

**AGENCY - FOSTER PARENTS AGREEMENT
Child Placed by Agency in Foster Home**

Complete in Duplicate:
One copy to: Foster parents
Child's Social
Service Record

The agreement will be initiated when the child is placed in the facility and whenever the rate changes.

NAME OF CHILD		PARENT'S NAME
BIRTHDATE OF CHILD	DATE PLACED	CASE NUMBER
FOSTER PARENT'S NAME		ADDRESS

Anticipated duration of placement is _____ months.

The agency will pay \$ _____ per _____ for room and board, clothing, personal needs, recreation, transportation, education, incidentals and supervision. First payment to be within 45 days after placement with subsequent payments no later than the 15th of the month following provision of care.

If additional amounts are to be paid, the reason, amount and conditions shall be set forth here: _____

Special problems/needs: No Yes If yes, explain. _____

Special Permissions: Special permission for substitute supervision is subject to Community Care Licensing granting an exception to the licensing regulation, which requires that substitute supervision in the foster home be limited to an adult.

- Child 15 years or older has permission to remain without adult supervision during temporary absences of the the foster parent(s), not to exceed six (6) consecutive hours in any one 72-hour period.
- Substitute supervision may be provided to the foster child by someone 16 years of age or older (not a foster child) during temporary absences of the foster parent(s), not to exceed six (6) consecutive hours in any one 72-hour period.
- Other (Explain) _____
- No special permissions granted.

AGENCY AGREES TO	FOSTER PARENTS AGREE TO
<ol style="list-style-type: none"> Provide the foster parent with educational stability requirement, school of origin and travel plan, knowledge of the background and needs of the child necessary for effective care. This may include a social work assessment, medical reports, education assessment, and identification of special needs when necessary. This shall be made available to foster parents within 14 days from date of placement. Develop a plan for the child and share pertinent aspects with the foster parents. Inform foster parents they may give the same consents on behalf of the child as the parent, except for those prohibitions provided in Social Services Manual Regulations. Not remove the child with less than 7 calendar days written notice unless: the child is physically or psychologically endangered; court orders removal; parents or guardians order removal (voluntary placement); signed waiver obtained from foster parents; removal is from an interim placement directly into an adoptive home. Involve foster parents in future planning for the child. The placement shall be reviewed within 6 months. Assist the child in his use of foster care. Assist in the maintenance of the child's constructive relationships with parents and other family members and to involve parents in future planning for this child. Provide procedure for grievances of foster parents. Contact the child and foster parents at least once a month. If case plan would indicate less frequent contacts, the foster parent will be informed. Inform foster parents if child has any tendencies toward dangerous behavior. Provide Medi-Cal card or other medical coverage at time of placement. Arrange for medical examination within 30 days unless child has had such within past 6 months and information is available. Provide a clothing allowance as permitted to meet initial clothing needs. In cooperation with foster parents arrange for visiting by parents or relatives on: _____. Provide arrangements for school of origin travel as appropriate. Provide assistance with emergencies. Telephone number for after-hours or weekends is: _____. 	<ol style="list-style-type: none"> Provide this child the nurture, care, clothing and training suited to his needs. Develop an understanding of the responsibilities, objectives, and requirements of the Agency in regard to the care of this child. Recognize the Agency's responsibility for planning for this child, as given by the court or the parent(s). Recognize any limitations of consent imposed by the court or the parent. Increase their knowledge and ability to care for this child. Encourage the child's relationships with his parents and relatives. Cooperate in visiting arrangements between child and parents. Not use corporal punishment, punishment in the presence of others, deprivation of meals, monetary allowances, visit from parent, home visits, threat of removal or any type of degrading or humiliating punishment, and to use constructive alternative methods of discipline. Respect and keep confidential information given about the child and his family. Immediately notify agency of significant changes in this child's health, behavior, or location. Accept the child's special problems as given above in my provision of care. Help with termination of placement including return to his own parents, relatives home, or adoptive placement. Give the agency prior notice of at least 7 days if removal of child is requested unless it is agreed upon with the agency that less time is necessary. Conform to the licensing/certification requirements. Provide state and federal agencies access to documentation when documentation is maintained on children in their care. Give advance written notice to the licensing agency and the person or agency responsible for the child of any (foster parent(s)) absence of 48 hours or longer. (Absence may be reported by telephone in case of emergencies.) Notify the agency immediately if an application is made on behalf of this child for any kind of income. Examples of income include, but are not limited to, child support payments, Veterans Benefits, Railroad Retirement, Social Security, RSHDI, and Supplemental Security Income/State Supplemental Program (SSI/SSP). Remit to Department of Public Social Services any income received on behalf of this child while in foster care up to the full cost of board and care plus medical cost. In addition, I will cooperate to have the Social Security Administration, or the appropriate agency, make the Department of Public Social Services the payee for any funds received on behalf of this child. Foster parent agrees to immediately notify the placing agency of any changes to the child's educational travel, withdrawal from school or graduation.

