Kinship Resource Family Welcome Packet

Empowering Families, Strengthening Futures

OKLAHOMA Human Services

03.24.2026

Dear Kinship Family,

On behalf of Oklahoma Human Services (OKDHS), we want to thank you for partnering with us to care for a child who is currently placed in the custody of the state of Oklahoma. We value you as part of the team and want to ensure you are supported during this process.

Oklahoma Human Services wants to partner with you as a kin caregiver. We believe when children cannot remain safely at home, staying with kin is their best option because it reduces the trauma of separation and keeps them connected to their family and culture. During this process, we will work together to educate and support one another, as well as the child(ren) in your care, while also assessing your home as a kinship resource. OKDHS places children with kin caregivers as quickly as possible and works together with you to complete the required tasks rather than waiting to place the child until all the tasks are completed. Once approved as a kinship resource home, you will have access to various resources and a monthly financial stipend to ensure the best possible care for the child(ren) placed with you.

This process may sometimes feel overwhelming with many tasks and people involved but know that we are here to guide and support you every step of the way. The tasks listed below may not happen in the order they are listed but that is okay! Our goal is to have each task, except for training, completed within 30 days of placing a child in your home.

- Background Checks
- Meeting with a Resource Specialist – your assigned worker who will complete required paperwork
- Meeting with a Permanency Planning Specialist – assigned worker for the child(ren) in placement
- Fingerprints
- 12 hours of training (completed within 120 days of placement)
- Kinship Resource Family Assessment – completed by a partnering agency

For a visual guide of the kinship assessment process, please refer to the Roadmap to Kinship Care. If you have any questions, please reach out to your assigned Resource Specialist. Please check the attached Emergency Contact Guide for specialists' contact information.

Thank you again and we look forward to working with you.

If you are dealing with any of the following situations in red, contact 911, your local emergency room, a medical professional, the child's therapist, crisis stabilization, etc. **BEFORE** contacting your child's worker. Once help is obtained, contact your child's worker. If you are unable to reach the child's worker, please contact the worker's supervisor.

- The child is causing harm to themselves or others or is making serious threats to harm themselves or others
- The child is in need of emergency medical care
- The child is displaying behaviors that require immediate assistance
- The child runs away
- The child is injured (more than minor bruises/scrapes) and requires immediate medical attention

If you are dealing with any of the following situations, contact your child's worker immediately. If you are unable to reach the child's worker, please contact the worker's supervisor.

- As a foster parent , you feel you are no longer able to meet the child's need without support

If you are dealing with any of the following situations in blue, please call the appropriate worker listed below. You can expect a response the same day as your call and the worker will provide a time frame as to when the request will be completed. The request is usually completed within 48 hours.

- For questions regarding the foster child's behavior, call the child's worker.
- For questions regarding non emergency medical care, counseling services, assistance with clothing or other personal items, call the child's worker.
- For questions regarding day care services, call your foster care or agency worker.
- If future respite is needed, call your foster care or agency worker.

If you are dealing with any of the following situations in green, please call the appropriate worker listed below. You can expect a response within two to three business days.

- For general questions regarding the status of the case, visitation, court hearings, out of town travel, etc., contact the child's worker.
- For questions regarding training, contact your foster care or agency worker.
- For questions regarding travel claims, contact your foster care or agency worker.
- For questions regarding babysitting or informal care, contact your foster care or agency worker.
- For questions regarding monthly foster care reimbursement, contact your foster care or agency worker.

Foster Parent Emergency CONTACT Guide

This guide is designed to help you determine what you should do in potential situations that may arise while foster children are placed in your home. However, this list is not all inclusive or absolute. As foster parents, you should always ensure the safety of the child as well as others, first and foremost. If you find yourself in an emergency situation and are unable to reach the child's worker or supervisor, please contact your assigned foster care worker or supervisor.

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Let's Talk About Child Care for Foster Parents

2026 Travel Claim Form

SoonerRide

Foster Care Liability Insurance

Support Groups

Child Welfare Acronyms

DHS Child Welfare Specialist Roles Booklet

Resource Parent Report to the Court

Name of Child: _____

Child's Worker: _____ Office Phone: _____

*Email: _____ Cell Phone: _____

Supervisor: _____ Office Phone: _____

*Email: _____ Cell Phone: _____

District Director: _____ Office Phone: _____

*Email: _____ Cell Phone: _____

County On-call Number: _____

Name of Child: _____

Child's Worker: _____ Office Phone: _____

*Email: _____ Cell Phone: _____

Supervisor: _____ Office Phone: _____

*Email: _____ Cell Phone: _____

District Director: _____ Office Phone: _____

*Email: _____ Cell Phone: _____

County On-call Number: _____

Name of Child: _____

Child's Worker: _____ Office Phone: _____

*Email: _____ Cell Phone: _____

Supervisor: _____ Office Phone: _____

*Email: _____ Cell Phone: _____

District Director: _____ Office Phone: _____

*Email: _____ Cell Phone: _____

County On-call Number: _____

Foster Care/Agency Worker: _____

Office Phone: _____ Cell Phone: _____

*Email: _____

Foster Care/Agency Supervisor: _____

Office Phone: _____ Cell Phone: _____

*Email: _____

Field Manager/Agency Director: _____

Office Phone: _____ Cell Phone: _____

*Email: _____

Foster Care/Agency Worker: _____

Office Phone: _____ Cell Phone: _____

*Email: _____

Foster Care/Agency Supervisor: _____

Office Phone: _____ Cell Phone: _____

*Email: _____

Field Manager/Agency Director: _____

Office Phone: _____ Cell Phone: _____

*Email: _____

Do not send case- or time-sensitive information via email or text.

THE ROAD TO KINSHIP CARE

FINISH

#7

Approval

Final approval will be within 30 days of placement. Once approved, foster care maintenance payments will begin.

Family Assessment and Review

A family assessment will be initiated within seven days of placement to ensure you are supported and prepared to care for the child placed in your home.

#6

Kinship Resource Family Training

The completion of twelve hours of training is required within 120 days of placement. We will help you with enrollment.

#5

#4

Fingerprinting

Fingerprinting will take place within five business days.

Welcome!

The kinship child has been placed and a member of our team will provide you with a welcome packet that will include links and resources, a welcome letter, and an emergency contact guide.

#3

Background Check

#2

Oklahoma Human Services Will Call You

You will receive a call regarding your interest in partnering with us to care for a child in need.

START

#1

OKLAHOMA FOSTERS

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RESOURCES
for Kinship Families



SOCIAL SERVICES

Apply for SNAP, TANF and other programs: OKDHSLive!
Other available statewide resources: OK Benefits
Developmental Disabilities Services: Program Information | Apply for DDS
Oklahoma Women, Infants & Children: Program Information | Apply for WIC
Affordable Housing Programs: Oklahoma Housing Guide (includes contacts for local housing authorities)

CHILD CARE

Let's Talk About Child Care for Foster Parents [**flyer**]
Who can watch custody children and for how long?
Caring for Custody Children Guidelines
Find a licensed child care facility or home with the Child Care Locator.
Statewide Child Care Referral Center: 800-438-0008
Child Care Card EBT Portal: 888-328-6551
Get the ECC App | **ECC App How To** | **ECC App FAQs**
Foster Care Voucher Program: Get reimbursed for informal caregiving costs up to $200 per quarter. Ask your resource specialist for an application.

EDUCATIONAL SUPPORT

Free Tutoring Services: Available statewide | 833-752-1665
OK Successful Adulthood: Resources for teens | 800-397-2945
OK Parents Center: Special education support resources including information on IEP & 504 | 877-553-4332
School-Based Social Workers: OKDHS employees who partner with schools to provide additional support and resources. Check to see if there is one at your school site.
Special Education Advocate referral: cws.education@okdhs.org



MEDICAL AND BEHAVIORAL HEALTH

Custody Child Medical Services: Health Plan Information (833-752-1665)
Provider Search | Benefits Guide | Member Handbook
SoonerRide: Offers free transportation and mileage reimbursement.
Child's Passport: Program Information | Account Set Up 405-522-5050

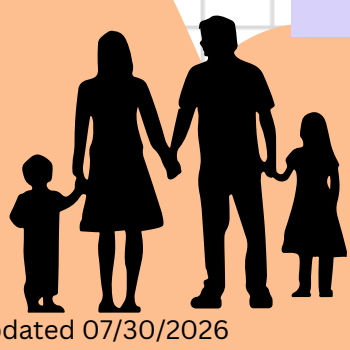
COURT RESOURCES

Indian Child Welfare Act: Helpful guide on what it is and who it covers.
Legal Aid of Oklahoma: Non-profit law firm providing free legal services statewide.
Resource Parent Report to the Court: Optional form to provide updates to the court regarding the custody child(ren) in your home.

ADDITIONAL RESOURCES

Foster Parent Travel Claims: Travel claim information and forms.
Foster Parent Training: Information on training requirements as well as training resources.
Statewide Foster Parent Support Groups: Find a group near you!
Foster Parents Bill of Rights: Your rights as a foster parent.
Office of Client Advocacy: File a complaint | 405-522-2720
Foster Parents Guide to Investigations: Information on what to expect when there is a child welfare investigation on your foster home.
Information Sharing Guide: Covers what case information can be shared with you as a foster parent.

Exclusive Foster Parent Benefits: Search for benefits and discounts from various statewide attractions, stores, and vendors.



Looking for other resources?
211 Oklahoma
Be a Neighbor



Updated 07/30/2026

Family TIME



A Guide for Foster and Adoptive Parents

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Human Services

Family Time: A Guide for Foster and Adoptive Parents

When a child is removed from their parent's care and placed in foster care, it is critical that parent-child visits, also known as family time, occur. **Family time promotes timely reunification, and supports the parent-child relationship necessary for successful reunification. Family time also helps in the decision-making process to establish the best permanency plan for each child.** Foster parents are critical in maintaining connections between children and their family through family time. This is part of foster parents' important partnership with the biological child's parents and the children they care for and support.

No matter why children have been removed from their parent's care, both parents and children are likely to experience strong emotional reactions about the separation. While children may feel happy and excited about family time with their parents, children may also experience difficult emotions before, during or after family time. They may appear sad, disappointed, angry, withdrawn or anxious, or act like they don't care. It is not unusual to observe children crying excessively, whining, regressing to infantile behavior, having nightmares or sleep disturbances, wetting the bed, becoming aggressive, being unable to listen and/or complaining of physical pain before and/or after family time. Youth may also express difficult feelings before, during and after family time by appearing moody or avoidant, behaving disrespectfully or defiantly or engaging in risky or "rule-breaking" behaviors. These behaviors are often a result of trauma and although not ideal, can be an expression of how the youth is coping with the stress of loss and transition from family.

As a trusted caregiver, you are likely to encounter a child's difficult behaviors before or after family time visits. You may also need to help manage a child's strong emotions, as well as your own feelings, if a family time visit does not go well. Let's talk further about these behaviors and what the child might be experiencing.



family TIME

Preparing for Success

It is important to do what you can to prepare for successful family time with their parents. Proactively preparing for family time can make a big impact. Here are some suggestions:

Assist the child in your care to be emotionally prepared for family time.

- Be intentional and provide additional emotional support to the child prior to family time.
- Openly talk and actively listen to the child's feelings about seeing their parents and/or siblings.
- Be mindful when talking about the child's parents and remain positive.
- Be open and honest about which known family members will and will not be attending family time; share with the child who else may be present during family time (i.e. you, caseworker, therapist, etc.)
- If the child is in mental health services, consider scheduling counseling appointments around family time to support the child's well-being.
- Reassure the child that you will welcome them when they return from family time and plan to spend a few extra minutes to help the child transition.
- Encourage the child to ask any questions regarding what family time will be like.

Family TIME

Before Family Time Visits

Some feelings a child may potentially experience prior to family time include:

- Anxiety due to a disruption in the child's daily routine.
- Fear of an unfamiliar person transporting the child.
- Having unrealistic expectations or anxiety about how family time will go.
- Having an overwhelming desire to see their parents and/or siblings.
- Normal feelings of loss and separation that are increased by seeing their parent.
- Worry that being removed was their fault or being confused about why they cannot go home.
- Fear that going to a visit means they will not return to the foster/adoptive home.
- Reliving abuse and neglect trauma in anticipation of family time.
- Fear of separation from the foster/adoptive parent(s).
- Sensing the parent or foster/adoptive parent's anxiety or anger regarding family time.
- Feeling defensive if it seems their parents or foster/adoptive parents are being criticized.

Family TIME









Support family time with the child in your care in mind.

- Request a Family Time Plan if one has not already been provided.
- Work directly with the child's parents to plan and schedule visits, when possible.
- Advocate for family time to be scheduled consistently and with the child's schedule and routine in mind (i.e., not late at night, not during school hours or nap-time, etc.)
- Volunteer to provide transportation to family time, when possible, to provide reassurance and calming.
- Help the child plan a fun activity they might like to do with their parents during family time.
- Encourage family time to occur in a home-like setting, such as the parents' home or your home, instead of an agency office.
- Keep a visible calendar in your home with family time dates so the child can look at it at any time for appropriate expectations about upcoming visits.

Help the child in your care prepare on the day of family time.

- Create your own rituals prior to family time to comfort the child, such as allowing the child to pick their own clothes or fixing their hair in a special way.
- Help the child decide on a calming and comforting object (e.g., special book, stuffed animal, blanket) to take with them.
- Ensure the child has eaten and send a healthy snack.
- Encourage the child to draw a picture or create a small gift to give their parents.
- Provide the parents with recent pictures of the child to include them and support your connection with them.
- Review the family time schedule, including times and transportation plans, for the day in an age-appropriate way to reduce any anxiety.

Supporting Children after Family Time

It is important to take action after the child in your care has a family time visit to support their transition and feelings. Here are some suggestions:

Assist the child in your care with a smooth transition back into their normal routine.

- Volunteer to provide transportation from family time, when possible. If that is not possible, suggest that the child be returned to the foster home or a private location for a safe space to process their feelings (not at school or child care).
- Welcome the child warmly upon return and reassure them that you are happy to see them.
- Create your own rituals after family time to re-integrate the child into their routine and smooth the transition (i.e. have a snack, read a book, work a puzzle).
- Give the child a task to assist with upon returning to your home so they can contribute and feel like they belong.
- Update the calendar in your home with the next planned family time date and verbalize this to the child for reassurance.
- Ask the child what activities they would like to do at the next family time visit to begin planning.

family TIME

After Family Time Visits

Some feelings a child may potentially experience after family time include:

- Child's expectation of seeing their family was not met.
- Lack of adequate attention given to the child due to chaos created by multiple siblings or family members present, or the parent's own mental health or substance abuse problems.
- Child's parents were unaffectionate, unwelcoming or displayed behaviors that the child perceived as rejection.
- Reliving abuse, neglect or trauma during family time.
- Reliving the trauma of removal from their parent or fear of not seeing their parent again.
- Sensing the parent or foster/adoptive parent's anxiety, anger or distress during family time.
- Confusion about the relationship between the child's parents and foster parents, such as undermining each other or having negative interactions.
- Feeling a need to reject the foster parents after family time in loyalty to their parents.
- Fear of an unfamiliar person transporting the child from family time.
- Normal feelings of sadness and loss when family time visits end.

Encourage the child in your care to openly share their feelings if and when they are ready.

- Be intentional by providing affection, quality time and reassurance to the child; this is important after each family time visit but is critical when it does not go well.
- Ask the child how they felt family time went. If they are not ready to talk, give them space to process and decompress.
- Let the child talk without interruption about their feelings regarding family time and seeing their parents
- Explain your understanding of how difficult it is for the child to visit their family and then leave again.
- Encourage the child to ask any questions regarding family time and answer transparently when possible.
- If the child voices concerns, reassure the child and discuss with the Child Welfare (CW) specialist.
- Share with the CW specialist if the child is consistently upset or has severe behaviors regarding family time. Discuss what has or has not worked to help de-escalate their behavior and if therapeutic family time could benefit the child and parent. Professional mental health services may be needed for the child if they are not already in place.



family TIME

Family TIME



Handle canceled family time visits delicately.

If family time is canceled or the family does not come, it may be hard for the child in your care and they will need additional support. Here are some suggestions:

- Objectively share with the child that family time is canceled or the parents cannot come when you become aware without criticizing or blaming anyone involved.
- Immediately reassure the child that the visit was not canceled because of them, or anything they did or did not do.
- Offer the child an opportunity to make a phone or video call to their parent, when appropriate; the child may experience anxiety until making sure the parent is okay.
- Spend quality time with the child and do an activity together to foster connectedness.
- Give the child grace and patience if they are distressed or upset; they are possibly disappointed, sad or angry.
- Remind the child they are loved.

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While family time can be challenging for children at times, it is critical to keeping a child connected to their family. You play an important role in helping to ensure that family time can be a positive and encouraging experience for a child. If you have concerns about your child's family time, don't hesitate to reach out to your child's team for assistance or support.

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OKLAHOMA Human Services

Who Can Be Around Foster Children?

As a resource parent, OKDHS understands that you may have questions about who can be around foster children placed in your home. Whether it is an individual visiting your home and family, or someone providing a much needed break from caregiving, OKDHS wants to support you in making good decisions regarding the individuals that are around foster children. Having open and honest conversations with your resource specialist regarding individuals who are around children in the home can be helpful in making those good decisions. Include them in your questions and as a team find solutions together. We are all working to keep children safe.

It is important that you apply the same standards to each person who visits your home that will be around foster children, including family members, friends, and informal caregivers. You must consider that person's personal history as well as his or her history with children. Below is a list of questions to ask yourself prior to allowing other individuals around foster children placed in your home. This is not an all-inclusive list but a starting off point for things to consider.

