

January 29, 2019: Foster Peer Advocacy Program

Thanks to our panel of extraordinary foster parents and the GALs who attend that make these meetings so successful.

- The **South Florida Foster and Adoptive Parent Association** has been providing support to foster parents for over 10 years.
- Foster parents take these children in, not only to meet their needs, but to love them unconditionally.
- They feel that GALs are their advocates because what we both want is what is in the best interest of the children. (That is sometimes more difficult in a pre-adoptive home when reunification with biological parent is the goal).
- Oftentimes in the legal process, the foster parents are overlooked and they lose many good foster parents because of a lack of support and validation. They feel they are often ignored by the court system and the case-management agencies.
- The board rate that foster parents receive doesn't cover the cost to raise a child – it only covers about 60% of cost.
- The majority of foster parents want to see the children thrive, although some do want to adopt.
- Every child deserves and needs a “loving, committed someone.”
- The key to providing better outcomes are the people providing the care

There now is a Foster Parent Peer Advocate Program:

- This program is funded by Our Kids.
- It is an evidence-based, peer-support/mentorship program, and they currently have 4 peer advocates.
- New foster parents are referred by Our Kids, the case management agencies, GALs, judiciary.
- They have monthly meetings, conduct monthly home visits, assist with services needed, and provide support, guidance and training.
- “They have the foster parents’ backs.”
- They also will accompany the foster parents to court.
- The measurable data are: retention, placement disruptions, and satisfaction levels.
- Specialized training for foster parents includes parenting trauma-exposed children, co-parenting, the legal aspects of the dependency system, foster parent rights.
- They also offer pre- and post-adoption support, including assistance in filling out the adoption application.
- They also have a “closet” of (gently used) baby furniture, etc. for emergencies.
- Foster parents fill out a **care-giver input form** (attached below) and it is supposed to be e-filed and disseminated. They are supposed to receive notification of court hearings. If you know a case with a foster parent has a hearing set, make sure the foster parent is aware. Ask them to please email you the care-giver input form and also find out if they are going to attend the hearing.
- Many times, foster parents are unable to physically attend the hearing (multiple children in the home, appointments, etc.), and they would like to appear by phone. Some judges are amenable to this and others are not.

- **Icebreakers** take place when the child has been placed in a foster home; it does not occur when the child is placed with relative or non-relative caregiver. (See detailed attachment below).
 - When reunification is the goal of the case plan, a phone call is facilitated by the agency between the foster parent and the biological parent.
 - After the phone call, the agency determines if the case is a good fit for co-parenting.
 - The face-to-face will take place at the agency or in the courthouse -- only if co-parenting is appropriate.

Advice to GALs from the panel:

- Be strong in your advocacy.
- Speak up for the child and have a position.
- Take the extra step.
- Visit my home.
- Don't make a habit of calling me the day before court to ask me how the child is doing.
- Ask me about the child and how he/she is doing.
- When you meet with the foster parents/children explain your role.
- Don't disagree with me in front of the child.
- Show respect.

If you have children placed in a foster home where you feel the foster parent would benefit from peer advocacy, use the referral form attached below.

If you have an issue with the foster parents, discuss it with your supervisor and contact the peer advocacy group.



OurKids
of Miami-Dade/Monroe, Inc.

401 NW 2ND AVE. SOUTH TOWER 10TH FLOOR • MIAMI, FL 33128
MAILING ADDRESS • P.O. BOX 010951 • MIAMI, FL 33101
P: 305.455.6000 • F: 305.377.7029 • WWW.OURKIDS.US

QPI / Co-Parenting Protocol to
All Dependency Shelter Hearings
Judge Sampedro's Order

This only applies to cases where goal is reunification and child is placed in a License Foster Placement