***See below for Optional Long-Term Placement Intent**

I have read the foregoing and agree to meet these requirements. The terms of this agreement shall remain in force until changed by mutual agreement of all parties or when this child is removed from home.

SIGNATURE OF CHILD PLACEMENT WORKER		SIGNATURE OF FOSTER MOTHER	
TITLE	NAME OF AGENCY	SIGNATURE OF FOSTER FATHER	
ADDRESS		ADDRESS	
PHONE NUMBER ()	DATE	PHONE NUMBER ()	DATE

Long-Term Placement Intent

I have read the foregoing and agree to meet these requirements. The terms of this agreement shall remain in force until changed by mutual agreement of all parties or when this child is removed from home. In signing this section, the agency, foster parents and foster care child signify their desire that this child remain in this home as a permanent member of this family.

SIGNATURE OF CHILD PLACEMENT WORKER		SIGNATURE OF FOSTER MOTHER	
TITLE	NAME OF AGENCY	SIGNATURE OF FOSTER FATHER	
ADDRESS		ADDRESS	
PHONE NUMBER ()	DATE	PHONE NUMBER ()	SIGNATURE OF FOSTER CARE CHILD

AGENCY - GROUP HOME AGREEMENT**Child Placed by Agency in Group Home**

NAME OF CHILD	PARENT'S NAME
BIRTHDATE OF CHILD	DATE PLACED
CASE/REFERRAL NUMBER	PROGRAM ID

Anticipated duration of placement is _____ months.

The Agency will pay \$ _____ per _____ for room and board, clothing, personal needs, recreation, transportation, education, incidentals, and supervision.

First payment to be within 45 days after placement with subsequent payments no later than the 15th of the month following provision of care.

If additional amounts are to be paid, the reason, amount and conditions shall be set forth here:

Special problems/needs: No Yes If yes, explain:

Agency Agrees To:	Group Home Agrees To:
<ol style="list-style-type: none"> Provide the group home with knowledge of the background and needs of the child necessary for effective care. This shall include a social work assessment, medical reports, educational assessment, psychological/psychiatric evaluations and identification of special needs when necessary. This shall be made available to group home within 14 days from date of placement. Work with the group home toward development of a treatment plan. Work toward termination of child's placement with group home staff. Continue paying for this child's care as long as eligible and the group home maintains child on an active status or until the agency requests that placement be terminated. Assist in the maintenance of this child's constructive relationships with parents and other family members, and to involve parents in future planning for this child. Contact this child in the group home at least once a month. If case plan would indicate less frequent contacts, the group home will be informed. Inform group home if child has any tendencies toward dangerous behavior. Provide Medi-Cal card or other medical coverage at time of placement. Provide authorization for medical treatment, signed by this child's parents or legal guardian. Provide a clothing allowance as permitted to meet initial clothing needs. Provide assistance with emergencies. Telephone number for after-hours or weekends is: _____ At the time of this placement, the out-of-home provider was given the known educational, medical, familial and behavioral information regarding this child. 	<ol style="list-style-type: none"> Provide this child the nurture, care, clothing, and training suited to his needs. Follow admission requirements related to medical screening, physical examination, medical testing and immunization. Develop an understanding of the responsibilities, objectives, and requirements of the Agency in regard to the care of this child and work with the agency in planning for this child. Encourage the maintenance of the natural parent-child relationship and include the child's parents in the treatment plan whenever possible. Not use corporal punishment, punishment before the group, deprivation of meals, monetary allowances, visit from parent, home visits, threat of removal or any type of degrading or humiliating punishment, and to use constructive alternative methods of the discipline. Respect and keep confidential information given about the child and his family. Work toward termination of placement on a planned basis with maximum involvement of the child, parents, and the agency. Conduct a staffing or review on this child at least quarterly. Submit an initial diagnostic summary to the agency within three(3) months from the date of placement. This summary shall include information listed on the last page of this agreement form. Submit ongoing written evaluations to the agency quarterly. These evaluations shall include information listed on the last page of this agreement form. Immediately notify agency of significant changes in this child's health, behavior, or location. Submit copies of any pertinent information such as school reports, medical reports and psychological/psychiatric reports as completed. Make arrangements and provide support for all youth 16 and over to participate in the Independent Living Skills Program (ILSP). Give the agency prior notice of at least 7 days of intent to discharge this child unless it is agreed upon with the agency that less notice is necessary Conform to the licensing requirements. Provide state and federal agencies access to documentation when documentation is maintained on children in their care. Notify the agency immediately if an application is made on behalf of this child for any kind of income. Examples of income include, but are not limited to, child support payments, Veterans Benefits, Railroad Retirement, Social Security, RSHDI, and Supplemental Security Income/State Supplemental Program (SSI/SSP). Remit to Department of Public Social Services any income received on behalf of this child while in foster care up to the full cost of board and care plus medical cost. In addition, I will cooperate to have the Social Security Administration, or the appropriate agency, make the Department of Public Social Services the payee for any funds received on behalf of this child.

