materials such as articles, TV presentations, books, films, internet, videos relating to parenting, or foster parenting or foster care
- Online or digital training programs
- Other community based trainings such as CPR, first aid classes, parenting classes, and classes in child development

Up to four of the six hours of training may be self-instruction material. The remaining two hours must be some type of formal training session. Online or digital training programs which include an interactive learning component, beyond simply completing a test, may be considered to be formal training. Training through watching a television program, a video, or taped presentations may be counted hour for hour for self-instruction. Fifty pages of reading material are equal to one hour of training, up to four hours.

Specialized foster care requires 12 hours of training, six of which can include the training required for annual re-licensure to meet the special needs of a specific child. Up to four of the 12 hours can be self-instruction. Foster parents are not required to obtain 12 hours of training before a child with special needs is placed with them but must agree to obtain training within the time specified by CPS. Evidence of education, experience, or professional background in the areas of need for the specific child may be substituted for training.

Reimbursement for Training

Upon prior approval of the Licensing Specialist, reimbursement may be sought at the rate of $10 for each two hours of formal training attended or participated in to meet the requirements of re-licensure or adoption approval. Annual training reimbursement may not exceed $30 per family. Reimbursement for training received through self-instruction is not available.

South Dakota Administrative Rules (ARSD) Related to Foster and Adoptive Homes

The rules related to foster and adoptive homes are ARSD 67:42:01 Provisions and Scopes, ARSD 67:42:05 Family Foster Homes, and ARSD 67:14:32 Services to Adoptive Families. (See Forms Section for rules related to Foster and Adoptive Homes)

Roles and Responsibilities of the Foster Care Team

The foster care team includes the foster parents, the child, the child's birth parents, the staff from CPS, the staff from OLA, the attorney appointed to represent the child, and other significant individuals in the child's life (i.e., mental health counselors, school personnel, etc.) The foster care team works together to assure the safety, permanency, and well-being needs of the child are met. Each member of the team has an important role to play in the planning process to meet the needs of the child.

Foster Parents (Resource Family)

Foster parents are often referred to as a resource family. Resource families assume the primary responsibility for the day-to-day care of children placed in their homes. They observe the child's daily adjustment and behavior as well as provide for the physical needs such as food, shelter, and clothing; and developmental needs such as love, guidance, discipline, and support. Based on the foster parent's interactions and observations from caring for the child, they provide important information about the child's needs and the development of the child's case plan. The Resource family can work closely with the birth family to ensure connections for the child. The Resource family plays an important role with the birth parents by mentoring, supporting, and assisting with reunification supports.

South Dakota Administrative Rules (ARSD) contains requirements for foster parents to follow. **ARSD 67:42:05:13** A foster parent shall comply with the following:

1. Shall provide daily activities designed to promote the physical, social, intellectual, and

emotional development of the children in the foster parent's home in accordance with the reasonable and prudent parent standard. A family foster home is not liable for harm caused to a child in an out of home placement if the child participates in an activity approved by the family foster home, provided the family foster home has acted in accordance with the reasonable and prudent parent standard.

2. Shall take part in case planning for the child and participate in the preparation, placement, and visitation plans for a child placed in the foster parent's home.
3. Shall demonstrate respect for the child's own family and shall agree to maintain a working relationship with the child's family members as indicated in the child's case plan.
4. Shall ensure the child in foster care has the safety equipment and training necessary to safely engage in each activity the child participates in, including but not limited to the following activities:
   - Boating
   - Hunting
   - Sports
   - Recreational vehicle use



It is important for foster parents to report any changes in circumstance that may either temporarily or permanently affect the family's ability to provide care. This includes their ability to care for a specific type of child or the number of children cared for in the home.

Family Services Specialist (FSS) Assigned to the Case

The FSS is the case manager for the child, and is responsible for leading the foster care team in the development of the child's case plan. It is important for the FSS to establish a relationship with the child independent of the joint relationship that is developed with the child and the foster parents. The FSS helps the child deal with the trauma related to the separation from their birth parents and siblings, helps them understand what will happen to them as their parents work to resolve the safety issues resulting in their removal, and assesses the treatment needs of the child. The FSS also works with the foster parents to assure the child's needs are met, and the foster parents have what they need to care for the child.

It is the FSS' responsibility to coordinate the delivery of services to the child. The FSS monitors the child's progress through visits with the child, foster parents, and other professionals working with the child.

The FSS also works with the birth parents to develop a case plan to address the parent's behaviors which must change for the child to be safely returned home. If reunification is not possible, the FSS develops another permanent plan based on the best interest of the child.

The FSS is responsible for informing the court regarding the case progress and making recommendations to achieve the child's permanent plan.

The Licensing Specialist

The Licensing Specialist is responsible for recruiting, training, and licensing/approving foster and adoptive families. It is their responsibility to maintain a relationship with each family to best match the needs of children with the specific parenting strengths of the family.

The Licensing Specialist is responsible for providing consultation and support to foster families about the care of children in their home and assure compliance with licensing requirements. The Licensing Specialist is available to help foster parents understand the child welfare system and their role as a member of the foster care team.

Birth Parents (or other Legal Caretakers)

Reunification with the birth parents is always the first consideration for children when reasonable assurance of the child's ongoing safety can be established. Birth parents work with the FSS to develop a case service plan to address the issues resulting in their child being removed from their home so their child can be reunited. The details of the parent's case plan are confidential. Depending on the treatment needs of parents, services such as mental health, substance abuse, parenting, and other identified treatment needs may be a part of the parent's case plan. Visits between the child and the birth family are a critical component of the parent's case plan, unless specifically prohibited by a court order. The FSS assigned to the child and parent is responsible for arranging and monitoring family visits.

The Child

The team must focus on the safety, permanency, and well-being of the child and assess the child's needs and determine appropriate interventions to meet the needs. The child should be included as part of the team and case planning process, if developmentally and age appropriate.

Types of Placements

Relative / Kinship

When children cannot remain safely with their birth parents, children have the right to be with relatives/kin, provided they will be safe and it is in the child's best interest. Relative/ kinship placements assure children will have connections to their extended families and culture. South Dakota has a relative preference law, SDCL 26-7A-19, which mandates placement preference with an approved relative. Whenever possible, either in an initial, on-going, or permanent placement, relatives/kin are the most appropriate choice secondary to the birth parents. Relatives/kin include the following:

1. **Related by blood (maternal and paternal):** Blood relatives including half-blood relationships.
    - Siblings
    - Grandparents and great or great-great grandparents

- Aunts and uncles and great or great-great aunts and uncles
- Nieces and nephews and great or great-great nieces and nephews
- First cousins and first cousins once removed

2. **Related by adoption (maternal and paternal):** Related through legal adoption including any of the relationships listed above.
3. **Related by marriage (maternal and paternal):** Related by marriage even if a marriage is terminated by death or divorce.
4. **Stepparents:** Any person listed in 1, 2, or 3 above who have a step relationship with the child, even if the marriage is terminated by death or divorce.
5. **Related by emotional tie or bond (Fictive Kinship):** These relationships are based on emotional ties or bonds which cause a child or the child's parent to accept a person as part of the extended family or network of friends prior to the necessity for an out-of-home placement. The child must indicate that they feel safe with this individual or family. Examples of these types of kin include a family friend, a church member, a school teacher, relationship through Hunka Ceremony, or any other community member significant to the family and/or child.

Emergency Foster Care

Emergency foster care is the provision of care to children for whom immediate removal from their current living situation is required to ensure their protection and safety. Foster parents who provide emergency care are willing to accept the child at any hour of the day or night with minimal information about the child. The Licensing Specialist and/or FSS will provide the circumstances surrounding the emergency to the foster family so they can best meet the child's needs and be alerted to special circumstances. The foster family will observe the child's immediate physical and emotional condition throughout the placement in order to provide the FSS with an evaluation of the child's needs. Reimbursement for emergency foster care usually ends after five days, once planning is developed for the child's immediate future and the emergency nature of the placement is over.

Basic Foster Care

Basic foster care is the provision of care to children while a permanent plan is developed and implemented. Basic care includes teaching age-appropriate life skills and provides economic, recreational, social, academic, and religious experiences appropriate for the child's mental and physical capacity. Children whose care is reimbursed at the basic rate may be experiencing behaviors associated with separation from their family but are not generally experiencing behaviors to indicate serious physical or emotional problems.

Substitute Care

Substitute Care can be utilized in place of more formal respite foster care. Substitute care is a temporary care option for children in foster care, where the child stays with someone other than their regular foster family or respite provider. It's meant to give foster families a break or provide care in specific situations but still keep the child's well-being and continuity of care

in mind. The Department must approve all substitute care arrangements for a child in foster care.



Examples of substitute care are when a child in foster care stays with a family friend or relative, participates in group activities (like church or YMCA camps), or has a sleepover at a friend's house.

The priority is to have the child stay with someone they already have a relationship with. This can be a family member, a family friend, or someone the foster family knows and trusts.

Foster families should communicate with their FSS and give **at least two weeks' notice** before planning substitute care. In emergencies, they can notify the FSS as soon as possible, even if it's outside of normal working hours (through an on-call FSS). This ensures the child's care and needs are considered, and safety checks can be made, such as verifying the substitute caregiver through the Central Registry of Child Abuse and Neglect.

The substitute caregiver should understand the child's routine and needs to provide consistent care. Also, foster families should help the child prepare for the change to ensure the transition is smooth.

Foster families must notify a child's FSS of any group outing such as YMCA, church, or school outings that will involve an overnight stay. FSS's may grant approval for participation.

Respite Foster Care

Respite foster care is temporary 24-hour care and supervision of a child in foster care. Foster parents should check with their FSS for the availability of this type of care.

Respite care is generally used when foster parents need a break, whether for personal reasons or to attend to other matters. It helps ensure that the child continues to receive the necessary care and supervision during this time.

Foster parents can arrange their own respite provider, but they must get prior approval from their FSS and Licensing Specialist before the respite occurs. It's important to give at least two weeks' notice for respite care, except in emergencies. In emergencies, they should notify the FSS as soon as possible, even if it's outside of normal working hours (through an on-call FSS), to receive assistance. The Licensing Specialist can also help locate local respite providers.

The respite provider should understand the child's routine and needs to provide consistent care. Foster families should help the child prepare for the change to ensure the transition is smooth.

Foster parents should always process the best type of care with the child's FSS to determine if either substitute and/or respite care would be the best fit for a child in their home. In some areas, families may be able to utilize support services called WRAP to provide alternative care options. Your Licensing Specialist will inform you of support services in your local area.



Specialized Foster Care

Specialized foster care is the provision of care to children who have significant health, emotional, or behavioral needs. Like basic foster care, specialized foster care includes teaching age-appropriate life skills and provides economic, recreational, social, academic, and religious experiences appropriate for the child's mental and physical capacity. In addition, specialized foster care also includes specific tasks provided by the foster parents identified in the case plan to meet the special needs of the child. See "Additional Training for Foster Parents" for training requirements.

Approval for a specialized foster care rate is provided by the Regional Manager, and is time-limited based on the ongoing specialized needs of the child. Approval is reviewed on a regular basis, and the rate of payment may either remain as specialized care or change to basic care, depending on the continued needs of the child.

Treatment Foster Care

Treatment foster care is the provision of care to children who have exceptional needs. Through additional case management and therapeutic services provided by a private child placement agency, children and youth in CPS custody who have emotional, developmental, or medical disabilities are provided appropriate out-of-home therapeutic placement and other services designed to enhance their emotional and social functioning and well-being. Treatment foster care can be used to prevent placement in a more restrictive setting like group care or residential treatment, or as a step down from a more restrictive setting. The treatment foster care team assigned to the child consists of the child and their family, the foster parent(s), therapeutic case manager, the FSS, and other professionals involved with the child.

The following private child placement agencies license foster homes to provide treatment foster care:

- Children's Home Society

- Lutheran Social Services
- Capital Area Counseling Services
- Abbott House Bridges Therapeutic Foster Care
- Our Home Connections

Shelter Care

Shelter Care facilities are licensed as group care centers providing short-term care for children needing placement during an emergency. Shelter Care is provided by the following agencies:

- Children's Home Shelter for Family Safety - Sioux Falls
- Arise West - Rapid City
- Arise East - Sioux Falls
- Cheyenne River Sioux Tribe (CRST) Emergency Shelter Eagle Butte
- Oglala Sioux Tribe (OST) Emergency Youth Shelter Pine Ridge
- Spotted Tail Children's Home - Rosebud

Group Care Centers for Minors

When youth are unable to live in a foster care or kinship setting because of emotional or behavioral needs, CPS utilizes group homes for placement. Group homes are licensed facilities with trained staff providing 24-hour care, ongoing counseling, and a structured environment for children who need this type of care. Group homes also utilize community-based resources to supplement the treatment of these children.