1. At the Shelter Hearing the biological Family gets the Letter of Introduction from the Agency along with the QPI Brochure with all IP Tel. Numbers
2. 3 – 4 days after shelter hearing, or at the first visit of the CM with the Foster Parent, a brief phone conference takes place between the CM, Foster Parent and Bio Fam. (For this please utilize the **Form All About my Child**)
3. 4 weeks from the Shelter hearing, if the goal of the case is reunification and the child is placed in a licensed foster home, the following will happen:
 - a) Ice Breaker Protocol takes place with Bio Family at Agency
 - b) Co-Parenting Plan is formulated and signed by everyone
4. At the next court hearing on the case, the Co-Parenting Plan is filed with the court.
5. Co- Parenting Plan is always reviewed and modified at the Case Plan hearings or when there is a change in the placement of the child.

**IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT
IN AND FOR MIAMI-DADE COUNTY, FLORIDA
JUVENILE DIVISION**

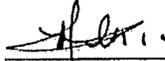
**ORDER ON PROCEDURE FOR DIVISION 3:
PROVIDING FOR CO-PARENTING PLAN**

Having concluded that co-parenting is an essential requirement for a child to thrive while in out-of-home care, the following is hereby implemented in order to meet this goal:

1. An Icebreaker Meeting shall take place no later than four weeks from the Shelter Hearing when a child has been placed in foster care and the goal of the case is Reunification. This meeting shall include, at a minimum: the parent(s), the custodian(s), and the case manager.
2. No party shall discuss the allegations of the case during the meeting.
3. The parents and the custodians may bring a support group to the meeting within reason (i.e. a relative, a close friend, a mentor.) The case manager shall have discretion to limit the amount of individuals permitted at the meeting.
4. During this meeting, a co-parenting plan will be developed. The plan should be tailored to the specific case and shall address ways in which the parent(s) and custodian can maintain systematic and regular contact in order to serve the best interest of the child. The plan shall address the following (non-exhaustive list): a visitation schedule; the availability of frequent and regular contact in the form of telephone, texting, email, and/or social media; and parent attendance at medical and/or school appointments for the child.
5. This co-parenting plan shall be filed with the Court after it is completed. In cases where co-parenting is not appropriate, a co-parenting plan shall still be formulated and filed, but will indicate the reason why co-parenting is not appropriate.
6. The co-parenting plan shall be revisited as needed but shall be addressed, at a minimum, before each Case Plan Hearing and in case of a change in foster home. If appropriate, a modified co-parenting plan shall be completed and filed.
7. In the event that parent(s) will not or cannot participate in the development of the co-parenting plan, the Department shall include in the Case Plan an explanation of the circumstances and state the nature of its efforts to secure such persons' participation in the development of a co-parenting plan.
8. In order to commence this process, it further ordered that at the Shelter Hearing, an agency representative shall provide the parents and caregivers present with a letter of introduction to the agency that shall include, at a minimum: the agency name, the agency's contact information, and

the name and contact information of a case manager or court liaison who can be reached for more details.

DONE AND ORDERED ON THIS 10 DAY OF SEPTEMBER, 2016.



THE HONORABLE JUDGE SAMPEDRO IGLESIA
CIRCUIT COURT JUDGE

ALL ABOUT MY CHILD

Date _____ Parents _____

Child's Full Name _____ Nickname _____

Age _____ Date of Birth _____ SSN _____

Other family or extended family members that your child might miss or be concerned about:

MEDICAL INFORMATION

Pediatrician _____ Last/Next Visit _____

Phone Number _____

Dentist _____ Last/Next Visit _____

Phone Number _____

Does your child have any special medical conditions you would like us to know about? Y / N

Have there been any significant medical events in your child's history? Y / N

Are there any mental health or emotional health concerns? Y / N

Does your child have any allergies to medications? Y / N

Please list here _____

SCHOOL INFORMATION

My child attends _____ and is in the _____ grade.

My child's teacher's _____

Does your child have special services at school, an IRP or 504 Plan?

Is there anything you want to share about your child's school experience or situation?