- What do you know about the individual's background or personal history? This includes known incidents, allegations or concerns, as well as charges or convictions he or she may have. Does he or she have a history including any of the following, but not limited to:
  - Substance use and/or abuse, including alcohol
  - Physical violence
  - Allegations or concerns that involve things of a sexual nature
  - Child Welfare involvement, such as investigations regarding abuse, neglect, lack of supervision, or threat of harm
- Have you observed this person around children? How does he or she interact with children?
- Is this someone who you accept as "ok" because they are family, or familiar with your family, but you aren't fully aware of their background? If so, don't be afraid to ask more questions.
- What role will this individual have with the foster children? For example:
  - Do you expect the individual to visit your family briefly and have supervised or unsupervised access to the foster children?
  - Do you expect the individual to watch over the foster children as sole caregivers? See Informal Caregiver section below.
- If the individual is a family member of the foster child, have you talked with the permanency planning specialist, or your resource specialist, to verify if he or she can be around the foster child?

What Is an Informal Caregiver?

An informal caregiver is someone who can provide care for foster children for up to three consecutive days in order to give you a break. Talk with your resource specialist regarding your choice of informal caregiver(s) for any insight your specialist might have. ***Refer to OKDHS policy regarding this topic on the back of this page.***

340:75-7-65. Child care and support services for the resource home

(h) ***Informal care arrangements for the foster child.*** Resource parents may make informal care arrangements with friends, neighbors, or relatives for the foster child's occasional care.

(1) Resource parents must ensure the informal care provider possesses the maturity and skills to address the child's needs.

(2) The foster child may stay with a friend, when the resource parent:
(A) knows the family;
(B) reasonably believes the family, household members, and environment are safe for the child; and
(C) exchanges contact information, including names, addresses, and phone numbers.

(3) The resource parent notifies the resource specialist when using informal care arrangements. The resource parent may not use an informal care provider who the resource specialist determines is unsafe.

(4) The resource parent must obtain permission from the foster child's assigned CW specialist before allowing the foster child's relatives to provide informal care for the child.

(5) An informal care provider, living outside of the resource parent's home, must be 18 years of age and older.

(6) A teenager living in the resource parent's home must be 16 or 17 years of age, related to the resource parent, and is limited to providing 12-consecutive hours of informal care. The resource specialist and the resource parent assess the teen's ability and appropriateness to assume responsibility for the foster child and ensure his or her needs and well-being can be met.

(7) The resource parent does not use a child in OKDHS custody to care for a younger child unless approved by the resource specialist.

(8) Informal care providers are notified on how to reach the resource parent and other emergency contacts.

(9) An individual providing informal care for more than 72 consecutive hours must be an approved alternate caregiver.

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Caring for Foster Children

Who Else Can Provide Care?

Sometimes children need a break from their daily routine. Activities, time with their birth family, and friends can build a child's self-esteem and reduce the stress of separation from their birth family. It's important for you, as a foster parent, to take a break too! Breaks can provide time to recharge, regroup, and refocus which all help prevent burnout.

Informal caregivers may provide care for up to 72 hours. Foster parents should select individuals who possess the maturity and skills needed to address the child's needs. If a child will be with another caregiver for between 4 and 14 days, that caregiver must be approved through the agency as an alternate caregiver. In both instances, foster parents should select other individuals who they know, trust, and believe will provide a safe place for their foster children. Foster parents may also access formal respite caregivers that are approved foster homes.

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Below is a chart comparing requirements between informal and formal respite care providers.

	Informal Care	Alternate Caregiver	Respite Care Provider
Time limit	Up to 72 hours	Less than 14 days	Less than 14 days
Reasons for use	Date night, before or after school care, weekends away, etc.	Unexpected emergencies, out-of-state family events, etc.	Short-term break
Age requirement	18 years old	18 years old	21 years old
Background check required	No	Yes	Yes
House assessment completed by OKDHS/Agency	No	Yes	Yes
Provider approved by OKDHS/Agency for care	No	Yes – specific requirements are met	Yes – fully approved foster family
Approval needed by OKDHS/Agency prior to use	OKDHS homes - Yes* Agency homes - Yes**	Yes	Yes
Reimbursement	Refer to your Foster Care Specialist*	Refer to your Foster Care Specialist*	Refer to your Foster Care Specialist for details
Existing relationship with foster family	Yes	Yes	Not required
Examples of providers	Friends, church members, neighbors, relatives	Friends, church members, neighbors, relatives	Fully approved foster family

* **Prior to utilizing other caregivers, always notify your foster care worker, and in the event it is a relative also talk with your child's worker first.**

** **Refer to Foster Care Specialist for additional details.**

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Discipline Methods for Foster Children

What is discipline?

Safe practices or methods of teaching and enforcing acceptable patterns of behavior. This method does not allow corporal punishment.

How can I effectively discipline?

Positive Behavior Management

- Rewards can include treats, toys and symbols of recognition (i.e. stickers, money).
- Privileges allow the child to experience more freedom and increased responsibility.
- Praise is communicated by a verbal or nonverbal expression of child's achievements or good qualities.

Self-Control

- Planning and preparation prevents confrontation, acting out and negative behaviors by establishing expectations for the child and creating a structured, safe environment.

Direct Intervention

- Techniques appropriate for responding to lack of self-control include: 1) rules, 2) time out, 3) restricted privileges, 4) grounding, 5) logical consequences, and 6) natural consequences.

What can I not do?

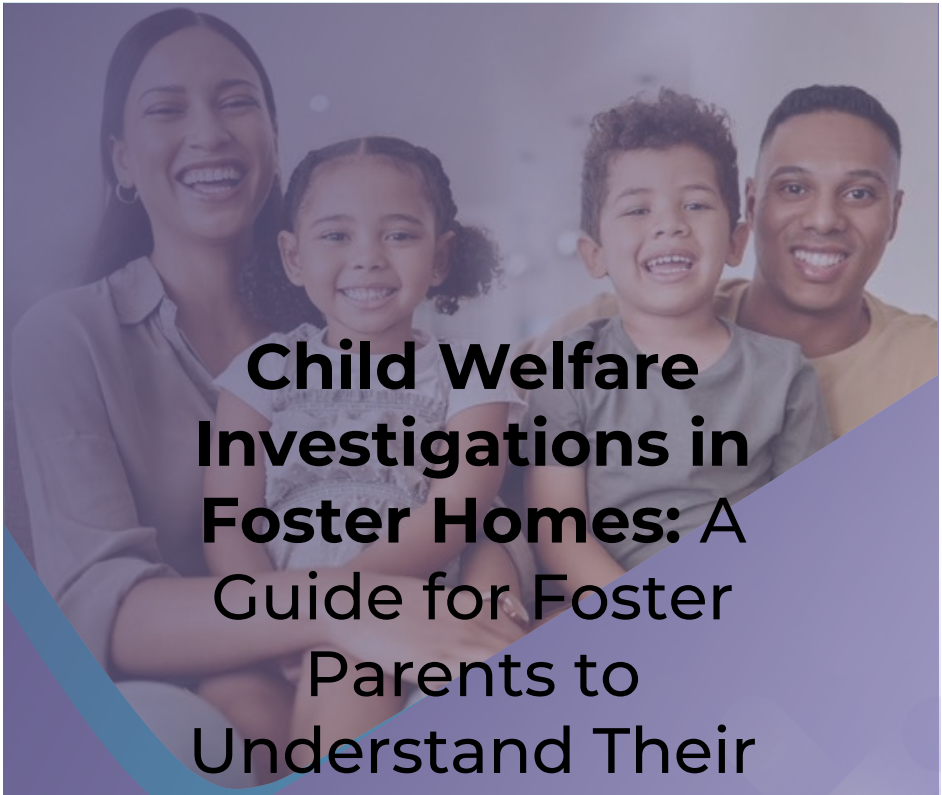
- Children can never be physically disciplined.
- Permission cannot be given to school personnel for corporal punishment.
- Some unacceptable behavior techniques include: a) deprivation of food or sleep, b) deprivation of family visits, c) cursing or other verbal abuse, d) derogatory comments about the child or biological family, e) holding child in an unnatural position, f) washing mouth out with soap, and g) forced physical exertion.

Who can I call when discipline methods are not working?

- Contact the child welfare worker to establish alternative discipline methods.

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Human Services

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Child Welfare Investigations in Foster Homes: A Guide for Foster Parents to Understand Their Rights and Responsibilities

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Human Services

You Are Not Alone!

As a foster parent, you may experience a report of abuse or neglect regarding the children placed in your home. This can happen for numerous reasons. It is important to remember children in out-of-home care have experienced trauma and are particularly vulnerable. If you find yourself experiencing an investigation, remember:

- YOU ARE NOT ALONE!
- Just because an allegation has been made, Oklahoma Human Services DOES NOT assume that abuse/neglect occurred; a thorough assessment of child safety and investigation is completed before any decision is made about the allegations.
- This may be a difficult time for you and may cause disruption within your family.
- You may experience feelings of fear, embarrassment, shock or anger.
- You will have questions about the process. Ask them.
- Investigations seek to reveal facts and specifics around the circumstances of an incident. During this process, the incident is examined objectively, facts are documented and information is used to make a finding.
- Communication with your worker regarding the children placed in your home is critical.



Foster families are at higher risk for allegations because:

1. Foster families are more closely observed than families in the general public.
2. The addition of foster children may alter your current family dynamics.
3. Children who have experienced trauma may display behaviors as a result of the trauma experienced. These behaviors are a form of communication that can be supported with different parenting tools provided by community resources.
4. Children may display behaviors that require additional supports while placed in a foster home.
5. Children may develop a level of safety with you and disclose information that may require reporting.
6. Some children experience difficulty trusting adults due to their background and may experience challenges adjusting to a family setting.



Mandatory reporting laws

Children in state custody are more vulnerable and Oklahoma Human Services is required to protect them from subsequent abuse or neglect while they are in custody.

State law requires all people who believe that a child has been abused or neglected to make a report to the Oklahoma Human Services Statewide Abuse and Neglect Hotline at 1-800-522-3511. This law requires the agency to investigate the reports of child abuse or neglect for the primary purpose of protecting children.

Reporting and Assignment:

When a call is received at the Oklahoma Human Services Abuse and Neglect Hotline, the information is documented in a Referral Information Report. The report is carefully evaluated to determine if the referral meets criteria to be accepted for investigation. All decision-making is fully documented by the child welfare (CW) specialist. All accepted abuse/neglect referrals involving children in foster homes will be investigated. Screened out referrals are referred to your foster care specialist.

1. Reports can be screened-out and referred to CW permanency planning, foster care and adoption staff to address concerns regarding policy or rules violations.
2. An accepted report is fully investigated and a report documenting the interviews and findings is submitted to the appropriate district attorney. The findings of the investigation can be substantiated, unsubstantiated or ruled out. A finding of substantiated means that an incident in the home did occur that rose to the level of abuse and/or neglect.
3. When Oklahoma Human Services receives a report that a child has an unexplained injury in a foster home, the child's CW specialist immediately interviews and observes the child, caregiver and witnesses. If it is determined the injury was the result of an accident, the CW specialist documents the information and the report is screened out.

What information will be collected from me in an investigation?

It is a CW specialist's responsibility to find out all she or he can about the situation. Law enforcement may conduct a joint investigation with the CW specialist.

The CW specialist collects the following types of information through private interviews with the persons in the home:

1. A description of the alleged incident that lead to the report;
2. Identification of all residents/caregivers in the home;
3. A complete description of any injuries to the child, which may include asking a physician to help determine the severity of the injuries;
4. A description of the child and other children in the household;
5. A description of the home environment;
6. A description of the family dynamics social and environment; and
7. A description of the family's strengths and needs.

Some of the information-gathering, especially the descriptions, can be very in-depth. Be prepared for a lot of questions! Detailed information is collected to understand how well the foster parent can protect the child(ren) in their care. This information is used to assist in determining if abuse or neglect occurred and may include:

1. Disciplinary techniques and strategies;
2. Ability and understanding of the supervision needs of the child;
3. Interest in protecting child from danger;
4. Physical and behavioral health;
5. Criminal history;
6. Motivation for caring for children;
7. Knowledge of social, emotional and behavioral development and trauma history;
8. Intellectual functioning;
9. Recognition of strengths and needs; and
10. Financial status and work history.



What are my rights?

1. You have the right to be informed of the allegation made against you. Oklahoma Human Services is not authorized to disclose who made the allegation.
2. You have the right to provide your information about the incident being investigated.
3. You have a right to have an attorney represent you at your cost.
4. You DO NOT have the right to deny the CW specialist access to the child in state custody.
5. The agency will determine if the child in foster care should remain in your home during the investigation or if there is a need to move the child. Should there be a need to place the child(ren) outside of the home, you will have the ability to have input on an alternative caregiver the child may already know. You can also provide names of other adults who are aware of the situation.
6. Any allegation that is substantiated automatically receives a program review by the Child Protective Services (CPS) Programs Unit.
7. Oklahoma law requires foster parents who are found to have abused or neglected a child in their care to be subject to placement on the Restricted Registry maintained by Oklahoma Human Services Child Care Services (CCS).

How to prepare for the placement of children into your home

Prior to placement of a child in state custody into your home:

1. Get as much information about the child as possible before you accept a placement. Ask about the child's trauma history and potential triggers.
2. Understand how trauma can impact brain development.
3. Understand normal child development.
4. Don't be afraid to say no to a placement if you feel you may not be able to meet the child's needs.
5. Communicate with the child's CW specialist and your resource specialist often and honestly. If your specialist knows there are problems, the specialist can assist you before things get out of control.
6. Seek outside resources and assistance immediately if behaviors or issues arise that are becoming out of control.
7. Attend trainings available to you.
8. Keep logs/notebooks on each child to document visitation with family members, medical appointments, school progress/problems, medical needs, behavioral patterns or changes and efforts to teach acceptable behavior.
9. Document any changes in behavior in children including type, severity and duration of these changes, especially after parental visitation. Include any action taken to deal with inappropriate behavior. Also document any unusual behavior the child has regarding social workers, police or medical personnel.
10. Report injuries to the head, face, neck, stomach, and back promptly, but no more than 24 hours from when the injury occurred.

11. Always document any serious conflicts with parents, children, social workers, counselors, teachers, etc.
12. Always inform your resource specialist if you intend to have new adults around the children placed in your home on a consistent basis or have anyone moving into your home or onto your property.

If you accept a child who is considered high-risk and/or who has had numerous placements:

1. Talk with the CW specialist about the child's trauma.
2. Allow the child to discuss his or her history of abuse/ neglect at the child's pace and when the child wants to discuss it.
3. Tell the child that you plan to protect him or her and yourself.
4. Enlist the help of a competent professional who is experienced in working with survivors of trauma, such as a therapist or other professional. You and the child will need ongoing therapeutic support from a person who knows you well. Your CW specialist can assist you in initiating therapy.
5. Discuss with your CW specialist the level of supervision the child needs and make a plan for supervision and safety issues, especially for younger children. Children who are in state custody often have fewer boundaries than other children.
6. Closely supervise children at all times.
7. Be aware of places in your home where children might hide and monitor them frequently.
8. Leave nap room doors open and periodically check on children during these times.



9. Conduct frequent safety checks and make sure all hazardous materials are securely put away. Safety guidelines cannot be compromised.
10. Never use, or threaten to use, corporal punishment as a means of discipline. This form of discipline is not authorized for foster parents and is a policy violation, but can also initiate an investigation when used on children 5 and under.
11. Carefully screen relatives and friends who come into your home. Make sure they understand licensing regulations, house rules and any specific restrictions about individual children because of previous abuse, court orders, etc.
12. Do not be alone with a child is who is sexually reactive, acts out sexually, or has provocative behavior. Advise adults and older children in the household to have another adult nearby or in the same room for the protection of both the adult and the child.
13. Children who have previously experienced sexual victimization are more vulnerable to repeat victimization. Always take new allegations seriously and make a report, even if a child has a history of making false allegations. It is the duty of the foster parent, working together with professionals, to protect the child and give the child functional boundaries and self-protective strategies.



OKLAHOMA
Human Services

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This publication is authorized by Oklahoma Human Services Director Dr. Deborah Shropshire and printed in accordance with state and federal regulations at a cost of $4,823.49 for 12,500 copies. Copies have been deposited with the Publications Clearinghouse of the Oklahoma Department of Libraries. Members of the public may obtain copies by calling 1-877-283-4113 (toll free) or by downloading a copy at https://oklahoma.gov/okdhs/library.html.

BASIC CAR SEAT SAFETY

Be sure to buckle up the right way on every ride!

SAFE KIDS WORLDWIDE™

All children must use a car seat, booster seat or seat belt.

- My child always rides in a back seat and never in front of an airbag.
- Everyone in my car buckles up on every ride using the right car seat, booster seat or seat belt for each person's age and size.
- My child's car seat has all of its parts, labels and instructions and has never been in a crash.
- I follow the instructions for my car and my car seat so that my child is buckled in right and tight.
- My child's car seat has never been in a crash.
- I never leave my child alone in a car.



Use our online Ultimate Car Seat Guide for information on all your car seat needs. www.safekids.org/ultimate-car-seat-guide

Proud Program Supporter

CHEVROLET

Babies under 2 use rear-facing car seats

- My child always rides in a back seat and never in front of an air bag.
- My child always rides in a car seat made for his or her size and age.
- My child sits facing the back of the car in his or her car seat.
- The harness straps are snug on my child, and I can't pinch the buckled strap at the shoulder.
- My child's car seat is buckled tightly in the car and doesn't move more than one inch when I pull it where the seatbelt is buckled/attached.
- My child uses a bigger rear-facing car seat until he or she outgrows the harness. Many harnesses go to 35, 40 or 45 pounds.
- I never leave my child alone in a car.