Group Care is provided by the following agencies:

- McCrossan Boys Ranch - Sioux Falls
- Falls Academy/Brighter Transition - Sioux Falls
- Sacred Heart Adolescent Treatment Center - Eagle Butte

Residential Treatment Center

CPS utilizes Psychiatric Residential Treatment as a placement resource for children who are unable to function in a family or group setting because they are experiencing significant mental health challenges. The children require intense professional assistance and therapy in a highly structured, self-contained environment for stabilization and treatment. A referral to the state review team is required to determine if a child meets the criteria to be placed in a Psychiatric Residential Treatment Facility (PRTF).

Residential Treatment is provided by the following agencies:

- Abbott House – Mitchell
- Children's Home Society - Sioux Falls and Rockerville
- Summit Oaks Center - Sioux Falls

- Our Home - Huron
- Our Home - Parkston
- Canyon Hills Center - Spearfish
- Wellfully Residential Treatment Center

Intensive Residential Treatment Center

An Intensive Residential Treatment Center (IRTC) provides more intensive and individualized services, treatment, and supervision of children. IRTC is used to prevent runaway behavior, physical aggression, and the likelihood of children injuring themselves or others.

Intensive Residential Treatment is provided by the following agencies:

- Aurora Plains Academy - Plankinton

The Placement Process

Foster parents will be contacted by either OLA or CPS to discuss potential placement of a child(ren) in their home based on the preferences in their licensing home study. Matching the strengths of the family with the needs of the child can make all the difference in the world to a child who is experiencing a difficult time. When time permits, it may be possible for the foster parent to meet the child prior to placement to ease the transition for both the child and their family. Sometimes, the Licensing Specialist and/or FSS may inquire if the foster parent is willing to care for a child outside the foster parents' preferences due to the unavailability of foster families in the area to care for the child.

Foster parents have the right to say **NO** to a placement.

Factors considered when a child is placed in foster care:

- **Relatives:** Placement with relatives is the first consideration before placing a child with a non-related foster family.
- **Previous Foster Parents:** If the child was previously placed in foster care, the previous foster parents will be considered before looking for another foster family.
- **Placing Siblings Together:** Efforts will be made to place siblings with the same foster family. If siblings cannot be placed together initially, ongoing efforts will be made to find a foster family who can care for the siblings.
- **Native American Children:** The Indian Child Welfare Act (ICWA) placement preference applies and will be discussed later in the handbook.
- **School:** Efforts will be made to place the child with a foster family close to the child's school, so the child doesn't have to change schools. If placement near the child's school district is not possible, efforts will be made to transport the child to their school if it's in the best interest of the child.
- **Special Needs:** Children with special physical, emotional, or medical concerns will be placed with a foster family able to meet their needs.
- **Other Children in the Home:** If the foster family already has other children placed in foster care, this would be considered before placing another child into the home.
- **Religious Background:** If religion is a factor in the child's life, the preference of the child's parent will be recognized and efforts made to accommodate the preference.

When foster parents accept the placement of a child, the FSS will make arrangements regarding the placement day and time, unless it is an emergency placement, which may mean that the child will be placed in a matter of minutes or hours.

Suggested Items to Have on Hand

Foster parents may want to have the following items on hand to help with the placement of the child in their home:

- Toothbrush
- Hairbrush
- Waterproof mattress pad/cover
- Night light
- Pajamas
- Toys
- Diapers
- Bottles
- Beds/Cribs



- Car seats
- Babysitting plan
- Simple household rules/routine

Children in foster care are placed due to abuse and/or neglect. The Licensing Specialist and/or FSS will provide the foster parent with information about the child's past. It is important for foster parents to understand what the child has been through to meet the child's needs, and take appropriate steps to ensure all children in the home remain safe. There will be times when children enter care and the Licensing Specialist and/or FSS knows very little about the child or their history. In these cases, information will be provided to the foster parent as it becomes available.

Discussion Items and Forms

Information the foster parent receives about the child or the child's family is confidential. The FSS will discuss and review the following information with the foster parent when a child is placed initially and throughout the child's placement in their home.

- Child Placement Agreement
- Health and education information if available
- Clothing
- Request for Payment

- Monthly Reporting Form (See Form Section – Monthly Reporting Form)
- Implementation of the Child's Case Assessment Plan
- Life Book
- Medical exam required within one month of child entering foster care
- Enrolling in school
- Court dates
- Family Time Plan

Child Placement Agreement

The foster parent receives the Child Placement Agreement upon the placement of a child in their home. Some of the information on the form may not be available at the time of placement, but will be provided by the FSS as soon as the information becomes available.



A copy of the completed Child Placement Agreement is to be left with the foster parent and is proof the child is placed in the foster home. (See Form Section – Child Placement Agreement). The Child Placement Agreement contains a Foster Parent Communication Checklist, which can be used as a guide to assist the foster parent and the FSS to cover important topics about caring for the child. The Child Placement Agreement also includes the statement of understanding for the placement preference of siblings, relatives and ICWA placement preference.

Home Visits from the Family Services Specialist

When a child is placed due to an emergency or an unplanned move from one resource to another, a face-to-face visit is required the next working day. A home visit is then required within the next 14 days, with a third visit required within the next 30 days. If the placement is the result of a planned move, a telephone call is required within 72 hours of placement with a face-to-face home visit required within 14 days. Monthly face to face home visits will occur after that. The FSS is required to meet with the child alone briefly during the home visit. Additional phone calls and emails are encouraged. These contacts may be affected by weather and distance to your home. When a child is placed from another region, arrangements may be made for a FSS from another office to visit. If the child and/or foster family are struggling with the placement, the FSS will arrange addition visits or contacts to assist the foster parent.

During a family's first placement the Licensing Specialist will contact the family during the first week of placement and for the next several weeks after to ensure everything is going well and to answer any questions the family may have.

Topics that can be discussed by both the FSS and the Licensing Specialist may include but not limited to:

- Placement stability
- Resource supports- WIC, Childcare, Car seats
- Reimbursement paperwork
- Medical, educational, mental health, social and connection strenghs, needs and services appointments

Placement of Siblings

SDCL 32-3A-61 defines the term "sibling" to include any individuals who are brother or sister by blood, marriage, or adoption. Individuals remain siblings even when there is a termination or other disruption of parental rights such as the death of a parent. Section 206 of PL 110-351 Foster Connections to Success and Increasing Adoptions Act of 2008 requires each state to make reasonable efforts to:

- Place siblings removed from their home together in the same foster care, adoption, or guardianship placement unless the state can document joint placement is contrary to the safety or well-being of any of the siblings.
- If siblings are placed into care at separate times the children should be placed together unless the state can document joint placement is contrary to the safety or well-being of any of the siblings.
- In the case of siblings who are not jointly placed, provide for frequent visitation or other ongoing interaction between the siblings" unless the state documents this would be contrary to the safety or well-being of any of the siblings.

Sibling relationships help children achieve developmental milestones as well as provide emotional support, companionship, and comfort in times of change. These relationships often provide needed continuity and family stability during a child's placement in foster care. The bond between siblings is important as they typically share the same history, heritage, and biology, unlike any other relationship. CPS fosters the special relationship siblings share.

When children are separated from their siblings, often times they feel they have lost a part of themselves, which increases the anxiety, pain, and trauma they feel over separation from their parents and their transition to the home of a resource family. When siblings are placed together it helps children adapt to new and unfamiliar situations, but it also helps them maintain connections with each other throughout their lifetime. Sibling relationships provide a sense of stability and belonging and will often be the longest relationship in one's lifetime.

When siblings enter care, all efforts will be made to place them with the same foster family. The Licensing Specialist and FSS will explore with foster families what it will take to keep all siblings together in the same home. If placement together is not an option at time of removal, and the children are separated, the Licensing Specialist and FSS will continue efforts to locate a foster family where the children can eventually be placed together.

When siblings are not placed in the same home, a plan will be implemented to develop

and preserve sibling connections. This may be achieved through frequent visitation, shared respite placement, Svideos, letters, phone or virtual calls, and if recommended, sibling therapy. Foster families who care for siblings who are not placed together are encouraged to develop positive relationships with each other to aide in preserving sibling connections. For example, perhaps the families can organize play days, birthday parties, and other activities which allows for siblings to see each other in a natural setting.



Family Time

Visits and contact between children in placement and their parents, siblings, and extended family members is a key indicator of family functioning and is essential to keep connections with their family and culture. The frequency and quality of visits is a key factor in reunification of children with their parents. When determining a family time plan, input from the child if age appropriate, birth parents, the foster family, and the FSS is collected. Important things to consider when arranging family time include:

- Schedule of visitation times, locations and transportation details;
- Frequency and duration of visits;
- Other individuals who may be included in the visit such as siblings or other relatives;
- Special parental or foster family requests;
- Whether or not emails, letters, phone or virtual calls will be allowed between the child, parents, and/or extended family; and
- The need for the visit /contact to be supervised or not.

If a parent contacts their child outside of the agreed upon visitation plan, the foster parent should call the FSS immediately. If there is concern for their safety or the safety of the child, they should call law enforcement immediately and contact the FSS.

It is important to note that family time cannot be used as a reward or punishment for the child.

How Placement Affects Children

Children can feel severe personal loss when separated from their families. They have lost the most important people in their lives – their parents, sisters, and brothers. They have lost their familiar pattern of living, their homes, and the places that make up their world. They may lose self-esteem and a sense of identity in their inability to control the events around them. Children's reactions to separation vary. Their reactions are influenced by a number of factors:

- Nature of the loss

- Age at the time of the loss
- Degree of attachment to the persons from whom the child is being separated
- Ability to understand why the separation took place
- Emotional strength or resilience
- Cultural influences
- Circumstances causing the loss
- Number of previous separations
- Help given before, during, and after the separation

The child's emotional development is interrupted and may show signs of grief including: shock, denial or protest, bargaining, anger (acting out), depression, and regression of behaviors. Physical reactions to placement may also occur such as upper respiratory infection, stomachaches, or headaches. Children often feel abandoned, helpless, worthless, and often responsible for the family's breakup. There will be a period of adjustment for children placed in the foster parents' care. The impact of placement on the child may not show right away, sometimes called the "honeymoon period," or they may show up soon after placement. Whenever children begin to display the effects of placement, it is important to help the child and seek assistance from the FSS.

Tips for Dealing with Separation of the Child from Parent(s)

- Let the child grieve or mourn for his or her parents. When placed in a foster home, a child may feel a great sense of loss regardless of the parents' past behavior or the circumstances that led to placement. Help the child move through the grieving process.
- Recognize it is common for children to view foster home placement as a punishment for some real or imagined bad deed such as the breakup of their families. Listen to children when they express such thoughts and feelings.
- Allow children to share memories about their family. Let them openly express their feelings.
- Help the child feel safe and cared for.
- The foster parent should understand their own loss and grief issues.

Welcoming a Child into a Foster Home

A child who comes to the foster parents' home will need time to adjust. At the same time, the foster parent will need to make some adjustments. Everything is new. There are new parents, perhaps new sisters and brothers, a new house, new foods, new rules and expectations, a new neighborhood, and possibly a new school.

It is hard for children to leave their homes and find themselves in strange new surroundings. To deal with this, children may fantasize about the positive qualities of their own parents, their own home, and their neighborhood. They may not want to get involved in a foster family's routine and activities out of a sense of loyalty to their own family. Outbursts of anger, aggressive language, or behavior may occur, such as swearing, slamming doors, yelling,

threatening to run away, or damaging property. Even if they show no emotion, many questions, fears, and anxieties about the future may fill their thoughts and dreams. The child needs the foster parents' understanding, patience, and support when settling into their home.

Foster Care Do's and Dont's:

Experienced foster parents, Licensing Specialists, and FSSs have several suggestions for new foster families preparing to welcome children into their homes. Some of these suggestions include the following.