FOOD and MEALS / DAILY ROUTINES / ACTIVITIES

What are your child's favorite foods or meals?

What foods does your child dislike?

Is your child allergic to any foods or have dietary restrictions? Please be specific & list reactions.

What are your child's breakfast/lunch/dinner routines?

What does your child do after school?

Please list extracurricular activities or sports:

What does your child's bedtime routine? (prayers, books, songs, comfort items?)

Does your child have special friends a school or in the neighborhood?

Do you have a religious tradition or affiliation?

OTHER INFORMATION

Are there any behaviors that your child may exhibit (unsafe play, bedwetting, tantrums, etc.)

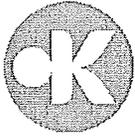
Does your child have any special fears or anxieties?

How do you comfort your child?

Is there any other information that you can share that might help make your child more comfortable while he/she is in our home?

Hair Care tips

THANK YOU!



Caregiver QPI Input Form

As a caregiver, your voice and input is vitally important to the decision making process of the Dependency System of Care. We welcome your participation in any court hearing proceeding concerning the child (ren) placed in your care. While we understand that it is sometimes difficult or unnecessary to attend all court hearings, your contribution is a key component in the process.

Please take the time to complete the **Caregiver Quality Parenting Initiative (QPI) Input Form** in the section below. Completing the questionnaire in its entirety will grant you the opportunity to share vital information about the child in your care with all parties and the judge.

(Complete one questionnaire per child in your care)

Caregiver's Name:		Caregiver's Phone Number:	
Assigned Full Case Management Agency (FCMA):		Assigned (FCMA) Case Manager:	
Case Name:	Child's Name:	Child's Birth Year:	
Hearing Type:	Hearing Date:	Judge:	
Do you plan to attend this Court Hearing in person or by phone?			
In general what would you say is the emotional state of the child currently place in your home?		Does this child have any identified special needs? If yes, please explain.	
Please describe how the child is doing in school/daycare, behaviorally and academically.		Please describe the activities enjoyed by the child in the home. If the child is of school age, these can include extracurricular activities. If none, what activities and/or hobbies does the child enjoy?	

<p>Have there been any accomplishments at school or as part of any extracurricular activities (awards, honors of any type) that can be praised and acknowledged?</p>	<p>In your opinion what strengths does the child possess that can be encouraged?</p>
<p>Are there any medical issues, medications or concerns (allergies, undesired medication side effects, medical diagnosis) that the court should be made aware of? If yes, please make sure to bring necessary documentation to hearing.</p>	<p>Is the child taking psychotropic medications? If yes, please make sure to bring necessary documentation to hearing.</p>
<p>Please describe any interaction you may have observed between the biological family and the child (parents, aunt, uncles, siblings, etc.)</p>	<p>Are you involved in any co-parenting with the biological parent(s)? If yes, kindly describe the level of co-parenting you are doing with the biological parent(s).</p>
<p>Have you seen anything that concerns you about the biological parent(s)?</p>	<p>Are there any issues and/or problems you wish to inform the Judge about?</p>
<p>In what ways can we better support you?</p>	<p>Do you have any positive feedback or areas of strength about the case that you would like to share with the court?</p>

Did you receive the Blue Book (Child's Resource Record)? If yes, please check the document type below that were received within the Child's Resource Record.

- Interim Placement Report (IPR)
- Placement Letter
- Court Orders
- Child Placement Agreement
- Medical History
- Physical and Immunizations Records
- Medication Log
- Comprehensive Behavioral Health Assessment (CBHA)



Foster Parent Peer Advocate Agency Referral Form

Name of person completing form: _____ Agency: _____

Case name: _____ Case Number: _____

Date of referral: _____

Initial referral? Yes: No: Previously referred? If so, indicate date: _____

Case Info

Foster Parent's Name: _____

Name of child (ren): _____

Reason for seeking foster parent peer advocate: _____

Please email this form to Yani Sanchez at yani@sffapa.org or call 305.206.9061