Toddlers and big kids use forward-facing car seats with a top tether

If my child is over age 2 AND has outgrown the weight or height limits for the rear-facing seat:

- My child always rides in a back seat.
- My child always rides in a car seat made for his or her size and age.
- The harness straps are snug on my child, and I can't pinch the buckled strap at the shoulder.
- My child's car seat is buckled tightly in the car and doesn't move more than one inch when I pull it at the belt path. I use the top tether.
- My child uses this car seat until he or she outgrows the harness. Many harnesses go to 50 pounds or more.



Older, bigger kids use booster seats with lap and shoulder seat belts

If my child has outgrown the weight or height limit of the forward-facing car seat:

- My child always rides in a back seat.
- My child always rides on a booster seat using a lap and shoulder seat belt.
- The lap belt sits low on his or her hips, not the stomach.
- The shoulder belt is on my child's shoulder – not on the neck, under the arm or behind the back.
- The seat belt is snug, flat and comfortable on my child.
- My child may be between 8-12 years of age before the seat belt fits without a booster.



Kids ready for seat belts

If my child has outgrown the booster seat:

- My child always rides in a back seat until age 13.
- My child always uses a lap and shoulder seat belt.
- The lap belt sits low on my child's hips, not the stomach.
- The shoulder belt is on my child's shoulder – not on the neck, under the arm or behind the back.
- My child's back is firmly against the vehicle seat back, his or her knees bend at the front edge of the vehicle seat, and he or she can sit this way for the whole ride.
- The seat belt is snug, flat and comfortable on my child. If the seat belt does not fit right, my child must use a booster seat.



©2017 Safe Kids Worldwide

KNOW THE LAW. PROTECT YOUR PRECIOUS CARGO.

1 OUT OF 2 KIDS

ARE NOT AS SECURE AS THEY SHOULD BE

because their car seats are not being used correctly.

Properly installed car seats and booster seats reduce the chance of death in a motor vehicle crash by 71% for infants under 1 year **71%**

54% **and 54% for toddlers ages 1 - 4.**

FOR MORE INFORMATION:

Have your child's car seat or booster seat checked by one of the many certified child passenger safety (CPS) technicians available throughout the state.

To find a CPS technician

Visit cert.safekids.org and select "Find a Tech."

Oklahoma State Department of Health Injury Prevention Service

405-426-8440
oklahoma.gov/health/cps

Oklahoma's Child Passenger Safety Law, effective November 1, 2015, meets the recommendations of the American Academy of Pediatrics.

OKLAHOMA State Department of Health

Oklahoma Children's Hospital OU Health

SAFE KIDS OKLAHOMA

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Child Passenger SAFETY GUIDE

KNOW THE LAW











Oklahoma's Child Passenger Safety Law

OKLAHOMA'S

CHILD PASSENGER SAFETY LAW

Know the Ages & Stages

BIRTH - 2 YEARS



REAR-FACING

INFANT | CONVERTIBLE | 3-IN-1

All children under age 2 must be properly secured in a rear-facing car seat.

- Rear-facing is the safest way for small children to travel.
- They should remain rear-facing until they reach 2 years of age or until they exceed the height or weight limit of the car seat.

2 - 4 YEARS



FORWARD-FACING

CONVERTIBLE | 3-IN-1 | COMBINATION

All children under age 4 must be properly secured in a car seat with an internal harness.

- A 5-point harness is the safest restraint system and should be used as long as possible (until the child exceeds the harness' weight limit).

4 - 8 YEARS



BOOSTER

3-IN-1 | COMBINATION | BOOSTER

All children at least 4 years old (but younger than age 8) must ride in a child passenger restraint system or booster seat, ***unless they are taller than 4'9".***

- A booster seat should be used until the child can properly fit into a seat belt.

8 YEARS +



SEAT BELT

BACK SEAT FOR SAFEST TRAVEL

All children taller than 4'9" (or age 8 and up) should be restrained in a seat belt.

- Front seat airbags may hurt small children.
- Riding in the back seat of the vehicle is the safest way for children to travel.

Important Tips:

FITS YOUR VEHICLE

Not every car seat can be installed correctly in every car. Try before you buy.

KNOW THE LIMITS

ALWAYS follow the weight and height limits of the car seat.

AGE IS IMPORTANT

The younger children are, the more fragile they are, and the more protection they need.

EASY FOR YOU TO USE

Try out the features of the car seat. Choose a car seat that will be easy for you to use correctly every time.



Your family's WIC benefits will be credited to your *e*WIC account. You will use your **Oklahoma *e*WIC Card** to purchase your WIC benefits at stores displaying the **Oklahoma *e*WIC Card Accepted Here** sign. Having *e*WIC does not change the amount of your WIC foods; it just makes getting your WIC items easier.

Most stores process *e*WIC in all checkout lanes. Look for **Oklahoma *e*WIC Card Accepted Here** signs in stores with select WIC lanes. Check with your store to better understand their process. The following steps describe the general process for completing an *e*WIC transaction and may differ slightly from store to store.

1. With your *e*WIC card, current benefit balance and **Oklahoma Unified WIC Approved Food Card**, select the food items you need.
2. When you are done shopping, choose a checkout lane that accepts WIC.
3. Some stores require you to separate WIC items from other purchases. Ask if this is needed.
4. Tell the cashier that you are using an **Oklahoma *e*WIC Card**.
5. The cashier scans items to confirm they are WIC approved and can be purchased that day.
6. You or the cashier swipes the *e*WIC card.
7. Enter your four digit PIN.
8. The cashier gives you a receipt. Make sure you leave with your card and receipt.



Frequently Asked Questions

How do I get WIC benefits on the eWIC account?

You get your WIC benefits on your **Oklahoma *e*WIC** account during your WIC clinic visit. You will receive a list of your family's WIC benefits for the current benefit month and for future benefit months. It shows the start and end dates for the benefit months.

What information do I need to access my eWIC account?

The name, date of birth, and zip code of the primary cardholder are needed to access account information.

Do my WIC benefits expire?

Yes, WIC benefits are used for the period of time they were issued for. For example, if the start date is 11-20 and the end date is 12-19, the benefits must be used within those two dates. Any unused benefits will expire.

Do I have to redeem all the WIC benefits at once?

No, WIC benefits may be redeemed as needed as long as benefits are available.

Is my eWIC card reusable?

Yes, each time you are issued benefits they will be loaded to your *e*WIC account. Keep your card.

How will I know my WIC benefit balance?

You can get a benefit balance by checking your last store receipt, by calling Customer Service, by accessing the Cardholder Website at **www.ebt.acs-inc.com**, or by signing up for your balance to be texted.

What is a PIN?

PIN stands for Personal Identification Number. It is a four digit secret code that allows you to use your *e*WIC card. You will select your PIN when you activate your *e*WIC card.

How do I get my PIN?

You will select your four digit PIN when you first get your *e*WIC card. To activate your card and select a PIN, call Customer Service at 1-866-562-2702.

You will need to know the 16 digit card number, the zip code, and date of birth of the primary cardholder.

How do I choose my PIN?

Choose a PIN that is easy for you to remember, but hard for someone else to guess.

How do I keep my PIN safe?

If someone knows your PIN, they can use your card to get your benefits and those benefits will not be replaced. When entering your PIN, be sure no one else can see the number you are entering. Don't write your PIN on your *e*WIC card or *e*WIC booklet, and do not keep it written down in your wallet or purse.

What if I forget my PIN or need to reset it?

If you forget your PIN, call Customer Service to choose a new PIN. You will need to know the primary cardholder's name, zip code and date of birth.

What do I do if someone finds out my PIN?

Change the PIN.

What if I enter the wrong PIN at the store?

If you enter the wrong PIN, you will have two more chances to enter the correct number. If the correct PIN is not entered on the third try, you will not be able to use your card until 12:01 AM Central Standard Time the next day.

What if I lose/damage my eWIC card?

If you lose or damage your *e*WIC card, call Customer Service or the clinic to cancel your card and then go to your clinic to be issued a new card.

How do I take care of my eWIC card?

- Keep your card safe and clean.
- Keep the black strip on the back free from scratches.
- **DO NOT** bend, fold or twist it, punch holes, or use it to scrape windshields or open door locks.
- **DO NOT** store it near magnets or electrical equipment like cell phones.
- **DO NOT** leave it in the sun or other hot places like the dashboard of your car.

What if the store's eWIC equipment is not working?

If the store's equipment is not working, you can go to another store that accepts the *e*WIC card.

What if one of my food items is not accepted?

If there was an item you expected to be covered by your WIC benefits but was not, it could be for the following reasons:

- The item may not be included in your list of foods issued.
- You may have already used the issued amount of that item.
- The item may not be an approved food on the **Oklahoma Unified WIC Food Card**.
- The product's barcode may have changed or become unrecognized by the program's system. If you suspect this to be the case, notify Vendor Service at **1-888-655-2942**.

What if my eWIC card won't work or I get an error message?

- Card Not Found – contact your clinic
- Invalid Pin – you may have entered the wrong PIN, try again if you know the correct number
- Benefits Expired – you no longer have benefits

What if I question something that happens to my benefits?

If you have a question about your benefits, contact your clinic.

What if I want to buy non WIC items while I'm shopping?

Procedures may vary by store, but generally you will want to use your *e*WIC card first to pay for WIC foods. Then you can use other forms of payment such as SNAP benefits, gift cards, debit card, cash, or checks to pay for other items.

What if I move or change address?

Contact your clinic if you move or change address to update the primary cardholder's zip code. This will be used as an identification when making changes on your account.

What if I need someone else to do my WIC shopping for me?

Be careful if you give someone your card and PIN as they could redeem all of your WIC benefits. These benefits will NOT be replaced.

What happens if I need to change my WIC benefits including infant formula?

Talk to clinic staff about changing your WIC benefits. Having *e*WIC does not change this process.

What information appears on a receipt?

A receipt shows the foods and quantities of WIC foods purchased, remaining WIC benefits, and when those benefits expire. Keep your receipt so you know what WIC foods remain on your account.

What is the Customer Service telephone number?

1-866-562-2702

This number is also located on the back of your **Oklahoma *e*WIC Card**. You can call this number, free of charge, 24 hours a day, 7 days a week.

What is the Cardholder Website?

The Cardholder Website is for the primary cardholder to view benefit and transaction information specific to their *e*WIC account. You will also be able to sign up for email or text notifications about your benefits and access information about the WIC program and using your *e*WIC card. The Cardholder Website is **www.ebt.acs-inc.com**.

Examples of when to call Customer Service:

- If your *e*WIC card is lost or stolen.
- If your *e*WIC card is damaged or will not work.
- If someone is using your *e*WIC card without your approval.
- If you need to know your WIC benefit balance and do not have a list from the clinic or last store receipt.
- If you forget your PIN or would like to reset your PIN.
- If you need to opt in or out of mobile inquiries.
- If you have questions or need help with your *e*WIC card.

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Welcome to Oklahoma *e*WIC

Xerox State & Local Solutions, Inc.

This guide will help you keep your Native American or Alaskan Indian foster child connected to their heritage. The Indian Child Welfare Act of 1978, which addressed out-of-home placements and tribal affiliation, requires foster parents to keep a child connected to their tribe and culture. When a child stays connected to their tribe and culture, they gain awareness of their identity and develop better self-esteem. Maintaining your respect for the Native American child, family and tribe leads to more successful outcomes for the child.

Ask the OKDHS child welfare (CW) specialist the following:

1. Ask which tribe the child belongs to.
2. Ask who the Indian Child Welfare (ICW) worker (also known as tribal worker) is and for their contact information. If the CW specialist does not know, contact an OKDHS Tribal Coordinator to assist you.
3. Ask for a copy of the child's tribal membership card and Certificate of Indian Blood (CDIB) card.
4. If the child does not have a tribal membership card or CDIB card, ask the CW specialist or ICW worker to help you obtain the cards.
5. If the child/children are eligible to be members of more than one tribe, it is up to the child's parent/custodian to decide membership. If the parents are not involved, refer to the tribes involved in the case.
6. Each tribe offers different resources for tribal children, such as cultural camps during the summer or online language classes. Please refer to their website for more information.
7. Completing the Circle is an annual event planned by tribes and OKDHS that aims to connect children to their tribe, culture and heritage. Visit the event's website for more information: https://events.oucpm.org/ctc/

Adoption of an Indian Child:

1. There must be a Good Cause Hearing for or all placements-kinship, tribal and non-tribal and adoption.

2. The tribe must agree to the adoption and sign documents stating such.

3. If the child is eligible to be a member of two or three or however many tribes, then please ensure this is in the adoption papers. This is important because as the child becomes an adult they may identify with one of the other and choose to enroll or unenrolled in such tribe.

OKLAHOMA
Human Services

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Navigating the OKDHS and tribal world can be challenging. Here are a few tips to help you along the way.

Thank you for fostering our Native American and Alaskan Indian children!

OKLAHOMA
Human Services



Ask an ICW worker (also known as a tribal worker):

1. Ask what programs or resources are available to the child and how to access them. Some tribes have cultural packets they can send to you.

2. Some tribes will require the child to live in their tribal jurisdiction to access programs or resources.

3. Ask about customs or ceremonies you should be aware of to ensure the child stays connected to their culture.

4. If an ICW worker is not assigned to the case, locate the tribal website and go to the Culture tab on the site. There should be a contact number or email to ask the above questions. Some tribes will have Elders who can advise you.

5. If you are unable to locate tribal information on their website, contact an OKDHS Tribal Coordinator to assist you.

If you live in Tulsa County:

1. The case will be heard in the new Indian Child Welfare Act (ICWA) Court. The ICWA Court is set to hear all Native American child welfare cases on one specific day and by a specific judge. Tulsa County also has OKDHS ICWA units that are assigned cases. An ICWA unit is simply a unit that works more closely with tribes.

2. If you have additional concerns or questions, ask your OKDHS Specialist or an OKDHS Tribal Coordinator.

3. You can find contact information at: https://officemgmtentserv.sharepoint.com/sites/CWS/SitePages/Tribal.

Things to know:

Every Tribe is different and unique. There are 38 Federally Recognized Tribes in Oklahoma. The majority of these tribes only have one or two ICW workers on staff to serve the entire United States.

Tribes are Sovereign Nations and can choose to become involved or not involved at any time during the life of the case. Think of a Tribe as if it is a Country with their own policies and laws.

If a child does not live in their Tribal jurisdiction to access programs or resources, but lives in another Tribe's jurisdiction, you can contact that tribe to see if they serve Native American children who are not members of their tribe. Not all tribes do this, so please contact the Tribe in which you live in their jurisdiction.

IMPORTANT* Hair Care:** In several tribes, a person's hair can represent a close cultural identity. This close identity to culture promotes self-esteem, a sense of belonging and self-respect. As part of practicing self-respect, Native children are taught to take good care of their hair and to let it grow. ***DO NOT cut a child's hair until it has been approved by the child's parents or custodians. Contact a Tribal Coordinator if you have any questions or concerns.

Foster Care placement of an Indian child:

Each tribe may have their own placement preferences which must be followed for compliance with ICWA. The general rules apply (if no tribal preferences are available).

1. Placement with relative/kinship

2. Placement in a tribally approved foster home

3. Placement in a tribal foster home approved by a non-tribal agency

4. Placement in a tribal facility *(More on back)*

Foster Parent's Statement of Rights

A statement of foster parent's rights shall be given to every foster parent annually and shall include, but not be limited to, the right to:

- Be treated with dignity, respect, and consideration as a professional member of the child welfare team;
- Be notified of and be given appropriate, ongoing education and continuing education and training to develop and enhance foster parenting skills;
- Be informed about ways to contact the state agency or the child-placing agency in order to receive information and assistance to access supportive services for any child in the foster parent's care;
- Receive timely financial reimbursement for providing foster care services;
- Be notified of any costs or expenses for which the foster parent may be eligible for reimbursement;
- Be provided a clear, written explanation of the individual treatment and service plan concerning the child in the foster parent's home, listing components of the plan pursuant to the provisions of the Oklahoma Children's Code;
- Receive, at any time during which a child is placed with the foster parent, additional or necessary information that is relevant to the care of the child;
- Be notified of scheduled review meetings, permanency planning meetings, family meetings, and special staffing concerning the foster child in order to actively participate in the case planning and decision-making process regarding the child;
- Provide input concerning the plan of services for the child and to have that input be given full consideration in the same manner as information presented by any other professional on the team;
- Communicate with other foster parents in order to share information regarding the foster child. In particular, receive any information concerning the number of times a foster child has been moved and the reasons why, and the names and telephone numbers of the previous foster parent if the previous foster parent has authorized such release;
- Communicate with other professionals who work with the foster child within the context of the team including, but not limited to, therapists, physicians, and teachers;
- Be given, in a timely and consistent manner, any information regarding the child and the child's family which is pertinent to the care and needs of the child and to the making of a permanency plan for the child. Disclosure of information shall be limited to that information which is authorized by the provisions of Chapter VI of the Oklahoma Children's Code for foster parents;
- Be given reasonable notice of any change in or addition to the services provided to the child pursuant to the child's individual treatment and service plan;
- Be given written notice of: (1)plans to terminate the placement of the child with the foster parent pursuant to Section 1-4-805 of this title, and (2)the reasons for the changes or termination in placement.
  The notice shall be waived only in emergency cases pursuant to Section 1-4-805 of this title (the Rights are listed in 10A O.S. § 1-9-119);
- Be notified by the applicable state agency in a timely and complete manner of all court hearings, including notice of the date and time of any court hearing, the name of the judge or hearing officer hearing the case, the location of the hearing, and the court docket number of the case;
- Be informed of decisions made by the court, the state agency or the child-placing agency concerning the child;
- Be considered as a preferred placement option when a foster child who was formerly placed with the foster parent is to reenter foster care at the same level and type of care, if that placement is consistent with the best interest of the child and other children in the home of the foster parent;
- Be provided a fair, timely, and impartial investigation of complaints concerning the certification of the foster parent;
- Be provided the opportunity to request and receive a fair and impartial hearing regarding decisions that affect certification retention or placement of children in the home;
- Be allowed the right to exercise parental substitute authority;
- Have timely access to the appeals process of the state agency and child placement agency and the right to be free from acts of harassment and retaliation by any other party when exercising the right to appeal;
- Be given the number of the statewide toll-free Foster Parent Hotline (1-866-335-9288);
- File a grievance and be informed of the process for filing a grievance (www.okfosterparentvoices.org); and
- Receive a copy of the liability insurance policy the Department of Human Services maintains for every Department-contracted foster home placement.