- Welcome the child with some kind of activity, if appropriate.
- Be sure the child has a place to keep personal possessions.
- Let them unpack in their own time. Offer to help or just let them know where to put their things whenever they are ready to unpack.
- Let them know it is all right to put a picture of their mom, dad, brothers, sisters, or previous foster families up in their bedroom, and that the foster parent understands how important these people are to them.
- Be sensitive to a child's feelings. Ask permission before hugging or touching children.
- Do not try to change things like their hair, clothing, or anything which implies the child is not okay the way they are.
- Help them settle down to a regular routine as quickly as possible, but do not be disappointed if they do not respond right away.
- Give them opportunities to talk, but do not pry into their past or criticize their parents.
- Respect their right to privacy. Never talk about them when they are present, unless it is appropriate to include them in the conversation. This includes the foster parents' conversations with CPS, OLA, school officials, other professionals, friends, or other children.



- Help children develop a sense of pride and accomplishment by giving them tasks within their abilities. Let them know regularly how much they are appreciated for their help around the house.
- Catch them being good by noticing the little things!
- Things like bed-wetting and soiling may be a reaction to being placed in a foster home. Shaming or punishing them will make the problem worse. Rather than using punishment, use positive techniques to help the child learn to manage his or her behavior.
- Punishments like hitting, grabbing, yanking, or pinching as a means of discipline are not allowed and can be very damaging to children.

- Foster parents should never threaten a child who misbehaves with removal from the foster parent's home.
- Depending on the age of the children, the foster parent may ask them what they think foster care is, and what they expect from them as a foster parent. Don't make children answer if they choose not to respond. Give them time.

Foster parents should contact their FSS or Licensing Specialist when concerns or problems arise.

Placement Stability

The importance of placement stability for children is supported by research showing placement stability can positively affect the well-being and behavior of children. Children who are removed from their homes are already experiencing a traumatic event which can create confusion, distress, and loss. Children are further traumatized by separation and loss. Some children enter foster care with attachment problems because of maltreatment and inconsistent or inadequate parenting practices in their families of origin. Placement disruptions for children increase the likelihood they will experience behavioral and emotional problems, difficulties with educational success, and issues with developing positive and supportive relationships.

The positive effects of limiting placement changes and maintaining a child in a stable placement can be:

- The child experiences less distress and trauma while in placement.
- The child has the opportunity to develop relationships within the family and community that can be maintained and contribute to less distrust and decrease behavioral problems.
- The child is given more opportunity for success in school by staying within the same school. This can be further enhanced by maintaining the child in the school the child was attending prior to placement whenever possible.
- There is continuity in services and supports to the child.

Case Meetings

Foster parents may participate in several meetings aimed at creating a plan that ensures the child has a safe, stable, and permanent family. These meetings may include the FSS, their supervisor, the child, child's parents, extended family members, friends, and/ or service providers. The child's family often serves as a natural support system, and solutions can be found by leveraging family strengths. Empowering families to take responsibility can lead to permanency through reunification, guardianship, or adoption.

There are many reasons why it is important to pull the team together for a meeting, those include:

- Introductions and Case Planning Meetings – It is generally recommended that CPS, the child's foster parents, and birth family meet shortly after placement to exchange information about the child's needs and services, as well as plan for family time with the child and parent. The initial meeting is almost always facilitated by the Family Services Specialist (FSS) and held at the DSS Office, virtual meeting, or phone. Ongoing

meetings and contact between the foster parents and birth family will be coordinated and approved through the FSS.

- Safety Planning Meetings-- When a child is preparing for reunification, the FSS develops a safety plan with the birth parent to assure safety of the child when returning home. Foster parents may be asked to be participants on the safety plan and if they agree, assigned to complete tasks such as visiting the home to check on the child during certain time frames, providing support to the birth family, or respite care.
- Concurrent Planning Meetings – A concurrent plan is a back-up plan addressing the child's permanency if the child cannot return home. Having a concurrent plan is important to prevent the child from remaining in CPS custody longer than necessary. Concurrent planning generally begins shortly after a child is placed in CPS custody and continues until the child's permanent plan has been achieved. Foster parents may be invited to meetings with the birth family and/or extended family to discuss concurrent planning options for the child.
- Team Decision Meetings—Meeting is held when critical decisions need to be made related to the child's care or services. These meetings are more immediate in nature and are scheduled quickly.

Foster Parent License Renewal

Licenses to provide foster care must be renewed every year. Foster parents are provided a certificate with license date and expiration date. A letter is sent to the foster parents approximately 60 days prior to the expiration date to notify the foster parent of the renewal process with an application to complete for renewal of their license. The home visit and paperwork must be completed prior to the expiration date of the current license. A license can be extended up to 120 days if there are extenuating circumstances hindering the ability to complete the requirements for licensure: for example, a family member experiencing health issues and needing time to recover. Before a license can be extended, an application to renew the license must be returned to OLA prior to the current license expiration date.

Items needed for re-licensure to provide foster care include the following:

- Application
- Central Registry check for any household members who turned 18 years old during the past licensing year
- Sex offender check for any household members who turned 14 years old during the past licensing year
- Fingerprint check (DCI/FBI) for any household members who turned 18 years old during the past licensing year
- Updated immunization records, including the flu shot and pertussis for any caretaker if the family is licensed for a child age birth to one year old or for children with medical needs
- Verification of training hours
- Home safety and sanitation check
- A water test (if home uses well water)
- Signed statement of acknowledgement of policies regarding to confidentiality, being a mandated reporter, and discipline

- Signed statement of opportunity to review the foster parent's file
- Signed statement of understanding for the placement preference of siblings, relatives, and ICWA placement preference
- Confirmation of valid South Dakota driver's license, vehicle registration, and proof of liability insurance

Forms needed to complete the renewal process will be provided by the Licensing Specialist.

Reporting Changes in the Foster Parents' Family

Foster parents are required to report any changes in circumstances pertaining to their home (e.g. pool, construction, etc.), own families, or children placed in their home (e.g. physical/ mental health issues or changes, marital problems, divorce, moves, pregnancy, legal issues, job changes, etc.). This includes adult children moving back home (e.g. college age child moving back home for the summer or extended family). Any changes should be reported immediately to the Licensing Specialist.

Child's Name

A child's name is an important part of their identity. It is imperative foster parents recognize the importance of the child's name and continue to use the name given to them by their birth parents. Foster parents are not to change or alter a child's name. If there is a reason why the foster family desires to call a child something other than their given name, they should be discussing this with CPS and the birth parents. It may be helpful to talk with the birth parents about nicknames the child may have had prior to coming into care or the nickname a child came into care with.

Child's Personal Belongings

Personal belongings children bring with them when entering care are important to them and should not be discarded. Foster parents should consult with their FSS before discarding any items. When children leave the foster parent's home, their personal belongings and items they have acquired while in the foster parent's home should leave with them. Taking a picture of the child's belongings is a good way to ensure all the child's belongings go with the child when they leave the foster parent's home.

Child Case Plan

A child must have a written case plan completed within 60 days of initially entering foster care. Children when developmentally appropriate, the parents or guardian, and the resource provider (kinship or foster parent) must be involved in completing the case plan and with any review of the case plan. Case planning conservations may occur during home visits, meetings or during informatlon converasations between the FSS and families. The Child Case Plan aims to outline the child's strengths and needs clerly and necessary services to address those needs, as well as to evaluate the suitability and safety of the resource provider. The case plan is also used to document the child's concurrent plan and the efforts towards finding suitable alternatives should reunification not occur. The case

plan is evaluated every six months. An addendum will be completed sooner when there is a change in placement, change in permanency goals, or update to the child's need.

Life Book

Children in placement should have records containing everything of importance in their lives to help give them a sense of their own history and identity. The FSS will provide the foster parent with a life book to use. The child's life book must be given to the child's FSS when the child leaves their home permanently.

Material for the life book can be obtained from the following people:

- Current or previous FSS
- Individuals from other agencies who have had contact with the child and their family
- Birthparents, grandparents, or other relatives
- Foster parents

Items to include in the life book are as follows:

- Developmental milestones
- Information about injuries, illnesses, or hospitalizations
- Favorite activities
- Favorite birthday and Christmas gifts.
- Information about ways the child expresses feelings
- Pictures of the foster home
- Cute behaviors
- Ways the child likes to show affection
- Special trips or vacations with the foster family
- Information about reactions and frequency of visit with relatives
- Any special extended family members
- Names of teachers and schools attended
- Report cards
- Special activities, such as scouting, clubs, or camping experiences
- Church and Sunday School experiences
- Photographs of the child, foster family, friends, and school pictures
- Drawings by the child
- Copies of documents, such as the child's birth certificate

Vehicle Capacity and Car Seats

67:42:01:24. Transportation. A vehicle used for transportation may not carry more people than its stated passenger capacity.

SDCL 32-37-1 requires:

- All children under five years of age must be secured in a child passenger restraint system; and

- Seat belts must be worn by all passengers from 5 to 18 years of age.

The National Highway Traffic Safety Administration (NHTSA) provides the following car seat recommendations:

- Select a car seat based on a child's age and size.
- Always refer to the specific car seat manufacturer's instructions, read the vehicle owner's manual on how to install the car seat using the seat belt or latch system, and check height and weight limits.
- To maximize safety, children should use a car seat for as long as possible, as long as the child fits within the manufacturer's height and weight restrictions.
- Children should remain in the back seat at least through age 12.

Birth to 12 months:

Children under the age of 1 should always ride in a rear-facing car seat.

1 to 3 years:

Children should remain in a rear-facing car seat as long as possible since it's the best way to keep him or her safe. Children should remain in a rear-facing car seat until they reach the top height or weight limit allowed by the car seat's manufacturer.

4 to 7 years:

Children should continue using a forward-facing car seat with a harness until they reach the top height or weight limit allowed by the car seat's manufacturer. Once the child outgrows the forward-facing car seat with a harness, the child should use a booster seat and remain in the back seat.

8 to 12 years:

Children should continue using a booster seat until they are big enough to fit in a seat belt properly. For a seat belt to fit properly the lap belt must lie snugly across the upper thighs, not the stomach. The shoulder belt should lie snugly across the shoulder and chest, not the neck or face. Children should continue to ride in the back seat.



Discipline

67:42:05:15. Discipline. Discipline used by a foster parent must provide for positive guidance, redirection, and setting of clear-cut limits while helping a child to develop self-control, self-esteem, and respect for the rights of others. A foster parent shall discuss methods of discipline with the child's FSS. A foster parent may not delegate discipline to older children or peers. Any discipline or control must be appropriate to the child's age and developmental level. Physical punishment is prohibited.

Discipline is an essential part of child-rearing. It should be viewed as a learning experience to enable children to develop acceptable patterns of behavior and conduct and integrate a sense of responsibility for their own behavior. Effective discipline teaches children to involve the child in determining what the consequences will be when the behavior has occurred. In addition to prohibiting corporal punishment, the following policy must be understood and adhered to in relation to the disciplining of children in foster care:

- Only foster parents or other appropriate caregivers have permission to discipline children in foster care.
- Children shall not be subjected to being placed in a dark room or enclosure; to the denial of food, water, shelter, and clothing; or any other discipline physically or psychologically injurious.
- Children shall not be subjected to verbal remarks or ridicule of them or their birth families.
- The denial of mail from or visits with birth families shall not be used as punishment.
- The threat of foster home removal should not be used as punishment.

CPS recommends the use of natural and logical consequences including:

- Redirection
- Apologizing
- Time-out or grounding
- Withholding privileges
- Withholding money or paying for damages from an allowance
- Extra chores

Emergency Situations

Foster parents should contact their FSS immediately in the event of the following situations:

- Any type of serious injury to a child in foster care
- Severe illness, especially if hospitalization is required and/or there is need for surgery. Foster parents should not sign any releases for surgery. Unless parental rights have been terminated, the FSS must contact the parent to obtain approval for surgery. If the parent refuses or cannot be contacted, approval must be obtained from the court having jurisdiction over the matter
- The contraction of a contagious disease
- The pregnancy of a child in foster care
- Behaviors while in a foster family home, such as sexual acting out, destruction of

property, physical harm to self or others, etc.

