

Families First

a newsletter for Nebraska Families

April/May 2014

N F A P A

Change is coming . . . Foster Parent Subsidy Payments

By Barb Nissen

Foster care subsidies have long been a topic of discussion. Foster parents are often accused of “fostering for the money” but in reality, we all know that fostering comes from our hearts, and oftentimes our pocketbook. Well, times are a-changing...

Change began in 2012, when the Nebraska State Legislature recognized that foster parents should receive reimbursement rates that accurately reflects the cost of raising a child and that the subsidies foster parents were receiving were very different depending on which agency they were affiliated with and where they lived in the state. The legislature responded with the passage of LB820 and LB530 to appoint a committee that would:

- Create a standardized statewide rate that accurately reflects the cost of raising a child in the care of the state.
- Develop a statewide standardized level of care assessment to determine a foster child’s placement needs and to appropriately identify the foster care reimbursement rate to meet those needs.
- Provide all foster parents in Nebraska, beginning July 1, 2012 through June 30, 2014, an additional stipend of \$3.10 per day in addition to their current subsidy rate

The Reimbursement Rate Committee members are representatives from DHHS, child welfare agencies, advocacy organizations, foster parents, and

NFAPA. The committee first met in June 2012 and at this time the committee continues working on the development of rates to be implemented on July 1, 2014.

Beginning July 1, 2014,

- Foster parents will no longer receive the \$3.10 per day stipend.

- All foster parents will receive a base payment which will more accurately reflect the cost of raising a child in the Midwest. This base payment will be:

Age	Daily	Monthly	Annual
0-5	\$20.00	\$608.33	\$7,300.00
6-11	\$23.00	\$699.58	\$8,395.00
12-18	\$25.00	\$760.42	\$9,125.00

This base payment rate is for **Essential Parenting**. Your subsidy will never be less than this amount.

- Utilization of two new assessment tools will begin to determine any additional caregiving a foster parent will provide based on the child’s needs.

1. The Child and Adolescent Needs and Strengths (CANS) will assess the child/youths needs and strengths

2. The Nebraska Caregiver Responsibility Tool (NCR) will determine additional foster parent’s responsibilities beyond **Essential Parenting** to meet that child’s needs. Foster parents **MUST** be present,

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Nebraska Foster & Adoptive Parent Association

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Foster Care Reimbursement

By Jodi Allen

In 2013, the Nebraska Legislature passed Legislative Bill 530. This bill created statute around a standardized rate reimbursement for foster care. These minimum base rates were recommended by the Children's Commission to the Legislature based on a report by the Foster Care Rate committee, which convened in 2012. Minimum base rates have been established and will become effective July 1, 2014. No foster parent will be paid less than the minimum rates, which are as follows: For care of a child age 0-5, the minimum base rate is \$20 per day. For care of a child age 6-11, the minimum base rate is \$23 per day. For care of a child age 12-18, the minimum base rate is \$25 per day. These rates are regardless of location in the state and are the same for foster parents supported by either the Department of Health and Human Services or by a contracted foster care agency.

The Department of Health and Human Services will begin using two tools in July, 2014. The first is a Child and Adolescent Needs and Strengths assessment which identifies the needs a child may have. The second is the Nebraska Caregiver Responsibility Tool, which identifies what a foster parent(s) does to meet the needs of a child. This second tool will be completed by the case manager with the foster parent(s). Some foster parents may already be familiar with this tool, as the use of it was piloted in Lancaster, Platte, Lincoln and Adams counties in 2013/2014.

If you have questions regarding foster care rate reimbursement, you may contact your local Department of Health and Human Services Resource Development staff, NFAPA or Jodi Allen, Foster Care Program Specialist at Jodi.allen@nebraska.gov.

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Changes to Foster Parent Payments

provide input, and participate in completing this tool. Foster parents will receive rates based on their responsibilities to provide **Enhanced Parenting** or **Intensive Parenting**. The rates for **Enhanced Parenting** and **Intensive Parenting** have not been determined at this time.

Subsidy rates will no longer be based on a checklist of “how bad” the child’s needs are. Instead, rates will be determined by the specific responsibilities the caregivers will take on related to the needs of that child/youth. Foster parents will no longer have to embellish the child’s needs to receive a subsidy large enough to provide the basics of food and clothing and we can finally acknowledge when the child gets better without fearing a reduction in subsidy. The knowledge, skill level, and services **YOU** provide to meet the child’s needs will determine the level of care payment.

The Reimbursement Rate Committee recognizes the concern many of you may have that your subsidy rates will be lowered with this new level of care rate system and are developing an implementation process that will alleviate any sudden decreases in subsidies received for children/youth already placed in your home.