DHS Pub. No. 18-39 Issued 12/2018 This publication is authorized by Oklahoma Department of Human Services Director Ed Lake and printed by DHS in accordance with state and federal regulations at a cost of $10.97 for 100 copies. Copies have been deposited with the Publications Clearinghouse of the Oklahoma Department of Libraries. Members of the public may obtain copies by calling 1-877-283-4113 (toll free) or by downloading a copy at www.okdhs.org/library.

FOSTER CARE & ADOPTIVE ASSOCIATION OF OKLAHOMA

JOIN OUR FB GROUP!

SUPPORT • CONNECTION • ADVOCACY

You don't have to do this alone...

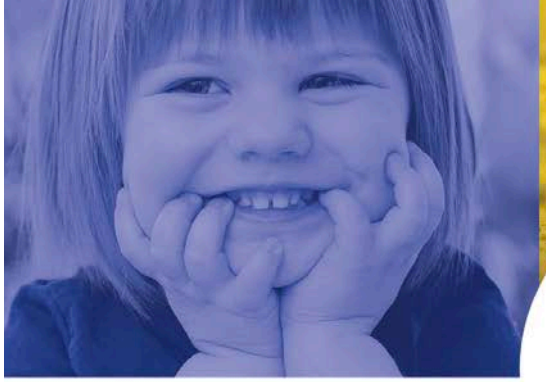
OPEN FACEBOOK

and search for:

Foster Care and Adoptive Association of Oklahoma

1-877-FCAO-411

www.fcao.org







FOSTER CARE & ADOPTIVE ASSOCIATION OF OKLAHOMA

www.fcao.org

About FCAO

Since 1996, FCAO has provided free education and training, led advocacy efforts for positive change in the child welfare system, and built a caring community of mentors and fellow foster and adoptive parents for thousands of Oklahoma families.

Retention Programs and Services

Foster Parent Peer Mentor Program

FCAO has led the charge by starting the first foster mentor program to serve Oklahoma's families. Each mentor is matched with a foster parent for nine months. Mentors provide education, encouragement, and one-on-one support on a daily basis as they help guide foster parents through the barriers inherent in the child welfare system.

Foster Parent Advocacy

Through excellent relationships with OKDHS and current legislators, FCAO is actively involved in policy initiatives and legislative pursuits at the state level.

Events & Support Groups

FCAO offers opportunities for families to enhance their knowledge and skills with free trainings and specialized events held throughout the year. Additionally, free online resources and support groups are available across the state, including a virtual option.

Giveaways

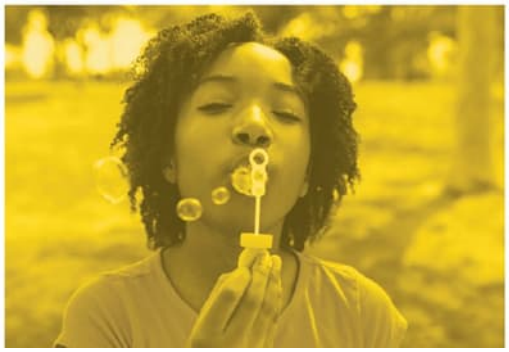
Every two weeks, FCAO gives $150 to a foster parent couple or a single parent to use toward much needed pampering, rest, or unexpected expenses for their children.

Mentee

"Without my mentor, this last year probably would have been the end of my fostering journey. But since I was supported, loved, and heard through it all, I am able to keep pushing even after the last month. Just having someone who is there always and 100% understands how you feel is completely life changing. I think every new foster parent should know about and be apart of the mentor/mentee program!"

Mentor

"I was able to go to court with a mentee last Thursday, and I'm so glad I was there to explain what was happening! It was overwhelming in the most fantastic way."



DHS Recruiter

"[The foster mother] could not be more pleased with how the process has gone. She said that [her mentor] has been extremely helpful and supportive and has been available to answer all her questions. She would recommend the Mentor Program to ALL new foster parents!"

OKLAHOMA FOSTERS

In 2007, the Oklahoma Department of Human Services and the University of Oklahoma's Center for Public Management partnered to create the Foster Care and Adoption Support Center with the primary goal of recruitment and retention of Oklahoma's foster and adoptive families through outstanding customer support.

BENEFIT CARD PROGRAM

The *Foster Parent Exclusive Benefits Program* allows business partners to offer services, discounts, and other benefits to Oklahoma's foster families.

It also makes it easier for foster families to provide food, fun, and educational activities for the kids in their care.

We have a variety of benefits and discounts to help foster families. These benefits include:

- Discounted tickets to certain theme parks
- Percentage off clothing and accessories
- Discounted membership fees
- Photography
- Construction
- And more!



Exclusive

Community

Partnerships

Supports

Check out more partners on okfosters.org/benefits.

If you're interested in becoming a Foster Parent Exclusive Benefits Partner, Visit us at www.okfosters.org/benefits and click **Partner Now.**

Human Services

ABOUT CHILD'S PASSPORT

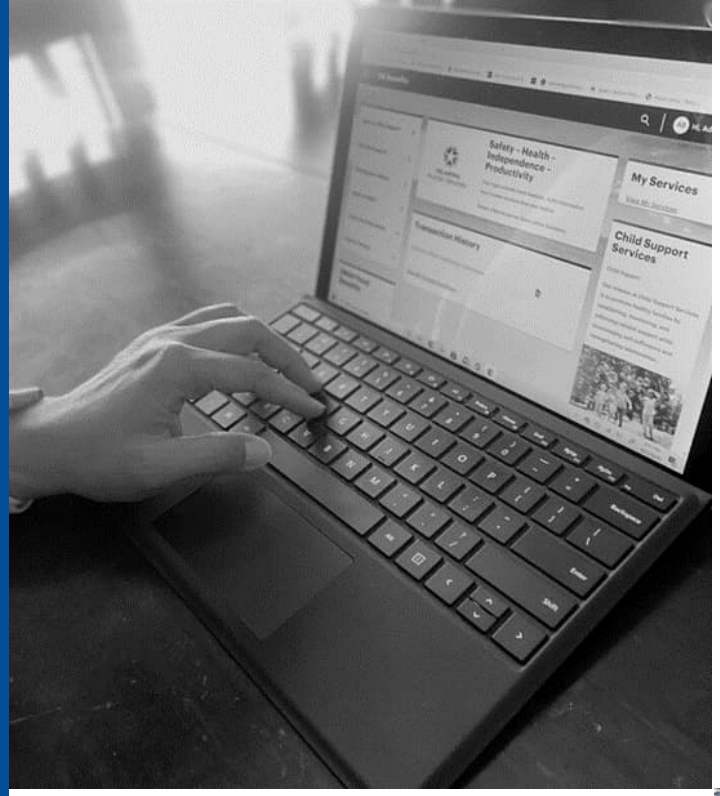
We are very excited to provide you with a revamped Child's Passport. You will be able to access important information about the child in your care by using okbenefits.org

MOBILE FRIENDLY

INTUITIVE DESIGN

ANY TIME OF DAY

CONFIDENTIAL



VISIT OKBENEFITS.ORG

Need help setting up your OK Benefits account?
Call (405) 522-5050

OKLAHOMA
Human Services

OKBENEFITS.ORG

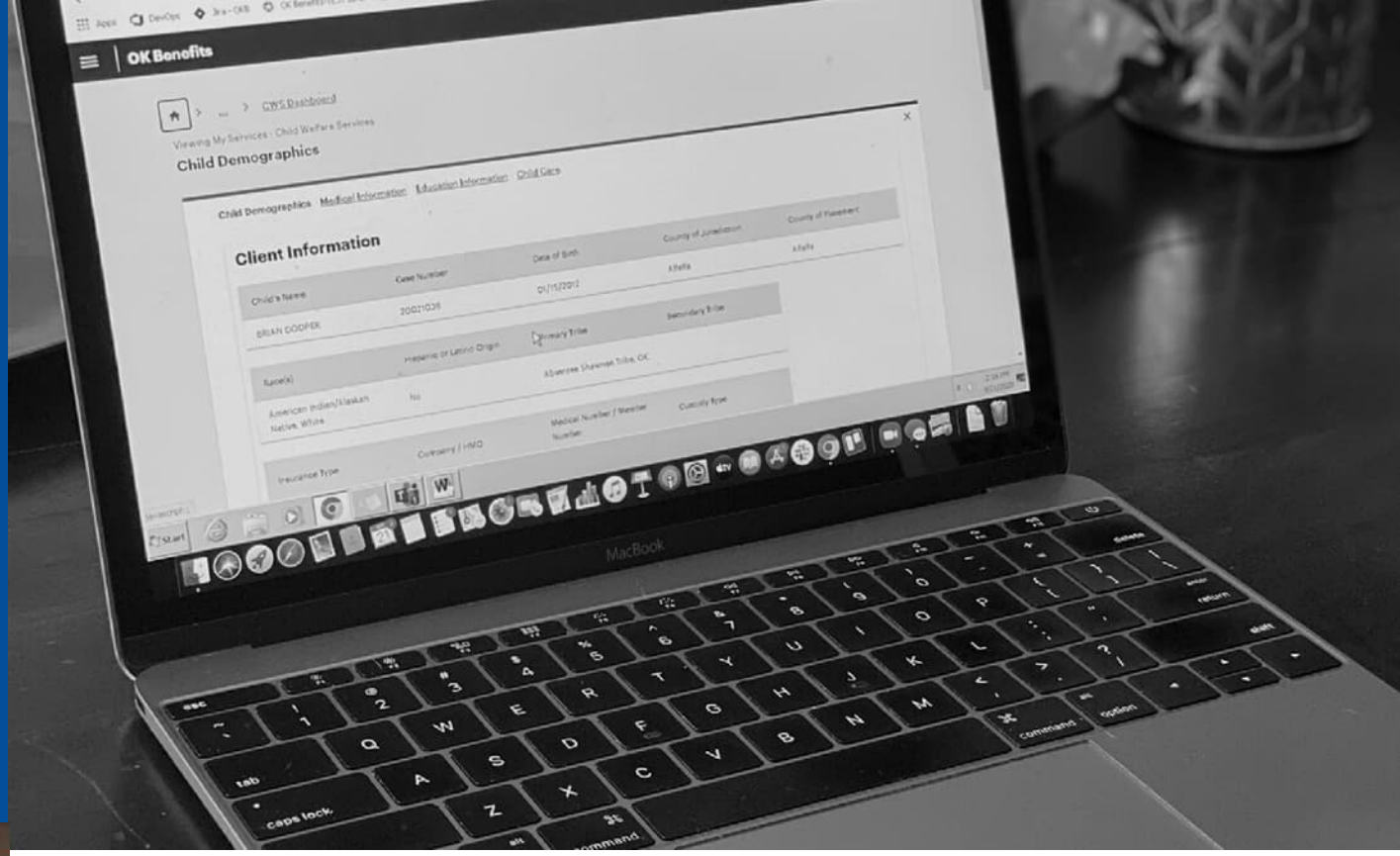
CHILD'S PASSPORT



WHY IS IT IMPORTANT?

Foster families now have the ability to access this information from our intuitive website and mobile-friendly format in the event that you need to enroll a child in school or fill out necessary paperwork at a doctor's office. It can even be used to provide service providers to meet the behavioral health needs of the child.





GET STARTED

Visit okbenefits.org and easily create an account, login, and go to View My Services.

WHO HAS ACCESS?

Only you, the resource parent, has access to the Child's Passport. It is determined by account creation in the OK Benefits portal and the link with our child welfare reporting system.

WHAT INFO IS PROVIDED?

Current foster families will be able to access demographic, educational, medical, and childcare information in regard to the child placed in their home. The information is provided as a collaborative effort on part of several state agencies that include Oklahoma Health Care Authority, Department of Education, and Department of Human Services.

Enhanced Foster Care (EFC)

OKLAHOMA Human Services

Link to EFC Tool Kit

Oklahoma Human Services (OKDHS) strives to provide children with opportunities to gain HOPE and healing.

At no fault of their own, some children develop complex behavioral, medical, developmental and mental health needs that lessen their likelihood for success in traditional foster care. In these cases, Enhanced Foster Care (EFC) can provide children in OKDHS or tribal custody with an elevated level of care that identifies their individual needs and uses a trauma informed approach to facilitate their healing.

EFC services are delivered in the context of two family-based care settings:

- **Enhanced Foster Care Services:** These refer to child-specific services provided to kinship or traditional homes for children already placed in those settings, or about to be placed in one of these identified settings, including as a first placement.
- **Enhanced Foster Care Homes:** These refer to pre-selected traditional foster homes, in which additional training is provided to the family to support the placement of children with no identified family-based placement transitioning from congregate care, acute or residential treatment. Additionally, children who meet the EFC service criteria and who are placed in shelter care[1] or at risk of placement in shelter care can be placed in an EFC home.

True North goals are a set of priorities developed by OKDHS to guide the work of the agency in order to focus resources and improve collaboration and communication with stakeholders. Each of OKDHS's divisions has approximately three to five focused True North goals in addition to eight agency-wide True North goals.

True North Child Welfare Services Goal 2: If children enter foster care, understand and meet their specific needs. This includes their need for safety, connections with family, community and culture, and addressing health, behavioral health, developmental, and educational needs.



EFC Service Elements

Enhanced Foster Care is individualized to the strengths and needs of the child and resource family. The standard services and supports listed below are provided to all children (and their families) receiving EFC.

- Individualized Treatment Plan
- Regular Team Meetings about Treatment
- Monthly In-Home Quality Worker Visits
- Weekly Individual Therapy for the child
- Family Therapy
- 24-Hour Crisis Intervention, including a Crisis Plan
- Supplemental Foster Care Rate (Level 5 DOC)
- Child and Adolescent Needs and Strengths Assessment (CANS)
- Evidence-Based Treatment Models, when appropriate
- EFC Service and Support Plan
- Additional Training for Families Caring for Children with Complex Needs[2]

[1] *As evidenced by youth experiencing placement instability without an identified placement.*
[2] *These families will receive specific modules from Pressley Ridge, an evidence-based curriculum for foster parents.*

Additional services and supports, listed below, are also available as needed.

- Systems of Care - Service Coordination and Wraparound Treatment
- Specialized Services (Developmental Disabilities Services, Medical, Occupational, etc.)
- EFC Resource Parent Support Group

Child Eligibility Criteria

A child must meet at least one of the eligibility criteria below to receive EFC services; the resource parent(s) caring for the child must also agree to actively participate in the child's treatment needs and planning. These criteria are more inclusive but informed by the programmatic criteria commonly used to determine eligibility for Therapeutic Foster Care.

- The Child and Adolescent Needs and Strengths (CANS) assessment indicates the child would benefit from the EFC level of care.
- The child experiences the onset of frequent placement moves from family-based settings due to the provider requesting change of placement or that the provider cannot meet the child's behavioral health needs.
- The child has a minimum of two elevated Child Behavioral Health Screeners (CBHS).
- The child has a provisional or primary diagnosis from the most recent edition of "The Diagnostic and Statistical Manual of Mental Disorders" with a detailed description of the symptoms supporting the diagnosis.

The Co-Neutrals' initial round of EFC case reviews showed foster parents reporting that their treatment plans and wrap-around services provided them with coping skills and therapeutic responses to help the children in their care work through heightened moments of emotional and mental stress and behavioral agitation.

(From the latest Pinnacle Plan[1] commentary)

- The child's conditions are directly attributed to a primary medical diagnosis of a severe behavioral and emotional health need and may also be attributed to a secondary medical diagnosis of a physical, developmental, intellectual, or social disorder that is supported alongside the mental health needs.
- The child's conditions are directly attributed to a mental illness or serious emotional disturbance, a medical issue, or a developmental or intellectual delay.
- There is evidence that the child's presenting problems require full integration of 24-hour crisis response, behavior management or intensive clinical interventions from professional staff to prevent the child from having to move from a family-based placement or to transition to a family-based setting from a higher level of care.
- The child has other specific needs or factors that pertain to the child's permanency, safety, and well-being, as approved by the Enhanced Foster Care Program Administrator.

EFC Referral Process

Enhanced Foster Care is available to any child in custody meeting criteria, including children entering custody in their first placement. Information obtained during the referral process is used to determine eligibility and to support individualized service planning for the child. There are two referral pathways for children to be considered for EFC:

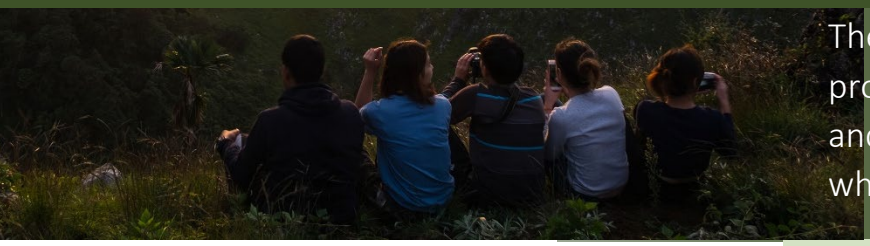
- An Enhanced Foster Care Referral (Form 04EF003E) is completed for children currently or to be placed in an identified traditional or kinship home, and who are identified for EFC services and supports only; or
- The Child Placement Interview is completed for children in need of an identified traditional home placement and meet the criteria for EFC services and support.