I have read the foregoing and agree to meet these requirements. The terms of this agreement shall remain in force until changed by mutual agreement of all parties or when this child is removed from the group home.

SIGNATURE OF CHILD PLACEMENT WORKER		SIGNATURE OF AUTHORIZED GROUP HOME REPRESENTATIVE	
TITLE	PHONE NUMBER	TITLE	
NAME OF AGENCY Contra Costa County Children & Family Services		NAME OF GROUP HOME	
ADDRESS		ADDRESS	
AGENCY PHONE NUMBER	DATE	PHONE NUMBER	DATE

State of California Health and Welfare Agency
Department of Social Services
CWS Case Management System
SOC 154 (Rev 04/2005)

AGENCY - GROUP HOME AGREEMENT

Confidential in accordance with
Penal Code Section 11167.5 and/or
WIC Sections 827 and 10850

Copy 1: Caregiver
Copy 2: CFS Clerical Specialist

Initial diagnostic summary shall include:

- A. Medical and dental needs
- B. Psychological/psychiatric evaluations obtained
- C. Staffing review summaries
- D. Educational assessment
- E. Peer adjustment
- F. Relationship to staff
- G. Involvement in recreation program
- H. Behavioral problems
- I. Short-term treatment objectives (goals established for next 3 months)
- J. Long-range goals including anticipated length of placement
- K. Tasks planned to reach objectives and goals and staff who will be performing these tasks, including agency service activity
- L. Identification of unmet needs
- M. Involvement of child and his parents in the treatment program

Quarterly evaluations shall include:

- A. Current status of child's physical and psychological health
- B. Reassessment of child's adjustment to the group home, program, peers, school, and staff
- C. Progress toward short-term objectives and long-range goals including tasks which have been performed to reach these objectives and goals
- D. Reassessment of unmet needs and efforts made to meet these needs
- E. Modification of treatment plan, tasks to be performed and anticipated length of placement
- F. Involvement of child and his parents in treatment program

PLACEMENT AGENCY - FOSTER FAMILY AGENCY AGREEMENT CHILD PLACED BY AGENCY IN FOSTER FAMILY AGENCY

Name of Child:	FFA Name:
Birth Date of Child:	Date Placed With FFA:
Case Number:	Date First Entered Foster Care:

Please select the Level of Care from the drop down menu:

The Placement Agency will pay \$ _____ per month in return for the above named child’s care and supervision as defined in Welfare and Institutions Code 11460 and other applicable law and regulations. First payment to be made within 45 days after placement with the subsequent payments to be made monthly.

FOR PRIVATE ADOPTION AGENCY REIMBURSEMENT PROGRAM (PAARP) PARTICIPANTS: The County Placement Agency will pay \$8,000 of PAARP compensation to dually licensed foster family and adoption agency. The County shall compensate the agency \$4,000 at the time the adoptive placement agreement is signed and \$4,000 at the time of finalization of the adoption, or one payment of \$8,000 if the adoption agency opts to be paid in full at finalization.