As we move towards implementation it will be important for you to become knowledgeable in your rights, roles, and responsibilities as a foster parent, ensure that you are keeping good documentation, and participate in training to improve your skills. **Remember, subsidies will be determined by the responsibilities you are able to provide in meeting the needs of your placements.**

There is still a lot of work to be done by the Reimbursement Rate Committee as the July 1, 2014 deadline approaches. At this time, there are still a lot of unknowns, so to ensure all foster families are well informed, NFAPA has scheduled Foster Care Reimbursement informational meetings throughout the state to further explain the implementation process, your rights and responsibilities, and the new assessment tools and rates. Please plan to attend and bring any questions or concerns you may have.

ATTENTION FOSTER PARENTS!

EARN YOUR FOSTER PARENT CREDITS WHILE GETTING THE CHANCE TO WIN A GREAT PRIZE!

Answer these 10 questions from this newsletter correctly and you will not only earn .5 credits toward your in-service hours, but your name will also be put in a drawing for a prize. For this issue we are offering a quilt. Just answer the following 10 questions and email the information to Felicia@nfapa.org or send the questionnaire to the NFAPA office at 2431 Fairfield Street, Suite C, Lincoln, NE 68521. For your convenience, this questionnaire will be available on our website (under “newsletters”) for you to print off, fill out and send in by email or mail. We will then enter your name in the drawing! We will also send you a certificate for training credit to turn in when it is time for relicensing. Good luck!

1. When do the minimum base rates become effective?
2. T or F: You do not need to make sure all after school functions a foster child participates in are closely supervised.
3. What are some of the conditions of Fetal Alcohol Disorder in kids?
4. T or F: All foster and adopted children have been exposed to alcohol.
5. What does FASD stand for?
6. Name 5 characteristics to watch for FAS/FASD.
7. What are 5 behavior tips to use for a child with FAS/FASD
8. Name 5 competencies successful family foster parenting includes.
9. What does the Child and Adolescent Needs and Strength (CANS) assessment do?
10. What does the Nebraska Caregiver Responsibility Tool do?

Name: _____

Address: _____

Email: _____

Phone #: _____

Issue: Families First Newsletter: April/May 2014

Fetal alcohol disorders common in adopted, foster kids

By Genevra Pittman

NEW YORK (Reuters Health) - Children adopted from orphanages or in foster care have a high rate of fetal alcohol syndrome and other physical, mental and behavioral problems related to alcohol exposure before birth, according to a new review of past studies.

Among those children, researchers found that rates of alcohol-related problems - which can include deformities, mental retardation and learning disabilities - were anywhere from nine to 60 times higher than in the general population.

"It's increasingly well recognized that this is a very high-risk population and one that we should really be paying attention to," Phil Fisher, a psychologist who studies foster and adopted children at the University of Oregon in Eugene, said.

"We know that one of the main reasons that kids end up in foster care or being made eligible for adoption is because their parents have substance abuse problems," added Fisher, who wasn't involved in the new research.

The findings are based on a review of 33 studies of children in the care of child welfare agencies or foster parents, as well as kids before and after their adoption from orphanages. Most of the studies were conducted in Russia or the United States.

Compiling the studies with the most accurate reporting techniques, Dr. Svetlana Popova from the Center for Addiction and Mental Health in Toronto and her colleagues found six percent of children in those settings had fetal alcohol syndrome.

The condition includes a distinctive set of facial features, including a small head, jaw and eyes, and other physical developmental defects, especially of the heart. Slow growth and delayed development after birth are also typical of fetal alcohol syndrome.

Close to 17 percent of the children had a more loosely-defined fetal alcohol spectrum disorder, which covers any physical, mental or behavioral issues caused by prenatal alcohol exposure.

The highest rates of fetal alcohol syndrome were seen among children in a Russian orphanage for kids with special needs and among those adopted from Eastern Europe by families in Sweden. In those studies, anywhere from 29 percent to 68 percent of children showed severe alcohol-related damage.

In other cases, such as a study of Chinese children adopted and brought to the United States, there were no reported instances of fetal alcohol syndrome, the study team reported Monday in *Pediatrics*.

Fisher said it's important to know that although problems related to alcohol exposure are common among adopted and foster children, not all kids have been exposed - and some with prenatal exposure are "quite resilient" and do fine.

"I don't think anyone wants to create the impression that every child in the foster care system ... and every child who's adopted has very severe problems," he told Reuters Health.

Still, he said there is a need for more recognition of the challenges faced by children who have been exposed to drugs and alcohol in the womb. Rather than focusing only on their obvious current symptoms, he said fetal alcohol disorders should be treated as chronic diseases, like diabetes.

"The supports need to be available in an ongoing way," Fisher said.

He also pointed to the importance of identifying children who have some of the effects of drug and alcohol exposure - but not ones as obvious as the distinct facial features seen with fetal alcohol syndrome - and getting them support as soon as they enter the child welfare system or are adopted.