- Any involvement with law enforcement or other community authorities
- A runaway child in foster care, or a child in foster care otherwise missing from care
- An automobile accident
- Any illness or crisis in the foster home necessitating removal of the child in foster care



- Unauthorized or inappropriate communication from the child in foster care with relatives that may threaten the safety of the child in foster care
- Suspension or expulsion from school
- Death of a child in foster care

Missing from Care

If a child in your care is missing or has run away, you must contact local Law Enforcement immediately and provide the following information:

- The child's first and last name
- The child's date of birth, gender, height, and weight
- Any endangerments about the child
- Any known circumstances surrounding the child's disappearance

Once Law Enforcement has been contacted you need to contact CPS. If it is during normal business hours, please contact the Family Service Specialist or Supervisor assigned to the missing youth and if they are unavailable, please ask for another Supervisor or the Regional Manager. If it is after hours, contact the after-hours emergency number. These numbers can be found on the Child Placement Agreement. Provide as much information as possible including:

- Name and date of birth
- Your name
- Date, City, and State where the youth went missing
- Clothing the child was wearing
- Any medical conditions and medication

- Any endangerments about the child
- Circumstances surrounding the missing youth's disappearance
- Possible whereabouts
- Name, telephone number, and agency name of law enforcement officer that received the report
- Date and time of contact with law enforcement regarding runaway or missing child

Health and Medical Care

Medicaid

Children in foster care are issued a Medicaid number. A plastic medical card will be mailed to the foster parent's home approximately seven to 10 days after placement. If a child transitions to a new foster home, the Medicaid card should be provided to the child's FSS. This is the only Medicaid card that will be issued for this child and should not be thrown away. If a foster parent needs to take a child to a medical provider before issuance of the card, contact the FSS. If a child needs to go to an emergency room, clinic, etc., the foster parent should not sign any forms that would identify them as being financially responsible for the child's care. Foster parents should check with all providers/clinics (vision, dental, orthodontic, chiropractic, and mental health) before appointments and make sure the provider/clinic accepts Medicaid. Children in foster care should have their own account at the clinic. Prescription drugs, vision, dental, chiropractic, and mental health care are covered by Medicaid. Foster parents should discuss all non-covered items with their FSS. Foster parents should not pay for prescriptions unless they have prior approval from their FSS for reimbursement.

Women, Infants, and Children Program (WIC)

The WIC program is sponsored by the Department of Health, and provides nutritional assistance to children ages 0-5 who meet the financial and nutritional eligibility requirements.

All children ages 0-5 in the custody of CPS can be referred to the local community health nurse for a nutritional assessment and a determination of nutritional eligibility for WIC. More information on WIC can be found at doh.sd.gov/family/wic/.

Assessment of Child's Needs

Every child involved with CPS has the right to have their needs assessed. It is important for a child to have a thorough assessment of needs in order for CPS and the foster parents to meet the needs of each child. The assessment of needs may take on different forms. Needs of children in foster care can be assessed through observation or a formal evaluation conducted by another agency, such as a psychological evaluation by a mental health professional. An assessment may also be completed through an informal process by CPS conducting interviews with the child, family, and service providers. Medical records, school records, and mental health records will be requested by CPS and reviewed so an accurate assessment can be completed, and needs identified for each child.

Physical, Dental and Vision Care Schedule

Children entering state custody are required to have a physical exam during the first 30 days of placement. Subsequent physicals are scheduled according to the Well-Child Care Recommended Schedule.

Foster parents should review the recommended immunization schedule, including flu shots, and seek prior approval from the FSS for all immunizations. Immunizations are covered by Medicaid (see the Well-Child Care brochure in the forms section for information on the immunization schedule).

Hearing is assessed at the medical appointment within 30 days of placement. If a foster parent suspects issues with a child's hearing they should inform their FSS.

Children in foster care are entitled to a screening examination by a participating physician when they become eligible for Medicaid. After the initial screenings, the child should be screened following the recommendation below:

- Vision evaluations should be done by at least age 5 and yearly thereafter.
- Dental evaluations should be done by age 1 and yearly thereafter.

Foster parents should provide any medical, dental, vision, and hearing records/information they receive to the child's FSS.

During monthly home visits, the foster parent should discuss the child's medical, dental, and vision needs with their FSS. It is important for the FSS to be informed about all exam dates and the providers who conducted those exams. The foster parent should also address any barriers to accessing services and discuss any physical or vision health needs that are not covered by Medicaid. Additionally, the foster parent MUST not agree to pay for any expenses not covered by Medicaid without prior approval from the FSS.

If there is difficulty in accessing dental services for children due to geographic location or payment, mobile dental services are available to children in various communities through Dakota Smiles Mobile Dental Program. More information on this program is available on the Delta Dental website at www.deltadentalsd.com. Please utilize this website for information on patient qualifications and schedules.

For more information regarding medical services that are covered by Medicaid, please visit: dss.sd.gov/medicaid/recipients/ or talk with your FSS.

Education

Children in foster care must attend the local public school. Every attempt to keep children in their current school should be made if possible. CPS is able to reimburse transportation cost to transport the child to their home school if it is in the best interest of the child. Other transportation arrangements should be discussed with the FSS. If a child is eligible for school and is not enrolled, the foster parent should enroll the child immediately. The school district is required to allow the child to stay in their current school during initial placement or any changes in placement. Additionally, the district must enroll the child immediately, even before receiving the child's birth certificate or school records.

Foster parents are expected to attend all school conferences and meetings.

School Lunch

Children in foster care qualify for free school lunch through the National School Lunch Program. Foster parents should contact the child's school to enroll the child in the program.

Religion

Children in foster care may attend the same church as the foster family. In some situations, the foster parents may be asked to transport a child to their church if it is in reasonable distance from their home. Children in foster care are not to participate in ceremonies of the foster family's religion (baptism, communion, etc.), unless permission has been received from the child's parents through the FSS and is allowed by the church.

Culture

Foster families have an important role in helping children achieve a positive cultural identity. This is achieved best through respecting and promoting cultural values and norms. It is important for foster parents to remember each child has a unique culture, history, and identity. Even when children are placed in families of the same culture, race, or ethnic group, there may still be differences. All families and people within a specific culture are not alike. There can be differences in family history and background, place of origin, education, employment, and financial resources.

In some circumstances a foster parent may care for a child who does not reflect the family's race or ethnicity and whose culture is quite different from their own. While CPS tries to place a child with a family who reflects the child's identity, it isn't always possible. Foster parents are encouraged to learn about the child's culture.

Working with Birth Parents

Foster parents play a key role in assisting birth parents to stay connected with their child and supporting reunification. Foster parents need to communicate with birth parents, when appropriate, to help alleviate some of the stress of the child being removed from their parent. Positive communication between the foster parents and birth parents is a benefit to the child. The relationship between foster parents and birth parents is often referred to as shared parenting, shared decision making, or Team Decision Making (TDM). There is not a one size fits all answer to situations that may arise while working with birth parents. If foster parents are unsure about how to handle communication with birth parents, they should talk to their FSS.

Reasonable and Prudent Parent Standard

Public Law 113-183, the Preventing Sex Trafficking and Strengthening Families Act requires states to implement a Reasonable and Prudent Parent Standard to support normalcy for children/youth in care.

Normalcy is the right for all children in licensed out-of-home care. Children will be given the opportunity for normal growth and development which includes age-appropriate activities, responsibilities, and life skills. When children are not able to participate in activities

needed for development, they are unprepared for life as an adult. Many children who age out of foster care experience unemployment or inadequate income, homelessness, and incarceration. Allowing children to test boundaries while in care helps the child learn about natural consequences and the importance of making positive choices.

Reasonable and Prudent parenting is characterized by careful and sensible parental decisions to maintain a child's health, safety, and best interests while at the same time encouraging the child's emotional developmental growth. Reasonable and Prudent Parenting shall be used when determining whether to allow a child in care of the caregiver to participate in extracurricular, enrichment, and social activities. Factors to take into consideration when considering reasonable and prudent parenting:

- Child's age, maturity, and developmental level (Even though the child is 14, does a PG-13 movie have content the child isn't able to handle without behavioral issues or strong emotional responses?)
- Potential risk factors (What is the risk difference in allowing a child to ride with a friend to school vs. allowing him to ride with a friend to a late night concert?)
- Best interest of the child (Was the sleep away camp selected because it fits the child's interest and is what they want to do, or is it to give the caregivers a break?)
- Emotional and developmental growth (Will being on the soccer team help build the child's self-esteem, and develop the social skills they need?)
- Family-like living experience (Is this something the caregiver would let her birth or adopted child do? Is the only thing preventing the activity an agency policy?)
- Child's behavioral history (Given the child's history of underage drinking, is allowing him to stay out late with friends unsupervised a prudent decision?)

Social and Recreational Activities

It is important for children in foster care to have the opportunity to participate in activities which are age and developmentally appropriate. These activities include recreational, school, religious, and community activities. Participating in activities can help children and adolescents develop skills, build self-esteem, and gain a sense of achievement.

Foster parents are encouraged to provide children in foster care opportunities to participate in groups such as clubs, church or synagogue (of their choice), athletics, and lessons in their area of interest (music, dance, art, swimming, etc.).

It is essential a child's activities take place within a safe environment. This requires common sense and good judgment by the foster parents as well as a concern for the protection of children in care and commitment to maintaining high standards of safety. Foster parents should be role models and teach good safety habits by example.

The following guidelines should help foster parents ensure a safe environment for children:

- Know the child, who they are, who they are with, and what they are doing
- Know what equipment is being used, is it in operating condition, and is it safe for the child or children to use
- Know the nature of the activity and the setting where the activity is taking place
- Be sure the child is dressed properly for the activity and the climate
- Plan ahead by anticipating situations and behaviors to help reduce risks and hazards

A child may have a health or physical problem which requires special attention and supervision. For example, a child with a history of a seizure disorder may require one-on-one supervision during a swimming activity. Even when seizures are under control with medication, this may be true.

When a child has a specific health problem, it is important for the foster parent to discuss it with the child's doctor and to be knowledgeable in treating the concern, and then review it with the child's FSS.

Parents have the right to make certain decisions about their children and to be informed about what their children are doing. Foster parents can give permission for the child to engage in routine types of activities such as joining a school club or sporting activity. When foster parents have questions about activities the child may be involved in, check with the FSS.



Hunting

Foster parents must consider a child's maturity level when deciding if they should hunt. Before a child in foster care under the age of 16 may hunt, the child must successfully complete a hunter safety course approved by the Department of Game, Fish and Parks.

Dating

Dating is a normal part of adolescence and is important for individual development and social adjustment. The child, their birth parents, foster parents, and FSS will discuss dating and set clear rules and boundaries regarding dating.

The FSS and the child's birth parents will be consulted with and provide approval prior to discussing any type of birth control with the child.

Transportation

Foster parents are encouraged to provide transportation for a child in foster care for the typical daily living situations, school functions, school activities, medical visits, mental health appointments, dental visits, treatment conferences, visitation with family, and court hearings. When a foster parent is not able to transport the child, please contact the FSS so other arrangements can be made. There is assistance with transportation costs of children in foster care. The FSS will be able to provide guidance on reimbursement for medical and educational transportation costs.

Trips and Vacations

If foster parents are planning out-of-state travel with a child placed in their home, they should contact the FSS as soon as possible to discuss travel plans and itinerary. A travel authorization letter must be issued prior to any child leaving the state. The FSS will inform the

child's parent of the trip or vacation.

Clothing

Some children may come to the foster parents' home with very little clothing. If needed, a clothing authorization will be provided to foster parents to make the initial clothing purchase. The FSS can assist in obtaining a clothing authorization for children. Once the initial purchase is made, clothing expenses are included in the foster parent's monthly reimbursement. All clothing purchased for a child should go with the child when they leave the foster home. Discuss with the FSS any clothing needs above what is allotted in the monthly foster care reimbursement.

Allowance

Giving a child an allowance helps teach the use of money. It can also promote independence and responsible decision-making. Foster parents are not required to provide an allowance for children in foster care but are encouraged to if it is the trend for other children in the home. The amount of allowance a child in foster care receives should be the same as the amount given to any child in the home.

Chores and Jobs

Having children in foster care complete some chores regularly can help teach them responsibility, basic living skills and provide life experiences. The age and ability of the child should be taken into consideration, as well as making sure the chore doesn't interfere with the child's school time, study time, play time, sleep time, community activities, and/or family visits. Supervision of chores may be needed as the child is starting out, so they fully understand what is expected of them to successfully complete the task. Letting the child know they are interested in working with them rather than being an overseer or critic can provide an ideal situation for the foster parent to be in the role of an interested, helpful adult.

Older youth in foster care can be encouraged to apply for a job to earn spending money to become more independent. Having a job can also instill life-long skills in children and teach responsibility and budgeting. Knowing the employer of the child is essential for foster parents in making sure the work is appropriate and there is no exploitation. Make sure the part-time employment is appropriate for the child's level of maturity and it doesn't interfere with school work. The child should be encouraged to discuss any prospective job and employment goals with the FSS.