Agency Agrees To	Foster Family Agency Agrees To
<ol style="list-style-type: none"> 1. Provide the Foster Family Agency (FFA) with knowledge of the background and needs of this child. This shall include but not be limited to the social work assessment, medical reports, educational assessments, psychiatric/psychological evaluations, most recent Child and Adolescent Needs and Strengths assessment (CANS) and identification of special needs. This shall be made available to the FFA within 14 days from date of placement. 2. Inform the FFA, before placement, of this child’s behaviors and proclivities that might be harmful to others (including pets) in the home, school or neighborhood. 3. Work with the FFA in the development and progress of a needs and services plan. The county placing agency will notify and invite the FFA to participate in any <u>Child and Family Team (CFT)</u> meetings to discuss the child’s needs and services plan. 4. <u>Ensure a facilitated CFT is convened as necessary and within 60 days of the child’s arrival in order to ensure the ongoing needs of the child are met in support of the child’s needs and services plan. Reconvene for subsequent CFT at least once every six months.</u> 	<ol style="list-style-type: none"> 1. Provide this child with foster/resource parent(s) who have been approved to care for the child’s needs in accordance with applicable laws and regulations and educational stability requirement. 2. Conform to applicable Title 22, Division 6 regulations and all laws governing foster care. 3. Notify the agency within 24 hours (unless there is a separate written agreement with the placing agency) by phone followed in writing of significant changes in the child’s health, behavior or location as well as significant issues including suspected physical or psychological abuse, death, injury, unusual incidents, absence of a child, placement issues and school non-attendance and all items listed under Section 80061 of Title 22, Division 6. 4. <u>Proactively request and support CFT processes to ensure the ongoing needs of the child are met in support of the child’s needs and services plan.</u> 5. Work together with the placing agency to encourage the maintenance of the familial-child relationship and include the child’s family members, as indicated in the needs and services plan, in treatment planning and/or CFTs whenever possible and cooperate with the reunification process.

<p align="center">Agency Agrees To (Continued)</p>	<p align="center">Foster Family Agency Agrees To (Continued)</p>
<p>5. Work with FFA staff toward successful completion of the child’s needs and services plan, a positive placement outcome and timely permanency for the child. Provide the FFA a JV 220A, Prescribing Physician’s Statement, if applicable, upon approval by the juvenile court, and subsequent renewals.</p> <p>6. Work together with the FFA to develop and maintain positive relationships with the child’s parents (or guardians) and other family members, and cooperate with the reunification process, e.g. provide written information regarding a child’s <u>educational</u>, medical and transportation needs.</p> <p>7. Maintain contact with the child monthly or as specified in the child’s approved case plan.</p> <p>8. <u>Expediently convene a CFT meeting to develop and implement a placement preservation strategy when notified by the Foster Family Agency that the placement may be disrupted, unless the social worker or placing agency determine that remaining in the placement will pose an imminent risk to the health and safety of the child, youth, other children or others in the home, the court orders removal, the parent or guardians request removal (voluntary placement), removal is from an interim placement directly into an adoptive home, or the foster youth’s CFT and the foster youth if they are 10 years of age or their representative if they are less than 10 years of age, unanimously agree to waive the requirement to hold a CFT and develop a placement preservation strategy.</u></p> <p>9. <u>Not to make a placement change between the hours of 9:00 p.m. and 7:00 a.m., unless a mutual agreement to do so is made by the current and prospective caregivers, the social worker or probation officer, and the youth over the age of 10 or that youth’s representative.</u></p> <p>10. <u>Serve written notice to Foster Family Agency 14 days prior to making a placement change if after implementing the placement preservation strategy it is determined a placement change is necessary.</u></p>	<p>6. Use constructive alternative methods of discipline; not use corporal punishment; deprivation of meals, monetary allowances, visits from parents, or home visits; threat of removal or any degrading or humiliating punishment.</p> <p>7. Respect and keep confidential information given about this child and their family.</p> <p>8. Work with the placing agency to develop and submit to them a needs and services plan that develops an understanding of the responsibilities, objectives and requirements of the agency in regard to the care of this child, including the information listed on page 4 of this form, within 30 days of placement of the child. The needs and services plan shall be up-dated at least every six months.</p> <p>9. Written progress reports shall be provided at least every six months or more frequently by mutual agreement.</p> <p>10. <u>FFAs shall complete SW time studies as requested by CDSS, to identify IV-E allocable and non-allocable activities in accordance with federal/state law and instructions provided by CDSS.</u></p> <p>11. Notify the agency of any unintended move of the child between approved homes prior to the move and do not make a placement change between the hours of 9:00 p.m. and 7:00 a.m., unless a mutual agreement to do so is made by the current and prospective caregivers, the social workers or probation officer, and the youth over the age of 10 or that youth’s representative.</p> <p>12. Immediately notify the agency prior to an unplanned placement disruption and participate in a CFT to develop and implement a placement preservation strategy unless there is an imminent threat to the health and safety of the child, youth, other children, or others in the home.</p> <p>13. If, after the placement preservation strategy has been implemented and the foster/resource parent(s) request removal of the child, notify the agency immediately and work with the agency to transition the child to a new placement within 14 days.</p>