Learn more at OKFosters.org and OKDHS.org

[1] *The Oklahoma Department of Human Services (OKDHS) settled a class action, civil rights lawsuit against its foster care system. As part of this settlement OKDHS developed a plan, called the Oklahoma Pinnacle Plan, which guides the agency as it works to improve the way it cares for children in foster care. "Co-Neutrals" refers to an independent panel of experts that provide commentary and assessment on OKDHS' continuing efforts on a semiannual basis.*



SUPPORTING NATIVE YOUTH INTO ADULTHOOD



These resources can help child welfare professionals support the health, well-being, and cultural connectivity of native youth while they journey into adulthood.

Tribal Leadership Series: Youth Engagement (National Indian Child Welfare Association)
Highlighting the importance of youth engagement, this guide offers tips and tools specifically geared toward tribal leaders.

Native American Youth in Transition: The Path from Adolescence to Adulthood in Two Native American Communities (National Indian Child Welfare Association)
Though conducted over 15 years ago, the community-based recommendations in this research report offer relevant insight.

Native Youth Today! Bridging the Gap (Prevention & Recovery)
This edition of the Prevention & Recovery quarterly newsletter focuses on the native youth perspective and offers examples of programs that focus on prevention and promote well-being.

Center for Native American Youth (Aspen Institute)
The CNAY works alongside native youth to help improve their health, safety, and well-being. In various places throughout their site voices of youth are featured as they describe their foster care experience and importance of maintaining cultural connections. See also their report, Drawing Strength from Our Cultures: State of Native Youth 2016.

YOUTH ROUNDTABLES

In 2020, the Children's Bureau held 12 roundtable discussions with youth from across the country who are, or were previously, in foster care. Common themes that arose during these discussions focused on mental health, overall well-being, and social isolation brought on by the current health crisis. Youth are experiencing increased feelings of loneliness, disconnection, and suicidal ideation. This was expressed more during the roundtable with tribal youth.

Additional challenges youth shared during the roundtables:

- Concerns about aging out of foster care during the pandemic without a place to go or a means to support themselves
- Job loss and/or difficulty finding meaningful employment
- Safe and secure housing
- Worries about schools and universities shifting into a virtual learning environment
- Access to healthcare
- Reduced access to reliable transportation
- Reunification and adoption finalization concerns

State child welfare leaders are encouraged to reach out to the local tribes and tribal consortia to better support the well-being of tribal youth.

Learn about Building an Effective Tribal-State Child Welfare Partnership.

Youth Engagement Team: Recommendations for Improving Permanency and Well-Being (Administration for Children and Families)
Developed in 2020, the ACF Youth Engagement Team held three roundtable discussions focused on supporting: permanency with kin, relational permanency, and successful older youth adoption and compiled a summary of their recommendations.

Youth Transitioning from Foster Care: Background and Federal Programs (Congressional Research Service)
Prepared for members and Committees of Congress, this report provides background information on older youth in foster care and details two federal programs under Title IV-E: the John H. Chafee Foster Care Program for Successful Transition to Adulthood (Chafee program) and the Foster Care Maintenance Payments Program. Learn more about the Chafee program.

Listen Up! Youth Listening Session Toolkit (Office of Population Affairs)
Interested in conducting a youth listening session within your community? From goal setting and coordination to taking action, this toolkit offers tested strategies and tips on how to engage youth in meaningful ways.

Support for Youth Aging Out of Care (North American Council on Adoptable Children)
Position statements and policy recommendations for adoption related child welfare issues.

Youth Engagement Blueprint Series (Center for States)
A six-part series encouraging child welfare agencies to build capacity and better engage current and former foster youth and integrate their voices at all organizational levels.

Support Services for Youth in Transition (Child Welfare Information Gateway)
A list of resources for supporting youth as they transition to adulthood.

Engaging and Involving Youth (Child Welfare Information Gateway)
A list of resources for child welfare professionals to learn about engaging youth in authentic and effective ways.

Office of Juvenile Justice and Delinquency Prevention (OJJDP) Tribal Youth Resource Center has developed culturally specific training and technical assistance for tribes seeking to build capacity to develop, expand, improve, and maintain their juvenile justice systems.

Indian Health Service, the Federal Health Program for American Indians and Alaska Natives, has created a list of Youth Best Practices.

TRIBAL RESOURCES AND YOUTH COUNCILS TO EMPOWER YOUTH AND KEEP THEM CONNECTED TO THEIR COMMUNITIES AND CULTURE

Mvskoke Nation Youth Services Program at the Muscogee (Creek) Nation has a strategic plan and an active Youth Council to engage and empower Mvskoke youth by connecting them to culture, community, and resources.

Three Precious Miracles was founded to support Native American children by providing basic resources, streamlining systems, providing cultural and natural linkages to licensing agencies, and supporting foster and kinship families through systems navigation and involvement.

Children's Bureau

The Children's Bureau within the U.S. Department of Health and Human Services funds the Child Welfare Capacity Building Center for Tribes. The content of this document does not necessarily reflect the views or policies of the funder.



Working with Two-Spirit and Native LGBTQ Youth

Resources for Tribal Child Welfare, April 2020

Two-Spirit is a modern overarching term intended to convey a broad array of indigenous gender diverse traditions. Expressions of Two-Spirit identities vary tremendously from Tribe to Tribe and within each Two-Spirit person. While the gender presentation, sexuality, social and ceremonial roles are diverse across Indian Country, a shared understanding of Two-Spirits is that it is a socially embedded, spiritually grounded identity; there are duties and responsibilities to community that accompany being a Two-Spirit person.

Native LGBTQ and Two-Spirit Webinar Series
This two-part webinar series discusses the historical roles and identities of Two-Spirit & Native LGBTQ people, how historical and intergenerational trauma has impacted this community, and the efforts to bring back balance, beauty, and acceptance.

- Walking in Two Worlds: Understanding the Two-Spirit Native LGBTQ Community
- Supporting Two-Spirit/Native LGBTQ+ Youth
- Creating Safe & Welcoming Spaces for Two-Sprit/Native LGBTQ+ Youth (Webinar Handout)

Two-Spirit Societies
A list of Two-Spirit societies in the US and Canada. These local and virtual communities offer support and can connect TSLGBTQ+ youth with local services and spiritual leaders that are inclusive.

Sharing Our Lived Experiences
These tip sheets are dedicated to Two-Spirit and American Indian/Alaska Native LGBTQ children and youth whose lives are impacted by the child welfare system.

- 8 Tips for Understanding Two-Spirit/LGBTQ Journey for Native Youth in the Child Welfare System
- 22 Tips for Caring for Two-Spirit and Native LGBTQ Youth

Walking in Two Worlds: Supporting the Two-Spirit and Native LGBTQ Community
What it means to be Two-Spirit, various definitions, tips on how to be a good ally, and potential challenges and barriers that may be experienced by those who identify as Two-Spirit or Native LGBTQ are included within this educational guide.
(Please seek printing permission from The Minnesota Indian Women's Sexual Assault Coalition.)

Native Youth Sexual Health Network
An organization by and for Indigenous youth that works across issues of sexual and reproductive health, rights and justice throughout the United States and Canada. Offers a Two-Spirit Mentor Support Circle.

Standards of Care for Lesbian, Gay, Bisexual, Transgender, Questioning, Intersex, and Two-Spirit American Indian/Alaska Native Youth
NICWA developed this 2013 newsletter as part of their *Honoring Innovations Report* series designed to offer best practice ideas for system of care communities.

A Place in the Middle
Hawaiian children and their teacher tell a powerful story of ancient traditions that they're keeping alive and the valued place for those that embrace their masculine and feminine traits. Free film and downloadable discussion guide.

Celebrating Our Magic: Resources for American Indian/Alaska Native transgender and Two-Spirit youth, their relatives and families, and their healthcare providers
A comprehensive toolkit created by Northwest Portland Area Indian Health Board.

Capacity Building
CENTER FOR TRIBES



Oklahoma law requires Oklahoma Human Services to contract with a third-party vendor to issue one debit card for Oklahoma Human Services cash benefits and another for Child Support payments.

If you accidentally throw your debit card away, you may call 1-888-929-2460 for Child Support or 1-888-401-9843 for all other benefit programs.

Register your account by going online to ***www.goprogram.com***

Frequently Asked Questions about Oklahoma Human Services debit cards

Q. How does the debit card work?

A. Monthly assistance payments are electronically transferred onto your debit card each month. This is a pre-paid debit card. It is not a credit card. This is your money from payments deposited to your account. You can access your money at any Automated Teller Machine (ATM) with a MasterCard logo displayed beneath the ATM screen. You may purchase items wherever MasterCard is accepted.

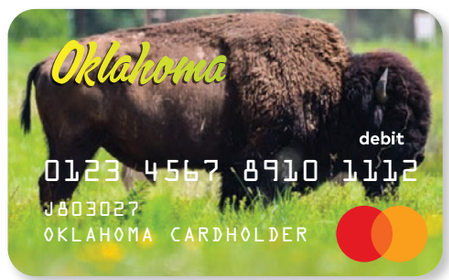
Q. How long does it take to get the debit card?

A. It usually takes 7 to 10 business days to receive your card after it is mailed.

This debit card is issued to individuals receiving benefits for adoptive or foster care assistance, Temporary Assistance for Needy Families (TANF), Low Income Home Energy Assistance Program (LIHEAP), sales tax rebates, family assistance, State Supplemental Payment for the Aged, Blind, and Disabled (SSP-ABD), and refugee assistance. This is a restricted debit card, meaning per state and federal law it cannot be used to purchase items from prohibited businesses including alcohol, tobacco, or adult entertainment.



The debit card below is issued for Child Support payments. It can be used anywhere MasterCard is accepted.



OKLAHOMA
Human Services

Pub. No. 10-33 Revised 10/2024
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Oklahoma Debit Card

Frequently Asked Questions (FAQs) about your Oklahoma Human Services debit card.

OKLAHOMA
Human Services



Frequently Asked Questions (Continued)

Q. What are the fees?

A. The vendor charges fees for services related to the debit card including:

- ATM withdrawals (out-of-network): $1.35 each
- Card replacement: 1 free per year, $4 after (expedited delivery is $14 extra)

Q. How can the debit card be used?

A.

- You can purchase approved items through approved vendors
- You can access your money 24/7 through ATMs
- You can get cash back from merchants
- You can use it to pay bills online, by phone, or by mail order

The amount of purchases or cash withdrawals is automatically deducted from the available funds on the card. You may also request a free, 60-day report of your account activity. You can also access your account online at www.goprogram.com.

Q. Will the card have the Oklahoma Human Services name or logo on it?

A. No. The debit card has the word, "Oklahoma," across the front and it looks like a credit card. Nothing on the card indicates funds on the card are monthly deposits from Oklahoma Human Services.

Q. My credit is bad. Can I still sign-up for the debit card?

A. Yes. Our contractor will not deny a card based on a customer's credit history.

Q. Is direct deposit or automatic transfer to my bank account available?

A. Yes. You can enroll for direct deposit or automatic transfer by calling the number on the back of your card or by going online to www.goprogram.com. Once online, select "Special Services," and choose "recurring transfers." Automatic transfers occur two business days after funds are deposited into your account.

Q. Are card fees taken out of my account?

A. Yes. Your account will be reduced by any fees incurred on the card.

Q. How do I know if a replacement card has been issued to me?

A. Check your account at — www.goprogram.com or call the number on the back of your card. You can also sign-up to be notified by email, phone or text when a payment has been deposited.

Q. When will the money be available on my debit card?

A. Money is posted to your debit card by 5 p.m. on the date the funds are available.

Q. Do I get a new card every time a payment is due?

A. No. All future payments will be automatically deposited onto the original debit card you received.

Q. What do I need to do when I receive the debit card?

A. After you receive the card in the mail, you must call the phone number on the card to activate it. When you activate the card, you must choose a PIN number. Details about the process will be included when the card is mailed to you.

Q. Is the cardholder able to make deposits to the card?

A. No. Only Oklahoma Human Services can make deposits on the card.

Q. Is there a Smart Phone app for the debit card?

A. Yes. Search your Smart Phone's app store for "goprogram."

Q. Can the cardholder have a second card for another individual or family member?

A. Yes. You can get a companion card by going online to www.goprogram.com. The companion card will feature the companion's name and will be mailed directly to you, the primary cardholder. Once you order a companion card, you can arrange a one-time transfer or set up a recurring transfer of a specified amount or percentage from your account balance to the companion card. The primary cardholder is responsible for payment of all fees and charges on the primary and companion cards.

Q. Will anyone else be able to use my card?

A. No. Only the person whose name is on the card may use the card. For security reasons, cardholders should never share their PIN number or allow anyone else to use their card.

Q. Do tribal foster parents have access to debit card or direct deposit?

A. Yes. All child welfare and tribal foster parents who are paid by Oklahoma Human Services must select the debit card or direct deposit to receive their monthly foster care payment.

Q. Where can I use my card?

A. For child support, the card may be used anywhere MasterCard debit cards are accepted. Per state and federal statute, debit cards for cash assistance programs cannot be used at specific types of retailers. These places have been blocked from accepting the debit card.

Let's Talk About CHILD CARE for Foster Parents

As a working foster parent, you are responsible for securing child care services for your foster child. You will need to identify, research and visit child care programs before you are approved as a foster parent. Your foster care specialist can help answer questions and help you choose what type of child care may be right for you.

Helpful Resources:



1. Child Care Subsidy

Oklahoma Human Services may help pay child care costs for foster parents who are working or attending a formal education or training program. To receive child care subsidy payments, you must choose a licensed child care provider that accepts child care subsidy from Oklahoma Human Services. Subsidy payments are based on a child care provider's quality rating (1 to 5 Stars).



Find Licensed Child Care Providers

- Child Care Locator on the Oklahoma Human Services website (**https://childcarefind.okdhs.org)**
- Statewide Child Care Referral Center (English language): **1-800-438-0008**
- Statewide Child Care Referral Center (Spanish language): **405-525-8783**
- Note: Additional child care facility fees may apply.

You may also choose an in-home child care provider who is related to the foster child. The provider must be at least 18 years old and cannot live in the child's household. (340:40-13-2 Approving In-home Child Care).



2. Head Start

This federally funded program is available at no cost for foster children from birth to age five. Head Start provides a learning environment for children that includes health care, meals and playtime. To find **Head Start programs** in your area, please visit **https://eclkc.ohs.acf.hhs.gov/center-locator**. Type in the city name and zip code. A map will appear on your screen showing Head Start programs in that area. Click on the program to find more detailed information including hours of operation. You can also visit the **Oklahoma Association of Community Action Agencies** website at **https://okacaa.org/head-start-agencies** and click on a map to choose Head Start programs in each county.



3. Oklahoma Foster Care Voucher Program

The Oklahoma Foster Care Voucher Program is available to kinship and traditional foster families approved through Oklahoma Human Services or a tribe. Vouchers are used to reimburse an individual identified by the foster parent who provides care for the foster child in order to give the foster parents a break (or respite) from caregiving. Vouchers cannot be used by foster parents to place foster children with another foster family. To learn more about the voucher program, contact your foster care specialist. Families approved through Resource Family Partnership agencies, should contact their specific agency regarding respite options.

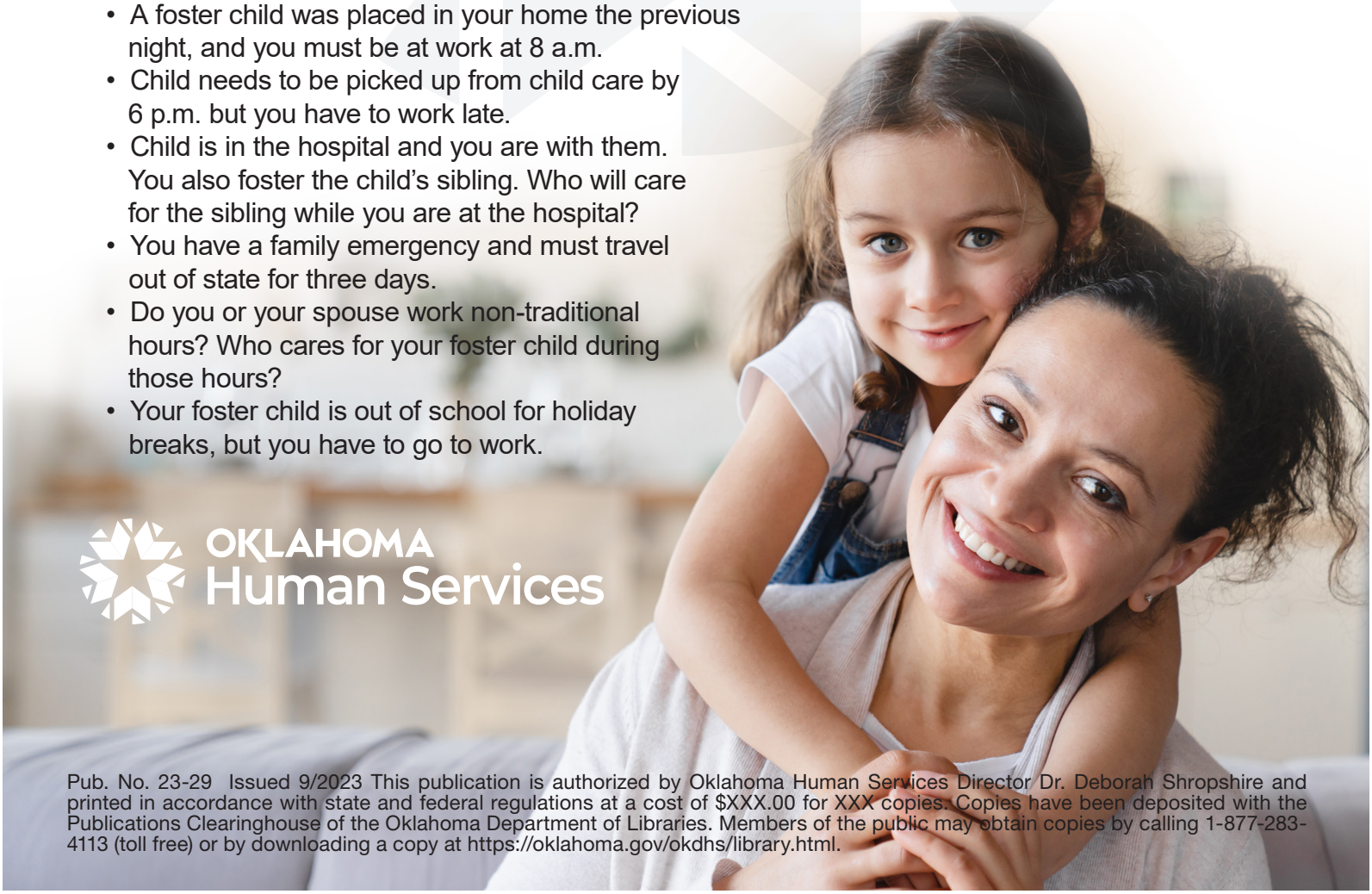
IMPORTANT NOTE: Child care may not be immediately available for your foster child so please have a temporary plan in place until all required paperwork, approvals and authorizations are complete.