Be absolutely sure the situation does not violate any child labor laws. Information on child labor laws can be found at dlr.sd.gov/wagehrs/youthemployment.aspx.

Self-Supervision of Older Children

In some instances, it may be appropriate for children in foster care to supervise themselves for limited periods of time. The decision for self-supervision must be based on the child's strengths and therapeutic needs. Foster parents will need to take into consideration the

maturity and decision-making skills of the child, as well as their comfort level of staying home alone. A child in foster care should be provided with numbers to call and a plan of action in case of an emergency. A written plan must be developed which sets limits relating to visitors and household rules and provides for a routine check by the foster family or FSS. The same is applied when an older child (16 or 17) stays home alone overnight. The plan for a child to self-supervise must be approved by the foster family and the FSS.

Babysitting

There may be times when it is appropriate for older children in foster care to babysit other children. The child must demonstrate they are responsible and have the skills and maturity to deal with situations when they arise. The child should know proper discipline techniques as well as have a plan in case of an emergency such as phone numbers to reach the foster parent at all times. When possible, the child should attend a babysitting class prior to doing any babysitting.

Sleepovers

There will be times when children in foster care will want to participate in overnight sleepovers with friends and attend formal group outings such as church, music, sporting, or YMCA camps. It is natural for a child to want to participate in these types of activities and should be allowed for normal development. It is important to know where the child will be at all times and notify the FSS of any overnight plans. Rule of Thumb - If the foster parent would allow their child the opportunity, children in foster care should be allowed those same opportunities.

Checking and Savings Accounts

A bank account is an appropriate way for a young person to gain skill in both banking and responsibility. The account belongs to the child and should always be in the child's legal name. The child, foster parents, Community Resource Person (CRP), and FSS will be involved in financial planning with the child.

Joining the Armed Forces

Children in foster care must have the consent of their parents and CPS to enlist in the armed forces. If this is a potential plan for the child, the child along with the birth parents, foster parents, and the FSS will discuss the plan and work with the recruiter to learn about the eligibility requirements.

Driving and Owning a Car

Obtaining a driver's license is a part of growing up. Children in foster care who wish to drive must take Driver's Education. Topics for discussion between the foster parents, the youth and the FSS include maturity, responsibility, grades of the youth, insurance, what vehicle will they drive, vehicle maintenance, cell phone/texting while driving, etc.

The parent should be the first resource to consider assuming responsibility and providing insurance coverage for the youth. In some cases the foster parent may choose responsibility and provide insurance coverage. If the foster parent chooses to allow the child to drive a vehicle, the foster parent must ensure the child is covered. It is important to note if a foster parent signs for the child, they are assuming responsibility for the minor's actions as a driver. In all cases, the FSS should be consulted when a child has an interest in driving.

Hair Care

A child's appearance is important to them and their birth family. Permission to cut a child's hair, give them a perm, color their hair, etc. must be given by the parent through the FSS.

Lice

Head lice are most common among children 3 to 11 years old. Lice are most often found on children attending child care, preschool, and elementary school. The Centers for Disease Control and Prevention has estimated that up to 12 million children in the United States aged 3 to 12 are infested with lice every year. For information on lice prevention and treatment talk with your FSS or LS.

Piercing and Tattooing

CPS allows ear piercing with parental consent. However, CPS does not allow other parts of the body to be pierced or tattooed while a child is in custody.

Confidentiality and Right to Privacy

Foster parents are expected to maintain confidentiality of information regarding a child in foster care and the child's family. Details of a child's life or of their family may not be shared with unauthorized individuals.

Guidelines to follow when discussing case information:

1. Does the person need to know?
2. Has the FSS authorized me to talk with this individual about the case information?
3. Has the individual talked with the FSS about the requested information? Even if they have, the FSS must give permission to release or confirm the information.

For additional information, see **ARSD 67:42:01:22. Confidentiality**.

News Media

Permission from the FSS is needed before a child in foster care can be involved in any newspaper articles, photographs for the press, television or radio programs, or websites that would identify the child as a child in foster care.

Social Media

Children in foster care may not be photographed and/or identified as a child in foster care in any type of public media for any purpose, unless the parent and CPS have given permission.

Social networking is a way for individuals to share their interests and/or activities with others. This may include, but is not limited to: Instagram, Snapchat, Facebook, X, etc. Children in foster care will be interested in using the internet for a variety of purposes, including social networking. The child, under the supervision of the foster parents, is permitted to utilize these types of sites.

Foster parents and children in foster care need to be aware information posted or shared with others on the internet is not private. Even when using privacy settings, other people can view this information which is why it is essential not to post or share personal information online.

Foster parents are allowed to post photographs of children in foster care as a part of the family in photos, but not identified as children in foster care. Foster parents are expected to keep information confidential about children in their care. A child in foster care is not to be categorized as a "foster child," and the child's history and the foster parent's feelings regarding the child's history are not to be discussed with others or on social networking sites, etc.

Children entering care and their foster parents will sign the Internet Usage Agreement for Youth in Care and Foster Parents when children are age appropriate. (See Form Section – Internet Usage Agreement for Youth in Care and Foster Parents).

Cell Phones

Children in foster care, who entered foster care with a cell phone, might be allowed to keep their phone. The child's parents must agree to the child keeping the phone and to pay the cell phone bill. However, guidelines for cell phone usage will be discussed with the child, birth parents, foster parents, and the FSS. If a foster parent would like to purchase a cell phone for the child in their home, please discuss with the FSS.

Foster Parent Reimbursement Rates

The type of care being provided (emergency, basic, specialized) and the rate of reimbursement is located on the child placement agreement. If foster parents have misplaced their child placement agreement, they must contact their assigned FSS to receive another copy. Current foster parent reimbursement rates can be obtained from your Licensing Specialist. Clothing and incidentals are included in the monthly reimbursement and are not a separate reimbursement outside of the monthly rate. Incidental payments will be used to provide basic needs to the child, including hygiene items, diapers, formula, food, over the counter medication, etc. If there are additional basic needs that exceed the monthly reimbursement, the foster parent must discuss these needs with their FSS.

How to Obtain Reimbursement

Foster parents submit a Request for Payment (522) at the end of each month. Information to complete the Request for Payment (522) is available on the child placement agreement. The FSS will assist the foster parents when completing the Request for Payment (522) to ensure the information is correct to prevent reimbursement delays. Foster parents are reimbursed for the first day of placement but not the last.

Service Codes for use on the Request for Payment:

Foster Parent Day Care	08-004	Specialized Foster Care	08-009
Special Purchases	08-030	Non-Medical Transportation	09-008
Basic Foster Care	08-007	Emergency Foster Care	08-01
Clothing	08-032	In Town Medical Transportation	09-007

If a foster parent is requesting reimbursement for transportation, clothing, daycare, or a special purchase, they MUST obtain approval from the FSS PRIOR to making the purchase.

Transportation Claims

Reimbursement for transportation of a child in foster care (09-008) is available. Examples of reimbursable transportation costs, include taking a child in foster care to school, attending meetings regarding the child, transportation to respite care, transportation to family time including meals and mileage, and transportation to sport practices or community clubs. If multiple children in foster care are being transported, the trip can only be claimed for one child. If foster parents are transporting a child not in foster care to one of these locations, they cannot claim mileage. Foster parents cannot claim mileage twice if two different children are going to the same location. When determining if a trip will qualify for reimbursement, the foster parents must discuss the trip with the FSS, prior to the trip occurring. The foster parent may be eligible for reimbursement of transportation costs if the foster parent is unable to transport the children and seeks transportation assistance from a bus service, family, friend, or another foster parent. The foster parent must complete a Foster Parent Mileage Form for reimbursement and attach to the Request for Payment (522).

Provider Mileage Form: dss.sd.gov/formsandpubs/docs/CPS/ProviderMileageRequest.pdf

Medical Transportation

Reimbursement for transportation of a child in foster care to appointments or services covered by Medicaid is available. If the child is attending a service covered by Medicaid within the same zip code, the foster parents should request reimbursement by completing the Provider Mileage Form (09-007) and attach to the Request for Payment (522).

Transportation to appointments or services covered by Medicaid not in the same zip code, are eligible for reimbursement through the Medicaid NEMT Program. The foster parent must follow the guidelines set by the program. For more information visit: dss.sd.gov/medicaid/recipients/title19transportation.aspx. The foster parent must submit the Medical Travel Reimbursement Form to DSS Finance/EBT.

Non-emergency Medical Travel (NEMT) Reimbursement Form: dss.sd.gov/formsandpubs/docs/MEDSRVCS/DSS-OS-950.pdf

Clothing Costs and Incidentals



Foster parents may be provided a clothing voucher or clothing reimbursement (08-032) when a child in foster care is initially placed in their home and does not have sufficient clothing. The foster parent must provide a receipt along with their Request for Payment (522) to receive reimbursement. Subsequent clothing costs are included in the foster parent monthly reimbursement. Additional clothing vouchers or reimbursement may be requested when clothing needs exceed the monthly clothing reimbursement. Foster parents should keep a record of clothing purchases. If a foster parent has additional clothing needs for a child in foster care, they should contact the FSS to discuss.

Childcare Assistance and Foster Parent Day Care Assistance

Childcare assistance may be available to foster parents who are working and/or attending school (excludes graduate school) from the Division of Child Care Assistance. Income is not considered for foster parents. Foster parents should apply for this assistance by using the Foster Care Child Care Application. If short-term childcare for less than 60 days is needed, foster parents should contact their FSS and ask about the childcare assistance coupon. The application can be obtained from a FSS or found at apps.sd.gov/ss45/FosterCareAssistance.aspx.

Foster parents can use Foster Parent Daycare (08-004) if they seek prior approval from their FSS until childcare assistance is approved by the Division of Child Care Assistance, or for a circumstance not meeting the requirements of the Division of Child Care Assistance. For example, a stay-at-home foster parent may need foster parent day care assistance for a child in foster care while they take another child to a medical appointment. Foster parent daycare assistance may also be utilized if a licensed daycare is not available in the community of the foster parent or if special circumstances require the foster parent not to use an available licensed provider. Foster parent daycare may also be approved for a self-employed foster parent who provides daycare in their home.

The foster parent should consider an in-home, informal, or relative childcare provider if a licensed provider is not available. . Please seek prior approval from the FSS for these types of providers. An informal care provider is a friend or neighbor who provides care only for the children of one family. An in-home provider provides care in the foster family's home and cares only for the children of that foster family. A relative provider must be an aunt/uncle, grandparent, or great grandparent and can reside in the child's home. A sibling of the child

may also provide care but must maintain a separate residence. Please discuss childcare barriers with the FSS if a licensed, in-home, informal, or relative childcare provider is not available.

The Division of Child Care Assistance has a set county rate for childcare providers. Foster parent daycare will be reimbursed at the same county rate unless a higher rate is approved by the Department. Licensed, relative, in-home, or informal childcare must be ruled out before foster parent daycare assistance can be utilized. The Department can provide a foster parent daycare payment directly to the business/ daycare or reimburse the foster parent. Both will require a receipt and/or invoice from the daycare regarding the cost of services. If the Department provides payment directly to a business/daycare or if a foster parent provides childcare through their self-employed business, a W-9 is required for that business. The reimbursement rates and other information for licensed, in-home, informal, and relative care providers can be located at: dss.sd.gov/childcare/childcareassistance/.

Foster Care Child Care Application: https://apps.sd.gov/ss45/FosterCareAssistance.aspx

Special Purchases

Special purchases (08-030) can be requested when a child has a special need that exceeds the monthly reimbursement for incidentals. These special needs may assist in meeting the child's medical, educational, mental health, cultural, family, permanency, and/ or social needs. Examples of special purchases include chrome book or laptop insurance, calculators, specialized hair care products, lice kits, camps, music lessons, contacts, sensory items, etc. Special purchases MUST have prior approval from the child's FSS. If special needs arise, reach out to your FSS to discuss these reimbursements prior to purchase or agreeing to the services. The foster parent should seek multiple sources of assistance to meet the child's needs before requesting additional funding from their FSS (examples include local foster parent associations, car seat distribution programs, women, children, and infant programs, foster-friendly businesses, community referral programs, etc.). It may be necessary for a foster parent to obtain multiple estimates or bids regarding a special purchase. These estimates must be shared with the FSS to assist in choosing what services are best for the child and what services can be reimbursed. The foster parent must provide a receipt along with their Request for Payment (522) to receive reimbursement. Purchases without prior approval may not be reimbursed so it is important to talk with the FSS.