<p style="text-align: center;">Agency Agrees To (Continued)</p>	<p style="text-align: center;">Foster Family Agency Agrees To (Continued)</p>
<ul style="list-style-type: none"> 11. Continue paying for the child’s care as long as the child remains in placement or in the absence of the child the placing agency asks the FFA to retain an open placement. 12. Provide a Medi-Cal card or other medical coverage and a Medical Consent form signed by the child’s parents, legal guardian or court at the time of placement. 13. Inform the FFA of its clothing allowance policy and provide the funding consistent with those policies or any revised policies. 14. Pay for medical costs incurred prior to the establishment of Medi-Cal eligibility. 15. Verify and remit/reconcile any underpayments within 45 days of FFA notification of such underpayments. 16. Notify the FFA within 12 months of suspected overpayments, in accordance with applicable laws and regulations. 17. Provide for arrangements for school of origin travel as appropriate. 18. Provide a contact telephone number for emergencies and after business hours: 19. Emergency #: _____ 	<ul style="list-style-type: none"> 14. <u>Prior to an unplanned placement disruption, proactively engage the CFT and county agency to stabilize the child.</u> 15. FFA social worker shall visit this child in private in their foster home at least once per calendar month and provide documentation of these visits to the agency caseworker/probation officer on a flow basis every month as visits are completed. 16. Provide state and federal agencies access to records as provided by state and federal law. 17. Notify the placing agency if the child receives any source of income such as income from work, SSI, SSA, child support, etc. Notify the county of any property the child obtains, including bank accounts. (It will be the county’s responsibility to verify the income/property.) 18. Follow any requirements associated with the county’s clothing allowance policy and procedures. 19. Remit any overpayment in full to the county welfare department upon receipt of a notice of action or following the completion of due process. 20. Inform county upon discovery of any apparent overpayment. 21. Immediately notify the placing agency of any changes to the child’s educational travel arrangements (if applicable) including a change in approved homes.

Initial needs and services plan summary shall include:

- A. Medical and Dental needs
- B. Psychological/psychiatric evaluation obtained or scheduled
- C. Staffing review summaries
- D. Educational assessment
- E. Peer adjustment
- F. Relationship to adults
- G. Involvement in recreation programs
- H. Behavior Problems
- I. Short-term treatment objectives (goals established for next 3 months)
- J. Long-range goals including anticipated length of placement
- K. Tasks planned to reach objectives and goals and who will be performing these tasks, including agency service activity
- L. Identification of unmet needs
- M. Involvement of child and their parents in the treatment program

Periodic update of needs and services plan shall include:

- A. Current status of child's physical and psychological health as well as confirmation of medical and dental exams
- B. Reassessment of child's adjustment to the foster home, treatment program, peers and school
- C. Progress toward short-term objectives and long-range goals including tasks which have been performed to reach these objectives and goals
- D. Reassessment of unmet needs and efforts made to meet these needs
- E. Modification of treatment plan, tasks to be performed and anticipated length of placement
- F. Involvement of child and their parents in treatment program

By this signature I attest that I have read this agreement and agree to fulfill these requirements and I am authorized on behalf of my agency to sign this. The terms of this agreement shall remain in force until changed by mutual consent, in writing, of both parties.

Child's Placement Worker Representative's Name:	Phone Number:
Child's Placement Worker Representative's Signature:	Date:
County Name and Agency:	Title:
Foster Family Agency Representative's Name:	Phone Number:
Foster Family Agency Representative's Signature:	Date:
Name of Agency:	Title:
FFA Address:	