Have "backup" babysitters who can step in at moment's notice. You will need a variety of friends, family and neighbors to help support you in different situations. What conversations have you had with your identified "backups?" Are they able to step in at a moment's notice?

Common scenarios when child care may be needed. Think about who can provide last-minute child care for your foster child and keep adding names to your list.

Situations needing Child Care:

- Child gets sick at school and needs to be picked up immediately, but you can't leave work.
- Child was involved in a fight at school and is suspended for three days.
- A foster child was placed in your home the previous night, and you must be at work at 8 a.m.
- Child needs to be picked up from child care by 6 p.m. but you have to work late.
- Child is in the hospital and you are with them. You also foster the child's sibling. Who will care for the sibling while you are at the hospital?
- You have a family emergency and must travel out of state for three days.
- Do you or your spouse work non-traditional hours? Who cares for your foster child during those hours?
- Your foster child is out of school for holiday breaks, but you have to go to work.



OKLAHOMA Human Services

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OKLAHOMA Human Services

2026 Travel Claim

Instructions

Purpose of form

Form 10AD006E, Travel Claim, is used by non-employees who have incurred travel expenses while providing an approved service for OKDHS or its clients. Claimants include foster parents, volunteers, recently terminated OKDHS employees, and outside consultants.

Foster care and volunteer services include transporting foster children to medical appointments, client meals, lodging, and other costs incurred during transport. Former OKDHS employees who can no longer access the Speed-E-Travel reimbursement system use the form for reimbursement of approved travel costs incurred when employed by OKDHS. Office of Management and Enterprise Services (OMES) staff use the form for reimbursement of approved mileage incurred while providing contracted information technology services for OKDHS.

Instructions

First-time claimants who have not already submitted a Form 10CO135E, Vendor Information, attach a completed and signed Form 10CO0135E with a legible copy of the claimant's Social Security card.

A completed Form 10AD006E may not cover more than one fiscal year. Our state fiscal year begins July 1 and ends June 30.

Claimant information. Select the appropriate claimant type and enter the claimant's name, phone number with area code, home address, city, ZIP code + 4, Social Security number and vehicle tag. The ZIP code + 4 is obtained at **https://tools.usps.com.**

For foster parent travel only. A case or referral number is entered when claim is the result of transporting a client. Use a separate form for a different case number, the same trip may not be claimed on two cases. Enter the caseworker's name and phone number with area code.

Travel information. Enter the following travel information:

Was travel out-of-state? Select **yes** or **no**. When **yes and a state employee**, a completed Form 10AD002E**, Out-of-State** Travel Authorization, signed by the OKDHS travel coordinator is required for each out-of-state trip. Form 10AD002E is submitted to the OKDHS travel coordinator's office before Financial Services processes and pays for out-of-state travel. State employees traveling overnight must attach an agenda or itinerary when he or she attends a conference, meeting, or workshop. To receive a per diem payment in lieu of meals and incidental costs for overnight travel, complete the overnight travel table.

Overnight trip table. Claimants requesting reimbursement for overnight travel must complete the table. Enter beginning and ending times and dates for overnight trips. Time specify a.m. or p.m. Financial Services staff use this information to calculate the per diem reimbursement.

Trip information table. Enter requested information for each trip. Beginning and ending points of travel must each include an address and city name. If travel began or ended at the home address in "Claimant Information" section, "Home" may be entered instead of a full address. If the starting and ending points are the same, it is not necessary to list them twice. In that case Round-trip must be set to "Y". The purpose of the trip must be concise and clear. Case detail is used to support the business purpose of the travel. Foster parents who transport a child enter the child's first name and last initial

in this box. OMES and former employees enter case numbers, ticket numbers, or other trip-specific information. Enter the miles for the trip in the Miles box. Miles for reimbursement are based on mapping the travel between specific addresses in the beginning and ending points of travel box. Claimants must use Google Maps to map the distance between addresses; claimants may use either the fastest or shortest route. For a round-trip, claimants simply double the map miles. Miles are rounded to the nearest whole mile, with .5 miles rounded up. Claimants do not need to submit maps with claim. Mileage will be checked as needed and claims returned if Google Map miles do not match the claimed miles, without adequate explanation.

Explain as necessary: Claimants may use this box to explain any trip in which the miles claimed are not from Google Maps. This may occur when an address cannot be mapped or a significant detour was necessary. In this case, provide the travel date and a full explanation of the difference, including odometer readings.

Expenses claimed. Enter the following expense information:

Mileage reimbursement. When using the automated form, the Total Miles field is automatically calculated from the miles on each trip and multiplied by the mileage rate to determine the mileage reimbursement. When using the paper form, add together the miles from each trip and enter into the Total Miles field. Multiple by the mileage rate on the form to determine mileage reimbursement.

Per diem. Financial Services staff calculate the per diem reimbursement in lieu of meals and incidentals using the information from the overnight trip table and the current federal per diem rate for the specified destination as published on the **GSA** website. The reimbursement is computed based on the applicable rules for in-state and out-of-state per diem per Oklahoma Administrative Code **(OAC) 340:2-11-121.** For state employees, an agenda or itinerary documenting the conference, meeting, or other event requiring overnight travel is attached.

Lodging. The amount paid for the hotel. Attach original receipts showing the balance was paid in full. Lodging rates, excluding taxes, does not exceed the daily rates for in-state and out-of-state lodging as noted in **OAC 340:2-11-119.1.** The rate caps are published on the **GSA** website.

Client meals. Enter the amount paid for the client's food only. Attach original receipts. When a receipt includes food purchased for anyone other than the client, circle and label the food and amounts for the client.

List other items. List other items such as tolls, local transportation, or miscellaneous expenses incurred. Tolls and cab fare of less than $25 per expense event do not require a receipt. However, receipts for items less than $25,when provided to the traveler, are submitted to better document the claim. All other items require original receipts.

If more than one page is required for a single claim, sub-totals are labeled and noted for each section. The total amount claimed is only shown on the final page and all pages are stapled together.

Coding. Enter the four digit finance account and the five digit finance location number to which this expense will be charged.

Claimant signatures/claim approval. The claimant, the approving authority, and the State Office approving authority sign and date Form 10AD006E. The division director sign and date claims over 90 days old. The 90 days start on the earliest travel day listed on Form 10AD006E.

Comments for OKDHS Financial Services and CWS administration only. This section is used only by Financial Services and CWS administration, including the Foster Care and Adoption Support Center staff to provide clarifying notes.

Routing

Routing of foster parent claims. Claims initiated by foster parents are routed to the approving

authority. After approval, the claims are routed to the Foster Care and Adoption Support Center for pre-audit. The Foster Care and Adoption Support Center routes the original to OKDHS Financial Services. A copy is retained by the Foster Care and Adoption Support Center, and the claimant. After Form 10AD006E and supporting documentation are audited and approved, OKDHS Financial Services enters the approved amount and electronically transmits the claim to OMES. A warrant is generated and sent to the claimant.

Routing of volunteer claims. All claims submitted by volunteers are routed to the OKDHS volunteer coordinator for State office approval signature. A copy is retained by the volunteer coordinator and the claimant. After approval, the volunteer coordinator routes the claim to OKDHS Financial Services. After Form 10AD006E and supporting documentation are audited and approved, OKDHS Financial Services enters the approved amount and electronically transmits the claim to OMES. A warrant is generated and sent to the claimant.

Routing of all other travel claims. All other travel claims are submitted to the appropriate approving authority for review. A copy is retained by the approving authority and the claimant. After review, the approving authority sends the claim to OKDHS Financial Services. After Form 10AD006E and supporting documentation are audited and approved, OKDHS Financial Services enters the approved amount and electronically transmits the claim to OMES. A warrant is generated and sent to the claimant.

Claimant Information

☐ Foster Parent ☐ Volunteer ☐ Former Oklahoma Human Services employee

☐ Office of Management and Enterprise Services employee (OMES) ☐ Other: _____

First name | M.I. | Last name | Phone number with area code

Home address | City | State | Zip code + 4

Social Security number | Vehicle tag number

For foster parent travel only:

KK number | Caseworker name | Phone number with area code

Travel Information

Was travel out-of-state? ☐ Yes ☐ No

When yes, state employees must complete and submit Form 10AD002E, Out-of-State Travel Authorization.

Overnight trip table: When claiming per diem, provide the following information. State employees must also attach an agenda when he or she attends a conference or training. Per diem, when applicable, is calculated by OKDHS Financial Services.

Begin date mm/dd/yyyy	End date mm/dd/yyyy

Trip information table: Use *Google Maps* to find miles for each trip - it is not necessary to include maps with your travel claim. When transporting child(ren), enter the *first name and last initial* in the "case detail" column in the trip information table.

Travel date	Beginning and ending points of travel - Use address and city name	Round-trip Y/N	Purpose of trip	Case detail	Miles

Travel date	Beginning and ending points of travel - Use address and city name	Round-trip Y/N	Purpose of trip	Case detail	Miles

Explain as necessary (e.g. address could not be mapped; took a different route.)

Expenses Claimed

Mileage reimbursement rounded to the nearest cent: Total Miles ____ x 0.76 = ____

Per diem (when applicable, Financial Services calculates): ____

Lodging (attach original receipts showing the balance paid in full): ____

Client meals (attach original receipts): ____

List other items:

Tolls ____ ____

____ ____

Local transport ____ ____

(such as shuttle or taxi) ____ ____

Miscellaneous ____ ____

____ ____

Grand Total ____

When claiming per diem, attach an agenda if you attended a conference or training.

Coding

Charge this claim to: ____ ____

4 digit finance account 5 digit finance location

Claimant Signatures and Claim Approval

Claimant signature

Date

Authorized approval signature

Date

State office approval signature

U#

Date

Division director approval for claims over 90 days old

Date

Comments (Financial Services and CWS only):

Is This an Emergency?

SoonerRide does not provide emergency transportation. In case of an emergency, call 911.

Ready to Go?

If you live in Oklahoma and are a SoonerCare member with a valid SoonerCare ID number, you may qualify for SoonerRide.

Online reservations can be made at: **mymodivcare.com**
or download the **Modivcare App**

OKLAHOMA
Health Care Authority



Where's My Ride?

If transportation is running more than 15 minutes late and you have not heard from your driver, call "Where's My Ride?" at 1-800-435-1034 with your authorization number.

Reporting a Service Issue

To report a service issue or send a compliment about SoonerRide, please call us at 877-404-4500.

Mileage Reimbursement

SoonerCare members can get gas/mileage reimbursement for driving their own car to and from medical appointments. Be sure to get trip authorization approval within 24 hours before the medical appointment by calling SoonerRide at 877-404-4500.

SoonerRide



Providing you transportation to and from your SoonerCare appointments

A PROGRAM OF
SoonerCare

SoonerRide

Transportation to Scheduled Appointments

You must call 1-877-404-4500 or 711 (TTY) at least three (3) business days before your medical appointment to make a reservation. Transportation is not guaranteed if reservations are not made with at least three (3) business days notice. Reservations can be made by phone Monday through Friday from 8 a.m. to 6 p.m.

When calling SoonerRide to make a reservation, you need to provide the following information:

- SoonerCare ID number
- Time and date of medical appointment
- Name, address and phone number of medical provider you are going to see
- Reason for your medical appointment
- If wheelchair accommodations are needed
- Whether an escort (caretaker) is needed

If your medical appointment is canceled, please notify SoonerRide as soon as possible. **You could lose SoonerRide benefits if you have three no-shows in a 90-day period.**

Transportation to Same-Day Appointments

Three additional children may be allowed at your medical appointment if you or your child are sick and your medical provider wants to see you within 24 hours.

- The appointment must be urgent as determined by your medical provider. SoonerRide will confirm with your doctor.

For additional child passengers to same-day appointments:

- All children must be related to the SoonerCare member by birth, marriage, foster care or legal guardianship.
- All children (not the patient) must be younger than 13 years of age unless the individual has intellectual and physical disabilities that require constant care and adult supervision.
- All children must have their own car seat, provided by the member, if required by state law.
- The member must request transportation for additional passengers when making their trip reservation.

Pickup/Dropoff

This is a curb-to-curb service. Drivers will give assistance into and out of the vehicle but may only pull up to the front of the residence or to a common area of an apartment, clinic, hospital or office building.

- Members will only be picked up from and returned to their residence on file. SoonerRide will not pick up or drop off at school or a place of employment.
- Vehicles often transport other members in the same vehicle with you.
- Drivers cannot make additional stops.
- Both your trip to the medical appointment and your return trip must be scheduled at the same time. When you make your medical appointment, ask for an estimate of how long your appointment will take, and schedule your return trip for a little later (20-30 minutes). Once your appointment is completed, please stay in the pickup area until your designated pickup time.
- You should be ready 15 minutes before the agreed on pickup time. The vehicle is considered on time if it arrives 15 minutes before or after the designated pickup time.

OHCA complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-987-7767. CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-987-7767.

This publication, printed by O.U. Printing Services is issued by the Oklahoma Health Care Authority as authorized by Title VI and Title VII of the 1964 Civil Rights Act and the Rehabilitation Act of 1973. 1,000 copies have been prepared and distributed at a cost of $800.00. Copies have been deposited with the Publications Clearinghouse of the Oklahoma Department of Libraries. [74 O.S.2001 § 3105 (C)] Order additional copies on the OHCA website www.oklahoma.gov/ohca. SBRENG-SNRIDE-2022

STATE OF OKLAHOMA FOSTER CARE PROGRAM

SUMMARY OF INSURANCE

FOSTER CARE LIABILITY INSURANCE

Carrier:	**James River Insurance Company**	
Broker:	**Marsh USA**	
Policy No.:	00044673-16	
Policy Term:	August 30, 2026 to August 30, 2027	
Limits of Liability:	General Aggregate	$5,000,000
	Products / Completed Operations Aggregate	Excluded
	Personal & Advertising Injury	Included
	Each Foster Household Occurrence – Each Claim	$300,000
	Each Foster Household Aggregate – Each Household	$300,000
	Damage to Property you Own or Premises Rented to you – Each Claim	$5,000
	Medical Expense	Excluded
	Property Damage Deductible – Per Claim	$250
Coverage Trigger:	Claims Made Form with August 30, 2010 Retro Date	
Terms and Conditions as Per Coverage Form:	CG 0002 (12/07)	

Notable Endorsements
(At Policy Inception):

AP0001US-0403 Schedule A

CG0002-1207 Commercial General Liability Coverage Form -Claims Made

AP2700US-0107 General Liability Changes Claims-Made to Claims-Made and Reported

AP2702US-0107 Extended Reporting Period Endorsement

AP2704US-0406 Restricted Reporting Endorsement

AH2302US-0905 Physical Abuse or Sexual Misconduct Limits of Liability Endorsement

- Each Claim Limit: $100,000
- Aggregate Limit: $100,000

AH2307US-1016 Deductible Endorsement - Damages and Expenses

This document is only a synopsis of coverage and intended for use as a reference. The actual policy contains exclusions and/or limitations not summarized herein. The actual policy should be consulted for full coverage terms and conditions, including any endorsements that may be issued after the policy inception.