Intentional Damage to Property

Reimbursement for intentional damage to property caused by a child in foster care may be available to foster parents. If damage to your home, vehicle, or personal items, as a result of an incident involving the child, the foster parent must discuss this incident with the FSS. The foster parent may be asked to obtain compensation from any home, rental, or auto insurance coverage first. The foster parent should obtain at least two estimates from competing businesses for the estimated repair and should not agree to any repair or replacement prior to discussing reimbursement with the family services specialist. The family services specialist will provide guidance regarding how to obtain reimbursement if approved by the Department.

Tax Information

If foster parents have questions regarding claiming a child as a dependent or the tax implications of being a foster parent, they should contact a tax expert. If a foster parent provided foster parent daycare they will receive a 1099 as this is considered taxable income.

Reasons a Child May Move from a Foster Home

- Health and safety issues
- Foster parent request
- Child requires a higher level of care
- Reuniting siblings
- Foster home closing
- CPS decision
- Permanent plan achieved
    - Tribal transfer
    - Reunification
    - Placement with a fit and willing relative
    - Guardianship
    - Adoption
    - Transition to adulthood

A move for a child from a foster home should be planned and provide for a smooth transition for the child. The FSS and the foster parent should work together on an appropriate plan related to the child's move. Advanced notice should be given for a request from a foster parent to move a child from the home, or the intent of CPS to move a child. Depending on the reason the child is moving, advanced notice may be limited.

Tribal Transfer

Under ICWA, a parent, an Indian custodian, or the Indian child's tribe may file a motion to transfer an abuse and neglect case from state court to tribal court. When a transfer motion is filed, the child's case may be transferred to the tribe and the child may move to a placement resource designated by the tribe.

Reunification

If a child is removed due to being unsafe in their home, the primary goal of CPS is to reunify the child with their family. When a child in the custody of CPS is able to return to their parent(s) safely, a trial reunification period will occur, not to exceed six months. When trial reunification is successful by the parent(s) demonstrating they are able to safely care for their child, the court will order physical and legal custody returned to the parent(s), and CPS will close the case.

Placement with a Fit and Willing Relative

If the goal of reunification, adoption, or guardianship is not appropriate for the child, the child may be placed with a relative with the expectation of staying in foster care until age 18 with an agreement made by the relative to care for the child. During the time a child is placed with a relative, they must continue to meet with their FSS, attend yearly permanency hearings, and the permanency plan must be reviewed every six months to determine whether a more permanent plan is possible for the child.

Guardianship

Guardianship of a child is a legal process by which children are permanently placed in the care and custody of a person other than their parents. When the court grants legal guardianship to an adult(s), CPS closes its case. The legal guardianship gives the guardian custody, care and supervision of the child until they turn 18 years of age. This means all decisions, including financial responsibility, is granted to the guardian. When a guardianship occurs, the guardian no longer needs approval from CPS for any purpose. The guardian is free to move out of state, travel, and make medical and educational decisions on behalf of the child. The guardian no longer needs to maintain connections with the birth parents, unless it is in the best interest of the child and/or the court orders it.

Receiving guardianship of a child doesn't guarantee the birth parent is out of the picture. Often parental rights are still intact. It may be in the child's best interest to maintain a relationship with the birth parent if the parent is positive and appropriate. The court may also order the child and birth parent to maintain a relationship. There are times when a relationship with the birth parent is not appropriate, and if the court has not ordered contact the guardian is able to make the decision to stop contact. A birth parent may seek to dissolve the guardianship and regain custody of their child. However, the birth parent must prove to the court they have stabilized their life, have improved their protective capacities, and can provide a safe environment for the child. The burden of proof is the responsibility of the birth parent.

Subsidized Guardianship

A subsidy can be negotiated with the FSS to assist the guardians in caring for the child. In cases where a subsidy is needed, arrangements can be made by visiting with the FSS. CPS considers a child's physical, medical, and emotional needs as well as the guardian's financial needs. There are different sources of funding available to support a guardianship which include TANF and OWN funds (SSI, VA, Survivor Benefits). The type of funding used depends on the type of placement and the child involved. When TANF and OWN funds are not an option, other financial arrangements can be made with the FSS.

Adoption

When reunification with the birth parents has been ruled out as a permanent plan and termination of parental rights has occurred, the child may be placed for adoption. There are a number of laws which factor into making an adoptive placement decision. They include:

- Indian Child Welfare Act (ICWA)

- Relative Preference Law
- Multi-Ethnic Placement Act
- Fostering Connections Act

CPS must follow the requirements set forth by these laws. It is CPS' policy that siblings will not be separated on a permanent basis. An adoptive home will be selected in which all siblings can live together. Placement of Native American children must follow the placement preference set forth in ICWA. Relatives of the child are also given placement preference.

Foster parents who are being considered for adoption must also have adoption approval which is part of the preservice training process. If criminal background checks are over 12 months old, new background checks will be required prior to adoptive placement.



Adoption Assistance

Adoption assistance may be available for a child being adopted from CPS. This assistance is based on the needs of the child. Possible assistance can include a maintenance subsidy, Medicaid coverage, and Non-Title XIX medical coverage. Adoption assistance is negotiated between CPS and the family on a case-by-case basis. An adoption assistance agreement is negotiated to the child's 18th birthday. If the child is still in school at the age of 18, there is a possibility the subsidy may be extended until the child turns 19 or completes high school, whichever comes first. All extensions need to be approved by the Adoption Program Specialist.

Transition to Adulthood

When a child turns 18 years old, they may leave the custody and care of CPS. In preparation for this, the child, foster family, Community Resource Person (CRP), and FSS have been working on a plan for the transition to live independently. If the child wants to stay with the foster family beyond 18 years of age to finish high school, a plan can be developed to assist with this.

Independent living skills planning is ongoing starting at age of 14 while the child is in care. These skills include:

- Daily living
- Self-care
- Relationships and communications
- Housing and money management

- Work and study life
- Career and education planning
- Looking forward

A starter kit is available to children 14 years of age and older moving into an independent living arrangement. Children can accumulate starter kit incentives while in CPS custody.

The Education and Training Voucher (ETV) Program provides funding to assist children in foster care with continued education and training after they graduate from high school or a GED equivalent. If eligible, a child could receive up to $5,000 a year to attend college or a vocational school.

Visit dss.sd.gov/childprotection/independentlivingprogram/ or contact the FSS for more information on youth transitioning to adulthood.

Children Leaving the Foster Family

The FSS will discuss with the foster parents the reasons why the child is moving from their home. It is best when a move can be planned, but there are times it's not possible due to a court ruling or an emergency situation. It is important for the foster parents to understand the reason for the move so they are prepared to talk to the child about the upcoming move. Foster parents also will need to discuss the move with their family and begin to deal with their feelings. These times can be emotional for the foster family, and it is important to keep in mind separation is difficult, not just for the child, but also for them.

The foster parents and FSS will discuss how best to tell the child about leaving the foster home. When telling a child about moving from the foster home, a calm and simple statement in language the child can understand is best. The child may have a number of reactions to the upcoming move; therefore it is important to talk with the child about their feelings and answer their questions. The FSS will also be available to talk with the child.

It is best for the child when the FSS, foster parents, and child, if age appropriate, develop a transition plan regarding the child's move. The transition may include preplacement visits, time frames for the transition plan, and sharing information with the birth family or new placement resource. It is beneficial when a foster parent writes a note to the next resource placement including the structure and routine of the child. Things to include in the note may be the child's likes, dislikes, favorite meals, sleeping and eating routines, over the counter medications or health tips, etc. There may be times when it is not possible to complete a transition plan due to a court decision or an emergency situation.

If the foster parent has concerns about where the child is going, the FSS and the foster parent should arrange time to discuss the concerns. It is important for the child's successful transition for these concerns to be addressed. The child should not be a part of this discussion.

It is important for the child to take their belongings with them when they move. It is important to send along the child's favorite blanket, toys, stuffed animal, or items with significant meaning to them to make the transition easier for the child.

If the child has been in a foster home for any length of time, there should have been a life book compiled. The life book should be sent with the child, and any other photos or mementos that would be appropriate to send with them. If the child needs a suitcase for the

move, the foster parents should contact the FSS to arrange for one.

All efforts should be made to provide an opportunity for the child to say good-bye to their foster family, child care providers, teachers, friends, and others the child has developed relationships with. A child in foster care has experienced trauma through separation and loss, so it is critical to their well-being to assure the move is as least traumatic as possible.

The Child's Medicaid card must be given to the FSS.

Resource Complaints and Investigations

One of the most difficult times for foster parents, CPS and OLA staff is when allegations of child abuse or neglect are made which result in an investigation of the foster parent. Because they may be involved as part of the investigative team, and in order to assure the integrity of the investigation, the ability of the OLA staff to provide personal support to the foster parents at the time of the investigation may be limited.

Report to Child Protection Services

When CPS receives a report regarding a foster parent, it may be assigned as a resource complaint or investigation. The primary difference between an investigation and a resource complaint is an investigation involves abuse and/or neglect concerns. DSS policy states that all children in foster care in the home must be moved pending the investigation.

All concerns reported are shared with the foster parents. A Licensing Specialist may be limited on the details of the report they can share, based on the extent of the allegations and if law enforcement is involved.

Resource Complaint

A resource complaint pertains to compliance with a licensing rule and does not contain abuse and/or neglect concerns. Resource complaints are handled by the Licensing Specialist and may involve concerns about confidentiality, inappropriate discipline, use of car seats, or environmental factors (e.g. having a fence around a pool). OLA will work with the foster family to address the concerns and may ask the foster parent to cooperate with a Professional Development Plan. A Professional Development Plan is a method of deciding how to correct the areas of noncompliance. The plan may be very simple and take a short amount of time to make the correction. Continued non-compliance of licensing rules may lead to the revocation of a foster parent's license to provide foster care and/or approval for adoption depending on the seriousness of the issues of non-compliance.

Investigation of Abuse and Neglect in a Foster Home

During an investigation, the foster parent's license and/or adoption approval is suspended. Children placed in the foster home will be placed in another home while the investigation occurs. Moving the children to a temporary home ensures there are not additional concerns reported while the validity of the concern is investigated. The foster parent can expect to have each of their household members interviewed during the investigation. Investigations can be assigned to a contract investigator, FSS, or law enforcement. Law

enforcement is involved in cases where a law has allegedly been broken and will typically lead these investigations. It is more likely an investigation is completed by a FSS or a contract investigator.

The outcome of CPS investigations can be substantiated or unsubstantiated. Substantiated investigations will result in the revocation of the foster parent's license to provide foster care and/or approval for adoption. Following the investigation, a letter is sent to the foster parent describing the investigation's outcome. In substantiated cases, the foster parent is advised of their due process rights, and how to request a fair hearing if the foster parent feels the action is unjustified.

In some cases, an unsubstantiated investigation may also lead to findings of noncompliance with licensing standards. When noncompliance exists, OLA will determine if the noncompliance can be corrected with a Professional Development Plan while children remain in the home; with a Professional Development Plan during a period of license suspension; or if revocation will be pursued. This decision is shared with the foster parent, and they are involved in the establishment of any plan of correction.

Grievance Procedure

There are multiple CPS staff available to assist foster parents when they have an issue which has not been resolved. If a foster parent has discussed an issue with the FSS and cannot resolve the issue, they can call the FSS' supervisor. If the supervisor cannot resolve the issue, the foster parent can call the Regional Manager. If the foster parent does not know who the supervisor or Regional Manager is, they can call their local office and ask for their number or call/email their Licensing Specialist for assistance. If a concern cannot be resolved by the local CPS office, foster parents can call the state office at 605.773.3227. If their concern is not regarding a child placed in their home and due to other licensing needs the foster parent should contact their Licensing Specialist, Licensing Supervisor or Program Manager. See attached contact sheet for names and contact information.