AP2103US-0607 Minimum Policy Premium

AP2108US-0811 Supplementary Payments (Defense Costs) within Limits of Insurance

AP2300US-1106 Composite Rate Endorsement
- $90.25 per family in excess of 4,000 foster households

AH2305US-0912 Professional Liability Endorsement (Claims-Made and Reported)

AP2104US-0625 Common Policy Conditions

AP2107US-0624 Binding Arbitration

CG2139-1093 Contractual Liability Limitation

AP2008US-0712 Limitation of Coverage to Designated Premises
- Foster Households as on file with Company

CG0068-0509 Recording and Distribution of Material or Information in Violation of the Law Exclusion

CG2107-0514 Exclusion - Access or Disclosure of Confidential or Personal Info and Data-Related Liability - Limited BI Exception Not Included

CG2135-1001 Exclusion - Coverage C - Medical Payments

CG2147-1207 Employment-Related Practices Exclusion

CG4032-0523 Exclusion - Perfluoroalkyl and Polyfluoroalkyl Substances (PFAS)

IL0021-0908 Nuclear Energy Liability Exclusion

AH2300US-0205 Additional General Liability Exclusions

AP2031US-0411 Exclusion - Cross Suits

AP2032US-1223 Exclusion - Bodily Injury to Employees, Temporary Workers and Volunteer Workers

AP2036US-1105 Absolute Pollution and Pollution Related Liability – Exclusion

AP2102US-0403 Communicable Disease Exclusion

AP2106US-0812 Absolute Auto, Aircraft and Watercraft Exclusion

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AP2111US-1105 Exclusion - Punitive Damages

AP5054US-0222 Combined Policy Exclusions

AP5076US-0423 Exclusion Biometric Information Privacy Claim

AP5605US-0924 Fungi or Bacteria Exclusion – Habitational Or Other [CGL]

AP1010US-0905 Oklahoma Changes – Notice of Non-renewal

CG2175-0115 Exclusion of Certified Acts of Terrorism and Exclusion of Other Acts of Terrorism Committed Outside the United States

AP5027R-0115 Rejection of Coverage for Certified Acts of Terrorism Coverage
IL1201-0403 Policy Changes - Amended Covered Persons and Entities

IL1201-0403 Policy Changes - Property Damage to Property of a Named Insured:
A. Subject to the Deductible $250 we will pay at "Actual cash Value" up to $5,000 on behalf of an insured for "Property Damage" to property of an insured for
"Property Damage" to property of and insured unintentionally caused by one or more "Foster Children" in the care, custody and control of a "Named Insured" , if the act causing the damage occurred during the policy period.

IL1201-0403 Policy Changes - Deductible Endorsement

- Bodily Injury Liability $0 per claim
- Property Damage Liability $250 per claim

IL1201-0403 Policy Changes - Professional Liability Endorsement - Professional Liability Endorsement (Claims-Made And Reported)

IL1201-0403 Policy Changes - Amendment of Section IV-Definitions

IL1201-0403 Policy Changes - Coverage Extension – Guaranteed Rate

ILP001-0104 US Treasury Department's Office of Foreign Assets Control (OFAC) Advisory Notice to Policyholders

This document is only a synopsis of coverage and intended for use as a reference. The actual policy contains exclusions and/or limitations not summarized herein. The actual policy should be consulted for full coverage terms and conditions, including any endorsements that may be issued after the policy inception.

Property Damage Claim Form

State of Oklahoma Foster Parent Insurance Program - 00044673

General Information

Foster Parent
Name:_____
Complete
Address:_____
Home Phone: (____)_____ Alternate Phone: (____)_____ Email: _____
Date of DHS Approval of Parent as Foster Parent:__/__/___Date of Child Placement: __/__/___

Incident Information

Nature of Incident: Foster Parent Property Damage _ Damage to Property of Others _
Date of Incident: ___/___/___ Time: _____am/pm Location: _____
Description of Incident:

Property Owner:
Name: _____ Address:
_____
Home Phone: (___)_____ Alternate Phone: (___)_____
Email: _____ Relationship to Foster Child: _____

Description of Property Damage:
_____
Estimated cost to repair:
_____

Witness Information:
Name: _____ Address:
_____
Home Phone: (___)_____ Alternate Phone: (___)_____
Email: _____ Relationship to Foster Child: _____

Was the incident reported to Police and/or Fire Department: Yes _ No _
If yes, when was the incident reported: _____
If yes, who reported the incident: _____
Have you received: Letter from attorney _ Lawsuit _ Other _ If other, please explain:____
_____

Please attach copies of any papers, documents, written receipts and/or proof(s) of payment that you have regarding this claim. Please include any additional information on a separate sheet of paper.
Signature: _____ Print Name: _____ Date: __/__/___

If you have any questions, please call Brandon Story at 804-289-2758
Submit Report to: James River Insurance Company Claims Department
All Claims: FAX: 804.420-1058 _ Email: New.claimsnotices@Jamesriverins.com
Mail: 6641 West Broad Street, Suite 300 Richmond, VA 23230



Support Groups are designed to assist resource parents with in-service training, community resource information, peer support, and communication with DHS. Attending on a regular basis is not only a great way to get the emotional and practical support you need to succeed, but also a great way to stay on top of the training requirements you need to fulfill. Please check with your resource specialist and supervisor for all training approvals. Some groups serve dinner or snacks; most provide onsite child care.

Support Groups - Oklahoma Fosters

This link takes you to the Oklahoma Fosters site where you can find a support group in your area. You can filter by county. Some support groups span multiple counties and will state as such. The information made available on this site strives to be as updated as possible; however, due to possible changes or cancellations please contact the facilitator for the individual support group to confirm, find out about the topic being shared, and/or reserve your spot.

Child Welfare Acronyms

504 Plan **The 504 Plan** is a plan developed to ensure that a child who has a disability identified under the law and is attending an elementary or secondary educational institution receives accommodations that will ensure their academic success and access to the learning environment.

ACF **Administration for Children and Families**
The federal agency that houses the Office of Child Support Enforcement (OCSE) within the Department of Health and Human Services (HHS).

ADA **Assistant District Attorney**
The Assistant District Attorney is responsible for assisting the District Attorney with administering the ongoing activities of the District Attorney's Office and assists in developing and implementing departmental goals and objectives within general policy guidelines.

ADHD **Attention Deficit Hyperactivity Disorder**
One of the most common neurodevelopmental disorders of childhood. It is usually first diagnosed in childhood and often lasts into adulthood. Children with ADHD may have trouble paying attention, controlling impulsive behaviors (may act without thinking about what the result will be), or be overly active.

ADJ **Adjudication**
An adjudication hearing is held whether the children were removed or whether they stayed with their parents. At this hearing, the judge decides whether supervision is required and if they decide it is, where the child should live and what services are needed to help make things better.

ALJ **Administrative Law Judge**
A judicial officer who conducts hearings for an administrative agency.

AOCS **Assessment of Child Safety**
The systematic collection of information on threatening family conditions and current, significant, and clearly observable threats to the safety of the child or youth.

AOR **Address of Record**
An address for a party or a custodial person in the Central Case Registry of Oklahoma Child Support Services that is used for service of process in support, custody and visitation actions. An address of record is a public record and may be different from the party's or custodial person's physical address.

Child Welfare Acronyms

BIA **Bureau of Indian Affairs**
The mission of the Bureau of Indian Affairs is to enhance the quality of life, to promote economic opportunity, and to carry out the responsibility to protect and improve the trust assets of American Indians, Indian tribes, and Alaska Natives.

BP **Biological Parent (Birth Parent)**
The father and mother whose DNA a child carries are usually called the child's biological parents.

CANIS **Child Abuse and Neglect Information System**
The Child Abuse and Neglect Information System, also known as KIDS, is a permanent, computerized record-keeping system maintained by Child Welfare Services

CASA **Court Appointed Special Advocate**
Specially trained community volunteers appointed by Juvenile and Domestic Relations Court Judges to speak in the best interest of children who are brought before the court for reasons of abuse or neglect.

CBHS **Child Behavioral Health Screener**
A self-administered, 35-item tool used to identify cognitive, emotional, and behavioral problems in children and youth ages 4-16 years of age.

CDIB **Certified Degree of Indian Blood**
A Certificate of Degree of Indian Blood or Certificate of Degree of Alaska Native Blood is an official U.S. document that certifies an individual possesses a specific fraction of Native American ancestry of a federally recognized Indian tribe, band, nation, pueblo, village, or community.

CHBS **Comprehensive Home-Based Services**
This skill-building program teaches home safety, children's healthcare, effective parenting, increased parent-child relationships and effective budgeting and household management while building protective factors against future abuse. Referrals are made by Oklahoma Human Services.

CP **Custodial Person (Custodian)**
The person who has primary care, custody, and control of the child(ren) and is therefore entitled to child support on the child(ren)'s behalf. A custodial person could be the state in juvenile or child welfare cases. Sometimes called a Custodial Party.

Child Welfare Acronyms

CPI **The Child Placement Interview (CPI)** is a live, strength-based interview that is completed by the child's worker when placement is needed. It is encouraged to have the child joint the call when possible, so the voice of the youth is heard. There is a document that is completed that is the Child Placement Interview.

CPG **Case Plan Goal**
Case planning is about identifying the actions required to achieve stability and security for the child or young person in care.

CPS **Child Protective Services**
Provided through Oklahoma Department of Human Services to identify, treat and prevent child abuse and neglect.

CSM **Child Safety Meeting**
A collaborative decision-making process for determining the child's needs and the best intervention strategy to meet the child's safety needs.

CT **Case Transfer**
When a case is transferred to another Case Worker of Department

CW **Child Welfare**
Child welfare is a continuum of services designed to ensure that children are safe and that families have the necessary support to care for their children successfully.

CWS **Child Welfare Specialist**
Child welfare specialists work to ensure that our children in Oklahoma live in safe, supportive homes free from the dangers of abuse and neglect. These compassionate, self-motivated professionals help fulfill the mission of Oklahoma's largest state agency.

DA **District Attorney**
Elected officials within the districts of a state who generally represent the state in criminal matters. District attorneys are responsible for bringing the case before the court. In the context of child welfare, the DA reviews reports regarding child abuse or neglect investigations. Additionally, they submit the petition to the court and participate in hearings. They are involved in the case until permanency is achieved.

DD **District Director**
The state is divided into five regions, supervised by a regional director. At the district level, the chain of command is Child Welfare specialist, Child Welfare supervisor, District Director, Regional Deputy Director.

DCN **Department Client Numbe**r
(OKDHS case participant identification number) - A unique identification number assigned to an Oklahoma Department of Human Services (DHS) customer. The DCN follows the customer throughout DHS.

DDS **Developmental Disabilities Services**
Serves persons ages 3 and up who have a primary diagnosis of intellectual disabilities.

DISPO **Dispositional Hearing**
A legal proceeding in the juvenile deprived case for when the Individual Service Plan (ISP) is being court ordered.

DMDD **Disruptive Mood Dysregulation Disorder**
A condition in which children or adolescents experience ongoing irritability, anger, and frequent, intense temper outbursts.

DOB **Date of Birth**
The date recorded on a child's birth certificate documenting their birth.

DOC **Difficulty of Care**
Payments representing compensation for providing additional care for "qualified foster individuals" if the payments are required because of the physical, mental, or emotional handicap of the individual and the state has determined that there is a need for the additional foster care reimbursement.

DV **Domestic Violence**
Violence committed by someone in the victim's domestic circle. This includes partners and ex-partners, immediate family members, other relatives and family friends. The term 'domestic violence' is used when there is a close relationship between the offender and the victim.

EFC **Enhanced Foster Care**
Enhanced Foster Care (EFC) is a service category within the Continuum of Care developed to respond to the complex behavioral, medical, developmental, and mental health needs of children in custody. EFC provides individualized services and supports based on a child's specific needs along with coordination/collaboration of services between providers.

FC/A **Foster Care and Adoptions**

Child Welfare Acronyms

FCAO **Foster Care Association of Oklahoma**
Mission: To improve the lives of children by empowering foster and adoptive families through support, connection, and advocacy. FCAO also matches a foster parent mentor to all new DHS traditional foster families.

FCASC **Foster Care and Adoption Support Center**
Provides information related to foster care and adoptive services. The support center is accessed by calling 1-800-376-9729, emailing fcasupportcenter@okdhs.org or by visiting www.okfosters.org.

FCS **Family Centered Services**
OKDHS Child Welfare Services prevention program. FCS provides services to families who come to the attention of child welfare without the child being removed from the home and the case becoming court involved.

FDC **Family Drug Court**
The program works to provide **treatment** and accountability to parents with substance use disorders by offering access to **treatment** and recovery.

FH **Foster Home**
A temporary service provided by States for children who cannot live with their families. Children in foster care may live with relatives or with unrelated foster parents.

FP **Foster Parent**
An adult approved by the state to care for a foster child(ren). Most foster parents provide temporary care after a child is removed from their home to due to their parent or guardian's abuse, neglect, or inability to provide adequate care.

FTM **Family Team Meeting**
The FM's purpose is to facilitate planning, **team** decision-making, and engaging the **family** of the child in Oklahoma Department of Human Services custody.

GAL **Guardian ad Litem**
A person appointed by a court to look after and protect the interests of someone who is unable to take care of themselves.

GH **Group Home**
A group home is a congregate living facility where children or teens are placed on a short-term basis.

HTS **Habilitation Training Specialist**
Works specifically with individuals with a cognitive disorder or low IQ.

ICPC **Interstate Compact for the Placement of Children**
The Interstate Compact for the Placement of Children is a law across all 50 states, the District of Columbia and US Virgin Islands that governs placement of children and teens into a new placement from one state to another. The process requires that certain requirements must be met by the state sending and the state receiving the child/teen prior to the move. Its purpose is to assure that children/teens will be placed in a safe, approved home and that needed services, financial supports, medical insurance, and other resources are in place prior to the move.

ICWA **Indian Child Welfare Act of 1978**
Federal legislation that seeks to keep Native American children with Native American families. ICWA redefined the jurisdiction of Native American tribes in custody proceedings involving Native American children in matters of adoption, voluntary and involuntary termination of parental rights, and foster care placement and removal. ICWA gives tribal governments sole jurisdiction over states when the child is domiciled on the reservation and concurrent, but presumptive, jurisdiction over non-reservation Native Americans' custody proceedings.

IEP **Individualized Education Plan**
An Individualized Education Program is a legal document under United States law that is developed for each public-school child in the U.S. who needs special education. It is created through a team of the child's parent and district personnel who are knowledgeable about the child's needs.

IHS **Indian Health Services**
A division with the Department of Health and Human Services responsible for providing medical and public health services to federally recognized Tribes. IHS coverage is considered adequate health coverage and additional medical coverage is not required.

IL **Independent Living**
This program offers an array of services offered to youth that are at least 14 years of age to prepare them to live independently such as employment, education, finances, life skills and more!

ISP **Individualized Service Plan**
The ISP is based upon a comprehensive assessment and evaluation of the child and family and is developed with the participation of the child, when appropriate, and the child's parent, legal guardian, legal custodian, attorney, guardian ad litem, and tribe, when applicable. The health and safety of the child is the paramount concern in the ISP development.

ITS **Intensive Treatment Services**
Contracted residential ITS are available to provide crisis stabilization interventions to children in Oklahoma Human Services (OKDHS) or tribal custody, 8 to 18 years of age, who are experiencing a behavioral health or psychiatric crisis. ITS are available to avoid admission to psychiatric care and enable the child's return to community-based residential care.

ITFC **Intensive Treatment Family Care**
The Intensive Treatment Family Care (ITFC) program provides treatment for children aged 6-18 who have experienced multiple placements in various settings but can be successfully served in a family setting.

JD **Juvenile Deprived**
Court Case Number for the child/teen's case

KIDS **KIDS** (eKIDS) is the online child welfare information system where information about the children and families that are served by Oklahoma Human Services is collected and stored. Numerous reports are drawn from this system for local, state, and federal uses.

KK **Kids Kase**
Case number for family in KIDS information system

LGBTQ **Lesbian, Gay, Bisexual, Transgender, Queer**
These terms are used to describe a person's sexual orientation or gender identity.

MDT **Multidisciplinary Team**
A multidisciplinary team or MDT for short is simply a diverse group of professionals working together. The MDT would aim to deliver person-centered and coordinated care and support for the person with care needs.

MEDICAID **Medical Assistance Program (Title XIX of the Social Security Act)**

Medical assistance provided under a state plan approved under Title XIX of the Social Security Act, codified in Subchapter XIX of Chapter 7 of Title 42 of the United States Code (Link opens in new window). Children in Oklahoma receive Medicaid under the SoonerCare program.

MEDICARE **Medical Care Program (Title XVIII of the Social Security Act)**

Medicare is federal health insurance for people 65 or older, some younger people with disabilities, people with End-Stage Renal Disease.

MDD **Major Depressive Disorder**
Also called clinical depression. It affects how you feel, think, and behave and can lead to a variety of emotional and physical problems.

NICU **Neonatal Intensive Care Unit**
The NICU is a nursery in a hospital that provides around-the-clock care to sick or preterm babies. It has health care providers who have special training and equipment to give the baby the best possible care.

ODD **Oppositional defiant disorder**
ODD is a type of disruptive behavior disorder in which children frequently defy authority with hostility, leading to serious disturbances in their daily life.

ODOC **Oklahoma Department of Corrections**
DOC is responsible for the administration of the state prison system.

OHCA **Oklahoma Health Care Authority**
The Oklahoma Health Care Authority is an agency of the government of Oklahoma responsible for providing health insurance benefits for the state's SoonerCare members. The authority is the state-level counterpart to the federal Centers for Medicare and Medicaid Services.

OJA **Office of Juvenile Affairs (Oklahoma Agency)**
The Oklahoma Office of Juvenile Affairs is an agency of the state of Oklahoma headquartered in Oklahoma City that is responsible for planning and coordinating statewide juvenile justice and delinquency prevention services. OJA is also responsible for operating juvenile correctional facilities in the State.

OKDHS **Oklahoma Department of Human Services (DHS)**
The state agency in Oklahoma created to administer and promote social services benefiting the general welfare, protection and security of the people of Oklahoma. Examples of programs within DHS are Temporary

Assistance for Needy Families (TANF), Medicaid, Foster Care, Child Care Subsidy and Licensing and Child Support Services.

OKSA **Oklahoma Successful Adulthood**
The Oklahoma Successful Adulthood Program focuses on our teen population and seeks to: promote the importance of early planning for one's future; develop each individual's innate strengths; promote the concept of permanent connections; ensure transition of young people ages 14-21 from state custody to self-sufficiency and successful adult living.

OOH **Out of Home**
Out-of-home care is a court-monitored process that encompasses the placements and services provided to children and families when children are removed from their home due to abuse and/or neglect.

OOSP **Out of Home Safety Plan**
A written agreement between the family and DHS that describes what safety threats exist and how the safety threats will be managed and controlled.

OS **Oklahoma Statutes**
Oklahoma Legislature's Website where you can follow the introduction of bills, committee actions, and votes on the bills.

OSBI **Oklahoma State Bureau of Investigation**
The Oklahoma State Bureau of Investigation is an independent state law enforcement agency of the government of Oklahoma. The OSBI assists the county sheriff offices and city police departments of the state and is the primary investigative agency of the state government.

OSCN **Oklahoma Supreme Court Network**
Oklahoma State Supreme Court information network is an online resource with information about all courts in Oklahoma.

PARB **Post Adjudication Review Board**
A PARB is composed of at least five volunteers (members) who live or work within a local judicial district. The volunteer board members have a desire to help our children create a brighter future for themselves. The volunteers are appointed by the Oklahoma Commission on Children and Youth (OCCY) through the recommendation of a local judge with the juvenile court responsibility. The primary responsibility of a PARB is to be an advocate for children who live within the local PARB's judicial district. In addition, the PARB reviews encourage interagency coordination and cooperation.

PAS **Post Adoption Services**
Local and national resources available for families navigating the life of adoption. To contact post adoption email CWS.PostAdoptionHelp@okdhs.org or call (405) 521-2475.

PL **Placement Line**
Completes a live interview with the child's caseworker and the child (if available) to gather needed information for placement. After completion of the interview, the child Placement Interview is sent to the regional placement coordinator (RPC) in the region where the child's case judicially resides.

PP **Permanency Planning**
The process of assessing and preparing a child for long term care when in out-of-home placements such as kinship, foster care, or institutions.

PTSD **Post-Traumatic Stress Disorder**
PTSD is a disorder that develops in some people who have experienced a shocking, scary, or dangerous event. It is natural to feel afraid during and after a traumatic situation. Fear is a part of the body's "fight-or-flight" response, which helps us avoid or respond to potential danger.

QRTP **Qualified Residential Treatment Program**
A congregate care facility that provides intensive therapeutic services such as individual counseling, group counseling, psychiatric services, family therapy, substance abuse treatment, 24-hour supervision, etc. for children and teens requiring crisis stabilization and/or long-term treatment.

RAD **Reactive Attachment Disorder**
RAD is a condition where a child doesn't form healthy emotional bonds with their caretakers (parental figures), often because of emotional neglect or abuse at an early age. Children with RAD have trouble managing their emotions.

RFP **Resource Family Partner**
RFP foster care services are provided by a private, licensed child-placing agency that contracts with OKDHS to meet the child's foster care needs through service coordination and delivery in conjunction with OKDHS.

RPC **Regional Placement Coordinator**
RPCs are traditional foster care supervisors responsible for overseeing placement searches and efforts conducted by local foster care staff for children from their region. These supervisors rotate within their designated area, taking on the role of RPC during their assigned periods.

Show Cause **Emergency Show Cause Hearing**
Requires that within two judicial days after a child is taken into emergency or protective custody as an alleged deprived child, the child's parent, legal guardian, or custodian is entitled to an emergency custody hearing, and thereafter at such intervals as determined by the court.

SNAP **Supplemental Nutrition Assistance Program**
SNAP provides nutrition benefits to supplement the food budget of needy families so they can purchase healthy food and move towards self-sufficiency. This program was previously called, "Food Stamps".

SP **Safety Plan**
A written agreement between the family and DHS that describes what safety threats exist and how the safety threats will be managed and controlled.

SPM **Safety Plan Monitor**
Each safety plan requires a safety plan monitor who helps ensure the safety plan is followed and the children remain safe. Safety plans may involve the children staying in the home of the safety plan monitor for a period.

STAR Program **Sexualized Trauma Abuse Recovery Program**
The INTEGRIS STAR program provides both acute and residential treatment for boys and girls ages 5 through 14 who have experienced sexual abuse.

TANF **Temporary Assistance for Needy Families (formerly AFDC)**
Time-limited public assistance payments based on Title IV-A of the Social Security Act. TANF replaced Aid to Families with Dependent Children when the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) was signed into law in 1996. The program provides parents with job preparation, work, and support services to help them become self-sufficient. Applicants for TANF benefits are automatically referred to their state or tribal child support agency in order to establish paternity and child support for their children from the noncustodial parent. This allows the state or tribe to recoup or defray some of its public assistance expenditures with funds from the noncustodial parent.

TBRI **Trust Based Relational Intervention**

TBRI is an attachment-based, trauma-informed intervention that is designed to meet the complex needs of vulnerable children. Caregivers can obtain training on TBRI to learn to utilize these therapeutic strategies in their home.

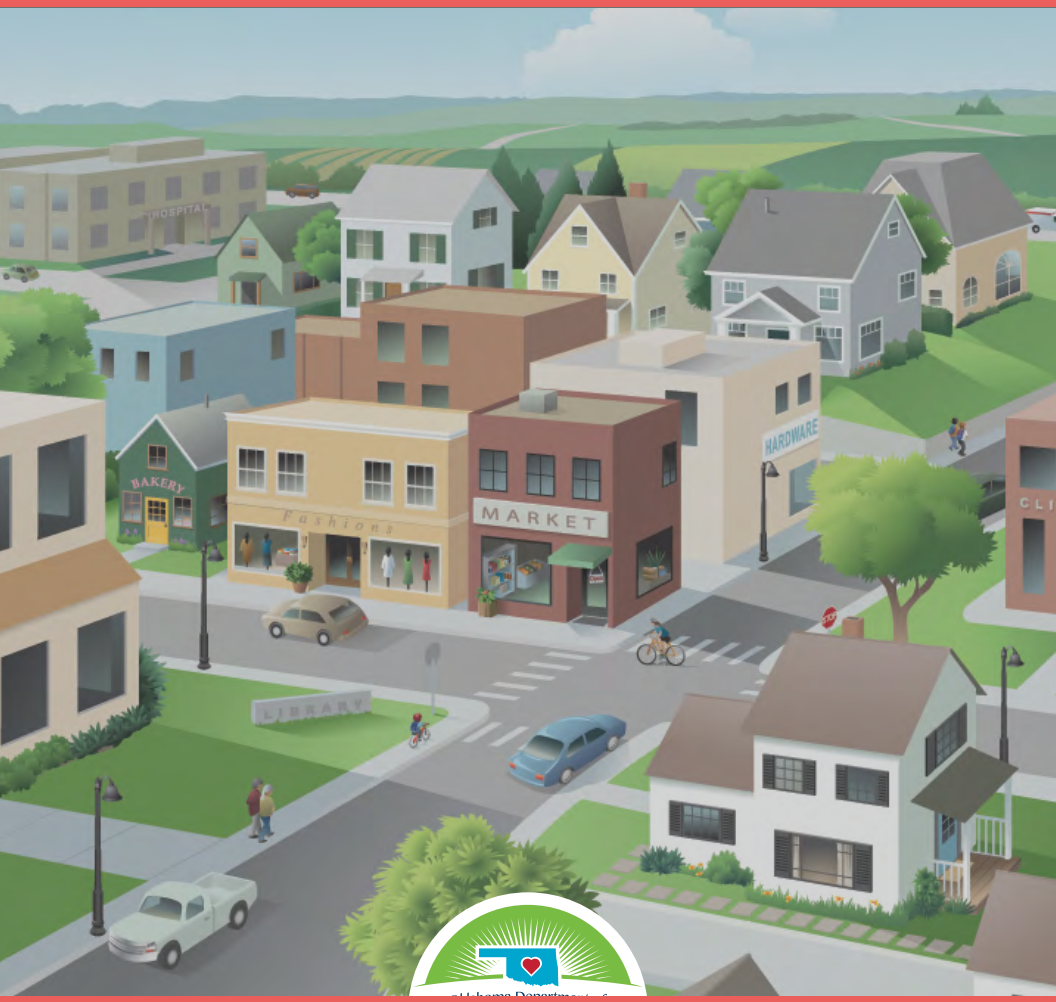
TFC **Therapeutic Foster Care**
TFC is designed to serve children ages 3 to 18 with special psychological, social, behavioral and emotional needs who can accept and respond to the close relationships within a family setting, but whose special needs require more intensive or therapeutic services than are found in traditional foster care.

TPR **Termination of Parental Rights**
TPR ends the legal parent-child relationship. Once the relationship has been terminated, the child is legally free to be placed for adoption with the objective of securing a more stable, permanent family environment that can meet the child's long- term parenting needs.

UA **Urinalysis (urine drug screen)**
A urinalysis is a test of your urine.

WIC **Women, Infants and Children**
The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) provides federal grants to states for supplemental foods, health care referrals, and nutrition education for low-income pregnant, breastfeeding, and non-breastfeeding postpartum women, and to infants and children up to age 5 who are found to be at nutritional risk. Foster children receiving Medicaid benefits are eligible for WIC.
https://oklahoma.gov/health/services/children-family-health/wic.html

WPC **Written Plan of Compliance**
A Written Plan of Compliance (WPC) could be necessary following an investigative finding or after a policy violation or concern has been identified in a foster home and needs to be corrected for the foster home to continue to be used.

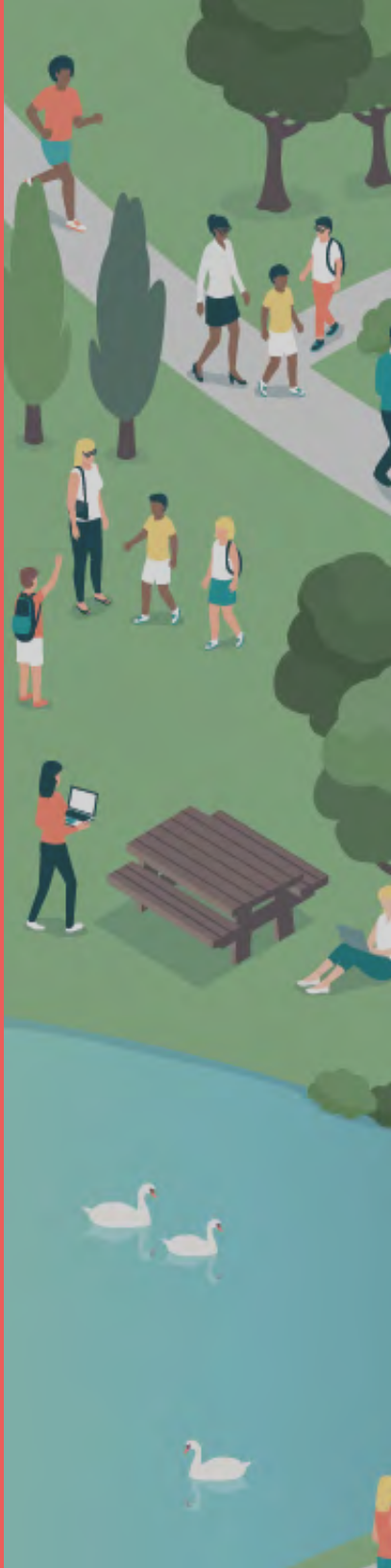


Human Services

DHS Child Welfare Specialist Roles

The Oklahoma Department of Human Services (DHS) has several different worker types whose roles within DHS are very different.

Here is a general list of the different worker types and their responsibilities. This list is provided to promote a better understanding of what each child welfare specialist does.



Child Protective Services Specialist

- Responds to calls when a person suspects a child is being abused or neglected.
- Evaluates reports of abuse and/or neglect, assesses child safety, assesses the risk of future maltreatment and the need for protective services and then assists in coordinating services.
- Makes a recommendation to the District Attorney's office whether or not a child is safe in the home.

Family Centered Services Specialist

- Provides voluntary services to families following an investigation or assessment where abuse or neglect was identified.
- Collaborates with the family to assess the family's needs and refer for services.
- Focuses on maintaining the child's safety in their own home.

Permanency Planning Specialist

- Is the primary worker for the biological family and child.
- Works with the child's parents to identify services to help correct the conditions that resulted in the child being placed in DHS custody.
- Visits the child on a monthly basis and informs the foster family of family visits, court hearings and other information important to the child's case.

- Talks with the foster family when they have questions about the child, including arranging medical, visual and dental appointments.
- Reports to the court and explains the progress the child's parent(s) has made on the Individualized Service Plan and makes recommendations to the court about the child's status while in out–of–home care.
- Responsible for making placement recommendations for the child.

Resource Family Specialist

- Works with both kinship and traditional foster families.
- Assists the family with meeting DHS requirements such as training, background checks, and completion of a home study.
- Is responsible for monthly foster care reimbursement and assists the family with child care, if eligible.
- Provides additional support to the family through phone calls, visits, and yearly in-service training.

Adoption Transition Specialist

- Works with children who are legally free for adoption but do not have an identified adoptive family.
- Completes diligent searches and family finding efforts.
- Visits with child at least once a month.
- Responsible for coordinating recruitment efforts and participates in scheduled recruiting events.
- Responsible for child assessment and adoption preparation activities.

- Participates in disclosure process to give a clear, current picture of the child and describe the child's progress in preparation for a family.
- Works with the child as they transition into their forever family.

Adoption Specialist

- Coordinates with the permanency worker and resource family specialist when a child is identified for adoption.
- Submits all paperwork required for authorization.
- Completes adoption disclosure with the adoptive family and is responsible for making sure family has all available information, past and present, about the children they are authorized to adopt.
- Responsible for ensuring all subsidy agreements and paperwork needed by state law are completed by the finalization hearing.
- Attends court hearings to assist in finalization of the adoption.

Recruitment and Development Specialist

- Recruits foster and adoptive homes for DHS.
- Assists the family with meeting DHS requirements such as training, background checks, and completion of a home study.
- Coordinates targeted recruitment efforts, as well as planning and attending recruitment events.

Post-Adoption Specialist

- Assists the family after adoption of a child in DHS custody.
- Services may include adoption subsidy, child care, medical services or difficulty of care payments.
- Responsible for updating the family's information each year.
- Oversees the Mutual Consent Voluntary Registry, Confidential Intermediary Search Program, and Reunion Registry.

Case Aide/Child Welfare Assistant

- Assists child welfare specialists in day-to-day work such as paperwork or transportation.

Child Welfare Supervisors

- Each of the above mentioned worker type has an immediate supervisor who is available to answer questions.

Contract Resource Family Assessment Specialist (RFA Contractor)

- Contracts with a private agency to complete the Resource Family Assessments (RFA) for all foster and adoptive families.
- Is a subcontractor, not a DHS employee.
- Assists DHS in completing the assessment as quickly as possible. It is important for foster and adoptive families to meet with the subcontractor and provide the requested documents and information.

Resource Family Partner Agency (RFP)

DHS contracts with private agencies to recruit, develop and support traditional foster families. A family approved through an RFP agency is assigned an agency foster care worker. Additionally, when a child is placed in the home, the family works with a DHS permanency planning specialist who is assigned to the child.

Therapeutic Foster Care

Therapeutic Foster Care (TFC) is a residential behavioral management service provided in a foster home setting. TFC is designed to serve children ages four to 18 with special psychological, social, behavioral and emotional needs who can accept and respond to the close relationships within a family setting, but whose special needs require more intensive or therapeutic services than are found in traditional foster care. Therapeutic Foster Care is provided by private agency partners who contract directly with DHS. Through the TFC agency, a child and the foster family will receive supportive services from professionals such as clinical therapists and family support specialists. The assigned TFC agency collaborates with the assigned DHS Child Welfare Specialist regarding all services provided to the child and family.

Note: Private agencies may have their own worker roles that differ from DHS. Check with each agency for more information about their worker roles.



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OKLAHOMA Human Services

Resource Parent Report to the Court

This optional form is completed by the resource parent(s) for each child placed in the resource home. Provide **factual** information based only on first-hand knowledge gained since the child's placement in the resource home or the last court hearing. Every item on the form does not have to be completed. Please type or print clearly in ink and submit the form **two** weeks in advance of the hearing. **Please return this form to the child's assigned child welfare (CW) specialist by email or in person at the monthly visit.**

Court hearing date _____ JD- _____ Legal case number

Child's assigned CW specialist _____ CW specialist email _____

Form completed by _____ Relationship _____

Child's name _____ Age _____

The child has been living in my home for ___ years and ___ months.

The child has been in the custody of Oklahoma Human Services since _____ .

1.Identify the child's strengths, hobbies, talents, and participation in extracurricular activities/events:

2. Describe the child's social skills and interactions with others:

3. Describe the child's educational progress and adjustment, such as most recent grades, 504 plan, Individualized Education Program:

4. Describe the child's physical health, including the results of recent medical and dental appointments and any follow-up needed:

5. Describe the child's emotional health and well-being, including any trauma therapy or services he or she receives:

6. When the child in your home is 14 years of age and older, list the activities he or she has engaged in as part of preparation for adulthood, such as Oklahoma Successful Adulthood (OKSA) activities, employment, or other life skills:

7. Describe the child's adjustment to the resource family and the resource family expectations:

8. Outline the child's family time with parent(s) and sibling(s), including the number of visits that occurred and the child's response to family time.

9. Identify any additional connections to kin, culture and community the child may have and how he or she maintains those connections:

10. Provide your view on the child's current needs:

11. Provide your view on how these needs can be addressed:

12. Provide your view on the child's permanency plan:

13. Provide any additional child or case specific information for the court to consider:

Optional: Attach photos of the child.

Signature

Resource parent printed name

Resource parent signature Date

Resource parent printed name

Resource parent signature Date