Legal Process

Definition of Abuse or Neglect

SDCL 26-8A-2 defines an abused or neglected child as a child:

1. Whose parent, guardian, or custodian has abandoned the child or has subjected the child to mistreatment or abuse;
2. Who lacks proper parental care through the actions or omissions of the parent, guardian, or custodian;
3. Whose environment is injurious to the child's welfare;
4. Whose parent, guardian, or custodian fails or refuses to provide proper or necessary subsistence, supervision, education, medical care, or any other care necessary for the child's health, guidance, or well-being;
5. Who is homeless, without proper care, or not domiciled with the parent, guardian, or custodian through no fault of the parent, guardian, or custodian;
6. Who is threatened with substantial harm;

7. Who has sustained emotional harm or mental injury as indicated by an injury to the child's intellectual or psychological capacity evidenced by an observable and substantial impairment in the child's ability to function within the child's normal range of performance and behavior, with due regard to the child's culture;
8. Who is subject to sexual abuse, sexual molestation, or sexual exploitation by the child's parent, guardian, or custodian, or any other person responsible for the child's care;
9. Who was subject to prenatal exposure to abusive use of alcohol, marijuana, or any controlled drug or substance not lawfully prescribed by a practitioner i.e., without a valid prescription; or
10. Whose parent, guardian, or custodian knowingly exposes the child to an environment being used for the manufacture, use or distribution of methamphetamines or any other unlawfully manufactured controlled drug or substance.

South Dakota Mandated Reporters

All states designate certain professionals as mandated reporters. These individuals are required by law to report to CPS or law enforcement if they know or have reasonable cause to suspect a child has been abused or neglected. Foster parents are considered mandated reporters.

26-8A-3 Any physician, dentist, doctor of osteopathy, chiropractor, optometrist, mental health professional or counselor, podiatrist, psychologist, religious healing practitioner, social worker, hospital intern or resident, parole or court services officer, law enforcement officer, teacher, school counselor, school official, nurse, licensed or registered child welfare provider, employee or volunteer of a domestic abuse shelter, employee or volunteer of a child advocacy organization or child welfare service provider, chemical dependency counselor, coroner, or any safety-sensitive position as defined in subdivision 23-3-64(2), who has reasonable cause to suspect a child under the age of 18 has been abused or neglected as defined in § 26-8A-2 shall report this information in accordance with §§ 26-8A-6, 26-8A-7, and 26-8A-8. Any person who intentionally fails to make the required report is guilty of a Class 1 misdemeanor. Any person who knows or has reason to suspect a child has been abused or neglected as defined in § 26-8A-2 may report this information as provided in § 26-8A-8.

State and Tribal Court Proceedings

Proceedings in state court are subject to state statutes while proceedings in tribal courts are subject to the tribal code of the specific tribe, rather than state statutes. As a result, differences may exist between state court and tribal court proceedings and if foster parents have questions about court proceedings, visit with the FSS.

The following information relates to state court proceedings; however, many of the hearing types are also found in tribal court proceedings.

Attorneys in Abuse and Neglect Court Proceedings

Parents, guardians, or custodians of a child involved in an abuse and neglect court proceeding have the right to be represented by an attorney and may request the court appoint an attorney, if they cannot afford to employ their own. In addition, the court may

appoint an attorney for any party to the case without a request by the party if the court determines representation by an attorney is necessary to protect the interests of the party. SDCL 26-7A-31. The court shall appoint an attorney for any child alleged to be abused or neglected, i.e., who is the subject of an A&N petition. The attorney's fees and costs related to the court proceeding are initially paid by the county in which the case is filed, but the county may pursue repayment from the parents, including placing a lien on real and personal property of the parents.

Court Appointed Special Advocate (CASA)

If a child has been removed from their home and adjudicated as abused or neglected, the court may appoint a guardian ad litem (GAL) or a CASA to assist the child's attorney and to represent the best interests of the child. SDCL 26-8A-20. However, CASA and GAL are not present in all areas of the state. The court may appoint a GAL or CASA earlier in the case, when the abuse and neglect petition is filed, but is not required to do so. SDCL 26-8A-18. The GAL or CASA should be provided with all reports concerning the child and should be informed of all hearings regarding the child. In addition, the CASA should be allowed to contact the child(ren), the parents, and the foster parents or relative caregivers for the child(ren).

Notice to Placement Resources of Hearings and Permanency Planning Review Team Meetings (PPRT)

Under the Adoption and Safe Families Act, kinship providers, foster parents, and pre-adoptive parents have a right to notice and an opportunity to be heard at hearings regarding the child placed in their home. The federal regulations require these placement resources receive timely notice of permanency hearings and six-month reviews and are entitled to notice and to submit written input to the court. The FSS will provide written or verbal notice to the foster parents, if time permits, of the upcoming hearing or permanency planning review team meeting (PPRT). The foster parent must also be informed they may provide a written statement or report to the court and, in some cases, a verbal presentation to the court depending on the judge handling the case. The FSS will discuss with the States Attorney any request by the foster parent to attend a hearing or to make a verbal statement to the court.

Levels of Proof

The level of proof required for a determination by the court means the amount or weight of the evidence the party who bears the burden of proof must show. Beginning with the highest level of proof, or most evidence, the following is a list of the levels of proof, in descending order, along with examples of determinations involving each level:

- Beyond a reasonable doubt
  - Required for termination of parental rights in ICWA cases
- Clear and convincing evidence
  - Required for adjudication of a child as abused or neglected in both ICWA and non-ICWA cases

    - Required for termination of parental rights in non-ICWA cases
- Preponderance of the evidence or "greater convincing force of the evidence"
    - Required to substantiate a report of abuse or neglect (as a result of an Initial Family Assessment)
- Probable cause
    - Required for the court to continue temporary custody (i.e., probable cause the child has been abused or neglected)
- Reasonable suspicion
    - Required for law enforcement to take a child into protective custody and for reporting by a mandatory reporter

Reasonable Efforts

SDCL 26-8A-21 requires CPS make reasonable efforts, active efforts for ICWA cases, prior to the removal of a child from the home of the child's parent, guardian, or custodian to prevent or eliminate the need for removal of the child. Further, if the child has been removed from the home and placed in temporary custody of CPS, the department must make reasonable/active efforts to make it possible for the child to return to the home of the child's parent, guardian, or custodian. CPS must continue to make reasonable/active efforts until the court enters an order stating reasonable efforts are not required.

Steps in an Abuse and Neglect Court Proceeding

Emergency/Protective Custody

Under certain emergency circumstances, a law enforcement officer may take a child into protective or emergency custody without obtaining prior court approval to do so. According to SDCL 26-7A-12, a law enforcement officer may take temporary custody of a child without a court order when the officer reasonably believes the following:

1. The child is abandoned or seriously endangered in the child's surroundings, or is seriously endangering others and immediate removal appears to be necessary.
2. The child is a runaway
3. There is an imminent danger to the child's life or safety and there is not time to apply for a court order, the child's parents, guardian, or custodian refuse to consent to the child's removal from their custody, or the child's parents, guardian, or custodian are unavailable.
4. The child is under the influence of alcohol, inhalants, or a controlled drug or substance.

The law enforcement officer may seek input from the FSS as to whether to remove the child. However, the decision whether to do so or whether to enter a residence without the consent of an adult must be made by the law enforcement officer.

Intake Hearing

SDCL 26-7A-13.1 requires a law enforcement officer who has taken a child into emergency protective custody to immediately contact an intake officer (a judge, magistrate or other designated individual) who shall then determine whether or not temporary custody of the child may continue with CPS. No notice of the hearing is required to be given to the parents. The hearing is closed and informal and may be telephonic. If temporary custody is continued, the intake officer should issue a Temporary Custody Directive.

48-Hour/Temporary Custody Hearing

If the child remains in custody after the intake hearing, a hearing must be held within 48 hours (excluding weekends and holidays) after the child has been taken into custody. In addition, the States Attorney must file a temporary custody petition or an abuse and neglect petition. The purpose of the hearing is for the court to determine whether continued temporary custody outside of the home is necessary to protect the child. The States Attorney will notify the parent of the hearing, and if there is reason to believe the child is an Indian child, as defined by ICWA, CPS and/or the States Attorney should inform the child's Indian tribe and Indian custodian. The court will determine if the child remains in the temporary custody of CPS, or if custody will be terminated and the child returned to their parent.

Advisory Hearings

The court should, as soon as possible, conduct an advisory hearing (for whoever is present), during which the court will explain: the rights of the parties (the right of the parents/child/Indian custodian to counsel, the right to confront the witnesses and to cross-examine them, and, if a crime is suspected, the right to remain silent), the nature of the proceedings and the allegations of the petition, and all the possible dispositions of the case. SDCL 26-7A-54.

The parents can admit or deny the petition. If the parent admits to the petition and the court finds the facts admitted constitute abuse and neglect, the court should enter findings and conclusions and an order adjudicating the child as abused or neglected. However, if a party denies the petition, the court should schedule an adjudicatory hearing. SDCL 26-7A-55.

Status Hearings

Prior to the adjudicatory hearing, one or more status hearings may be held. The purpose of the hearing is to address any issues related to the adjudicatory hearing and to schedule the adjudicatory hearing.

Adjudicatory Hearings

Adjudication is the process by which the court determines whether or not a child is an abused or neglected child as defined by SDCL 26-8A-2. If the child is determined to be an abused or neglected child, the court can continue to exercise jurisdiction over the child and the parents. If not, the case is dismissed. The parent may appeal the adjudicatory order to the Supreme Court of South Dakota. However, the parent must do so within 10 days of service of the notice of entry of adjudicatory order.

The court may grant a continuance of an adjudicatory hearing if the parents were not properly notified, or for other reasons deemed appropriate by the court. When a continuance is permitted, the court should formally provide for the child's continued temporary custody by means of an order for continued temporary custody. The court should not continue the adjudicatory hearing for longer than 60 days absent a further review/status hearing where the court reviews the child's temporary custody placement. See SDCL 26-7A-19.

Dispositional/Review Hearings

Disposition is the phase of the proceedings where the court determines what will happen to a child in terms of the child's placement and care. Once a child is adjudged abused and neglected, the court will hold an initial dispositional hearing to determine the appropriate disposition for the child. If all parties agree, the court may proceed immediately with the initial dispositional hearing after the adjudication. During the hearing, the court will make arrangements for the care of the child and will implement a plan to resolve the problems necessitating removal from the home. Following adjudication, an administrative review meeting or hearing shall be held no less than every six months so long as the child continues in the legal custody of CPS. However, if necessary to protect the interests of the child, the department may request the States Attorney schedule a review hearing earlier than six months.

During a review/dispositional hearing, the court should assess whether:

- There is a need for a continued out-of-home placement of the child.
- Efforts have been made to place the child with relatives or, if ICWA applies, other preferred placements under ICWA (see ICWA section).
- The rights of all parents have been addressed; including whether paternity has been established.
- The permanent plan remains the best plan in the child's best interests.
- The services and responsibilities outlined in the case plan need to be modified or clarified.

Permanency Planning Reviews

When CPS is awarded custody or placement and care of a child, a permanency planning review of the case is required every six months, and can occur through a court hearing or a formal meeting where the progress of the case and plan for permanency of a child is reviewed. A permanency planning review meeting requires a panel of appropriate persons including the foster parents. Any dispositional recommendations resulting from the review shall be included in the report to the court.

Permanency Hearings

Permanency hearings must be held within 12 months of when the child entered foster care, and every 12 months thereafter so long as the child continues in the custody of CPS. If the court ordered no-reasonable efforts, the court must hold a permanency hearing within 30 days of a no-reasonable efforts ruling under ASFA/SDCL 26-8A-21.

A Permanency Hearing shall determine:

- A permanency plan for the child which includes whether the child will be returned to the parent or placed for adoption and a petition will be filed for termination of parental rights or referred to legal guardianship or placed in another planned permanent living arrangement (APPLA) if the child is 16 years of age or older.
- In the case of a child who has attained age 16, the services needed to assist the child to make the transition from foster care to independent living.
- In any permanency hearing procedural safeguards shall be applied to assure the court conducting the hearing consults, in an age-appropriate manner, with the child regarding the proposed permanency or transition plan for the child, and whether CPS has made reasonable efforts to achieve the permanent plan for the child.

Dispositional Hearings

During the final dispositional hearing, the court determines whether to order the dispositional alternative for placement and care of the child recommended by CPS or whether, instead, the child will be placed in another alternative disposition. The dispositional alternatives include:

- Return to the parent or guardian
- Placement with a fit and willing relative
- Placement in a legal guardianship
- Termination of parental rights
- After determining a compelling reason exists for the same, placement in another planned permanent living arrangement (APPLA) if the child is age 16 or older

The FSS must request the States Attorney to file a petition to terminate parental rights when a child has been in foster care for 15 of the most recent 22 months.

If the child has not been returned to the home, the court must make a determination reasonable efforts have been made to return the child to the home, and the child cannot be returned to the home because it would be contrary to the welfare of the child. Further, regardless which alternative is selected, the court must determine the alternative is the least restrictive alternative available in the best interests of the child.

Termination of Parental Rights

In order to terminate parental rights to a child, the court must make a judicial determination:

- Reasonable/active efforts have been made to rehabilitate the family.
- The conditions which led to the removal of the child, or which prevent return of the child to the home, still exist.
- There is little likelihood the conditions will be remedied so the child can be returned.
- Termination of parental rights is the least restrictive alternative available in the best interests of the child.
- The parent(s) have abandoned the child for at least six months, and during this period the parent(s) have not manifested a firm intent to resume physical custody of the child and to make suitable arrangements for the care of the child.

The state must prove, and the court must find the above findings by clear and convincing evidence, except in cases subject to ICWA, where such findings required by ICWA, should be proven and made by evidence beyond a reasonable doubt.

Permanent Custody
When CPS is awarded permanent custody, the guardianship of the child is transferred to the department. This action makes CPS responsible for the child until the age of majority. Under SDCL 26-8A-27, if the court terminates the parental rights of both parents or of a surviving parent, the court must grant CPS with custody and guardianship of the child for purposes of placing the child for adoption, and must authorize CPS to consent to the adoption of the child without any further notice to, or consent of, the parent. This is commonly referred to "adoptive custody" of the child.

Permanent custody may also be awarded to CPS by a court action upon a parent's Petition for Voluntary Termination of Parental Rights. In most cases this action includes guardianship and authority for adoptive placement.

Notice of Entry of Order/Judgment
The Notice of Entry of Order/Judgment is a written notice to the parents an order has been filed with the Clerk of Courts. If a party has an attorney, the Notice of Entry should be mailed to the attorney along with a copy of the respective order. It is the attorney's responsibility to notify their client. If a tribe has intervened, the tribal representative or attorney should also be served with the Notice of Entry by mail.

The date of service of the Notice of Entry starts the time period for filing an appeal with the South Dakota Supreme Court. Appeals from final dispositional orders, including orders terminating parental rights, must be filed within 30 days of completed service of the notice of entry.

Notification of Supreme Court Appeals
Any party to an abuse and neglect case may appeal an order to the South Dakota Supreme Court. If the appeal is from an order prior to the final dispositional order, it is an intermediate appeal for which the Supreme Court must grant permission. Once an appeal is filed, the Supreme Court has jurisdiction over the case, and the authority of the circuit court is limited to emergency matters and issues which do not affect the order on appeal. If an order terminating parental rights is appealed to the South Dakota Supreme Court, CPS cannot proceed with an adoption until the appeal is concluded. All such appeals are handled by the DSS Division of Legal Services.

Termination of Custody and/or Supervision
Typically, when a child is returned to their parents, relatives, or guardian, the court requires CPS to provide supervision for a time period. A request to terminate custody and supervision may be made to the court if:

- The placement has been successful for at least three to six months.
- The FSS has had regular visits in the home with the child and the parents.
- CPS involvement does not appear necessary.
- A child turns 18 years old and no longer requests services.

General Guardianship
General guardianship is a legal process by which a child may be placed in the care and custody of a person other than the child's parent(s). The child remains in the guardianship

until the age of 18 unless a subsequent court order terminates the guardianship.

Duties of a Child's Attorney

- The attorney for the child shall represent the child's best interests and may not be the attorney for any other party involved in the judicial proceedings – SDCL 26-8A-18.
- The court may designate other persons, including a guardian ad litem (GAL) or court appointed special advocate (CASA), who may or may not be attorneys licensed to practice law, to assist the attorney of the child in the performance of the attorney's duties – SDCL 26-8A-18.
- The GAL or CASA shall receive all reports concerning the child and may cause the case to be reviewed by the court pursuant to § 26-8A-24 – SDCL 26-8A-20.
    - CASA typically has even more authority than the child's attorney in that they have a court order requiring both parents to cooperate with him or her, allows this person to interview anyone, and often has the ability to gather more evidence due to the child's attorney ethical obligations as a licensed attorney.
    - Both are officers of the court and owe a duty of candor to the judge.
- Attorney Ethics
    - Attorney cannot speak to someone who is represented by counsel without permission of the attorney in advance.
    - Attorney has the duty to disclose any non-confidential and non-work product evidence through discovery requests/orders.

The Indian Child Welfare Act (ICWA)

Why ICWA was Passed

ICWA is a federal law passed in 1978. It was passed in response to the alarmingly high number of Indian children being separated from their families by both public and private agencies. The intent of Congress under ICWA was to protect the best interests of Indian children, and to promote the stability and security of Indian tribes and families (25U.S.C.-1902). ICWA sets federal requirements which apply to state child custody proceedings involving an Indian child who is a member of or eligible for membership in a federally recognized tribe.

Children Covered by ICWA

Indian children involved in state child custody proceedings are covered by ICWA. A person may define his or her identity as Indian but in order for ICWA to apply, the involved child must be an "Indian child" as defined by the law. ICWA defines an "Indian child" as "any unmarried person who is under age 18 and is either (a) a member of an Indian tribe or (b) is eligible for membership in an Indian tribe and is the biological child of a member of an Indian tribe" (25 U.S.C.-1903). Under federal law, individual tribes have the right to determine eligibility, membership, or both. However, in order for ICWA to apply, the child must be a member of, or eligible for membership, in a federally recognized tribe. ICWA does not apply to divorce proceedings, intra-family disputes, juvenile delinquency proceedings, or cases

under tribal court jurisdiction.

ICWA Placement Preference for Foster Care and Pre-Adoptive

If there is reason to believe a child may be affiliated with a tribe, CPS should assume the child is an Indian child for purposes of exploring potential placements for the child and make efforts to locate a placement within ICWA preference provisions. The order for foster care or pre-adoptive homes is as follows:

1. A member of the child's extended family (Indian or non-Indian)
2. A foster home licensed, approved, or specified by the Indian child's tribe
3. An Indian foster home licensed or approved by an authorized non-Indian licensing authority
4. An institution for children approved by an Indian tribe or operated by an Indian organization with a program suitable to meet the child's needs

However, the child must be placed in the least restrictive setting which most approximates a family and in which their special needs, if any, can be met. The child shall also be placed within a reasonable proximity of his or her home, taking into account any special needs of the child.

ICWA Placement Preference for Adoption

Unless the court has determined good cause exists not to follow the order of preference, CPS must observe the order of placement preference in the ICWA. The order of placement preference for an adoptive placement is:

1. A member of the child's extended family (Indian or non-Indian)
2. Other members of the Indian child's tribe
3. Other Indian families

Considerations in ICWA Cases

FSSs must make several considerations when handling an ICWA case, including:

- Providing active efforts to the family
- Identifying a placement to fit under ICWA preference provisions
- Notifying the child's tribe and the child's parents of the child custody proceeding
- Working actively to involve the child's tribe and the child's parents in the proceedings

Multiethnic Placement Act (MEPA)

MEPA was enacted in 1994 and amended in 1996 by the Interethnic Adoption Provisions. The Act has three basic mandates:

1. It prohibits states from delaying or denying a child's foster care or adoptive placement on the basis of the race, color, or national origin of the child or the prospective foster/adoptive parent.
2. It prohibits states from denying any person the opportunity to become a foster or

adoptive parent on the basis of race, color, or national origin, of the person or of the child.

3. It requires states to diligently recruit foster and adoptive parents who reflect the racial and ethnic diversity of the children in the state who need foster or adoptive homes.

However, MEPA does not apply if the child is an Indian child as defined by ICWA. Instead, CPS must follow the placement preferences of ICWA, unless good cause is shown.

The placement preference in ICWA must be followed and remains:

- A member of the Indian child's extended family
- A foster home licensed, approved, or specified by the Indian child's tribe
- An Indian foster home licensed or approved by an authorized non-Indian licensing authority
- An institution for children approved by an Indian tribe or operated by an Indian organization which has a program suitable to meet the Indian child's needs

Tips/Ideas/Advice from Foster Parents

- Breathe
- It is always OK to ask for help!
- Don't be afraid to ask for details about the placement. It's better to know up front so you can better evaluate if the placement is a good fit.
- If you don't have peace about a placement when it is offered, it is OK to say no.
- Don't jump into every placement, even if it is in your heart to do so. Not every placement will be a good fit.
- You are not perfect. Your FSS or Licensing Specialist is not perfect.
- Every child is different, like every parent is different. Allow the child to be an individual.
- Children have a chronological age and a developmental age, and they are often very different.
- Stand up for and be an advocate for your child.
- Document everything.



- Have the child visit the doctor regularly. It helps to identify issues and provides good documentation of care.
- Schedule the child's appointments yourself, if possible. You know your schedules best.
- Try hard to refrain from judgment of the birth parents.
- Plan one work day off to schedule all your appointments together.
- Communicate, communicate, and communicate with your FSS. Provide feedback and respond to surveys. Even the littlest thing could be important.
- Ask your child how they want to be introduced and what they want to call you.
- You need permission to travel out of state, for haircuts, certain activities, sports, etc.
- You can often get discounts for items if you

mention they are for children in foster care.

- Sometimes you can claim children in foster care as dependents on your tax form. It is always good practice to include (with your tax form) a letter from CPS stating the period of time during the year the child was under your care. Consult a tax advisor for more information.
- Don't be afraid to ask your FSS for respite. We all need a break. Build a relationship with the respite families.
- Sometimes, Medicaid will pay for over the counter medicine if the doctor writes a prescription for it. (ex: formula, Claritin, iron supplements, PediaSure, etc.)
- Background checks can be done on friends and family members for extra support and babysitting. Work through your FSS.
- Always continue to build and strengthen your support network. Reach out.
- Attend foster parent meetings, support groups, and special events.
- Ask for a mentor foster family to call for help and advice. Ask your FSS for financial options related to graduation, school supplies, prom, life books, etc.

Frequently Asked Questions

1. What do I do if I accidentally meet members of the family out in the community?
   Working with Birth Parents, Page 27
2. Can a child in foster care use a phone, internet, and/or social media?
   Social Media, Page 33
3. What kind of contact should/can I have with the birth parent?
   Working with Birth Parents, Page 27
4. What discipline is appropriate for what behaviors?
   Discipline, Page 23
5. Can a child in foster care stay overnight at a friend's house?
   Sleepovers, Page 31
6. Can a child in foster care ride in vehicles driven by other adults?
   Reasonable and Prudent Parent Standard, Page 27
7. Do you let teens go out? How late? With who?
   Reasonable and Prudent Parent Standard, Page 27
8. What things should I keep on hand in my home?
   Suggested Items to Have on Hand, Page 12
9. What resources help pay for extra-curricular activities?
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10. Who can babysit a child in foster care?
    Babysitting, Page 31
11. What do I do in case of an emergency?
    Emergency Situations, Page 23
12. When people ask me who the child is, how do I respond?
    Tips from Foster Parents, Page 52

13. What do I do if a child in foster care starts to call me mom or dad? Do I redirect them?
    Working with Birth Parents, Page 27

14. What if a child in foster care does not want to attend religious activities the family participates in, or if a child in foster care wants to attend religious activities and we don't attend?
    Religion, Page 27

15. What do I do if a child in foster care discloses abuse to me?
    SD Mandated Reporters, Page 42

16. What do I do if a biological parent starts asking me questions at the visitation drop off? Do I answer?
    Working with Birth Parents, Page 27

Resources

- See forms section for list of offices and Emergency Response numbers
- South Dakota Department of Social Service (DSS) Website - dss.sd.gov
- The FSS assigned to your child
- 211 Help Line - helplinecenter.org/ or Dial 2-1-1
- Your Local Schools
- County Resource List – a document providing contact information on local programs, health care, child care, cultural events, churches, thrift stores, clothing, child safety, etc. Pick the list up from your county courthouse.
- United Way
- WIC for 0 to school age, then free school meals after. The schools have the application forms.
- Medicaid
- Your Foster Care and Adoption Pre-Service Training Class Book
- Clothing Vouchers
- Royal Kids Camp
- Mentorships from other foster parents
- Look for foster parent support groups, associations, networks, or mentorships in your area.
- Build a relationship with the staff at your child's school. Talk to them about lunches, sports, instruments, camps, counseling, etc. There may be discounts or subsidies available.
- Lion's Club (eyeglasses) and similar organizations for scholarships
- County Nurse

South Dakota
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Social Services

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