"If we don't do the early screening and detection ... then I think we're in a much more challenging position," he said.

"We hope that the results of this study will attract attention to the needs of children in care affected by prenatal alcohol exposure," Popova told Reuters Health in an email.

She agreed that spotting problems as soon as possible is important.

"Early screening may lead to early diagnosis, which can lead to early participation in developmental interventions, which can in turn, improve the quality of life for children with a (fetal alcohol spectrum disorder)," she said.

Early intervention, Popova added, may also help prevent future mental health problems and trouble in school.

SOURCE: bit.ly/cxXOG Pediatrics, online September 9, 2013.



Reimbursement Rate Informational Meetings:

No childcare

Be “in the know” and ready for the changes in **foster parent reimbursement** that begin July 1, 2014. NFAPA has scheduled these informational meetings across the state to ensure every foster parent has the opportunity to fully understand the new rate system and to address the concerns or questions you may have. Foster parents will receive in-service credit for attending.

Central Area

O’Neill – June 7-Assembly of God Church, 204 North 7th St: 7:30-9:30 p.m.

Grand Island – June 10-St. Paul Lutheran Church, 1515 Harrison: 6:30-8:00 p.m.

Kearney – June 12 - United Methodist Church, 4500 Linden Ave: 6:30-8:00 p.m.

Northern Area

Columbus – June 10-Peace Lutheran Church 2720 28th Ave: 7:00-9:00 p.m.

Fremont – June 17-Masonic-Eastern Star Home For Children, Intersection of Highways 30 & 77: 6:30-8:30 p.m.

South Sioux – June 17-Building Blocks, 1312 Dakota Ave, Suite A: 6:30pm to 8:30pm

Norfolk – June 26-Faith Regional Hospital, 4700 Norfolk Ave: 6:30-8:00p.m.

Western Area

Lexington – June 2-Parview Baptist Church, 803 West 18: 6:30-8:00 p.m.

North Platte – June 8-HarvestChristian Fellowship Church, 1501 S. Dewey: 1:30-3:00 p.m.

Gothenburg – June 10-American Lutheran Church, 1512 Ave G: 6:30-8:00 p.m.

McCook – June 16-McCook Community Hospital, 1301 East H Street: 6:30-8:00 p.m.

Alliance – June 19-Knight Museum & Sandhills Center, 908 Yellowstone Ave: 5:15-6:45 p.m.

Scottsbluff – June 20-Regional West Medical Center

Ogallala – June 22-New Hope Church, 118 East B Street: 1:30-3:00 p.m. MDT

Eastern Area

Gretna – June 3-Good Shepherd Lutheran Church, 11204 S. 204th St.: 7:00-9:00 p.m.

Southeast Area

Lincoln – June 5-NFAPA Office, 2431 Fairfield Street, Suite C: 6:00-8:00 p.m.

Lincoln – June 23-NFAPA Office, 2431 Fairfield Street, Suite C: 6:00-8:00 p.m.

Pay for respite care is taxable income as it is considered a service as opposed to foster care per the IRS.

Respite providers are considered secondary caregivers, and these payments do not qualify as foster care payments or difficulty of care payments. If you receive payment from an agency for respite care, they must file a 1099-MISC form and you must claim the income.



Living with Fetal Alcohol

NOFAS / Living with FASD

Prenatal exposure to alcohol can result in an almost limitless combination of physical and functional birth defects. While there are specific criteria for diagnosing Fetal Alcohol Syndrome and other disorders under the FASD umbrella, the full range of physical and developmental disabilities for any one affected individual may become evident at irregular times through childhood, adolescence and into adulthood. Preventing the disabilities through early diagnosis and intervention—if possible—and coping with the symptoms or consequences of the disabilities becomes the challenge for families and caregivers.

Described below are practical solutions and recommendations for some of the most common challenges, including learning and behavioral problems across the lifespan. Often, more specialized information and resources are needed by families to adequately meet the needs of a loved one with FASD. Search the NOFAS Resource Directory, visit the Adults Living with FASD page, or contact NOFAS for more information.

FAS/FASD through the Lifespan

FAS/FASD has lifelong implications. There is a broad range of characteristics to watch for at different ages.

- **Infants:** low birth weight; irritability; sensitivity to light, noises and touch; poor sucking; slow development; poor sleep-wake cycles; increased ear infections.

- **Toddlers:** poor memory capability, hyperactivity, lack of fear, no sense of boundaries and a need for excessive physical contact.

- **Grade-school years:** short attention span, poor coordination and difficulty with both fine and gross motor skills.

- **Older children:** trouble keeping up with school, low self-esteem from recognizing that they

are different from their peers.

- **Teenagers:** poor impulse control, cannot distinguish between public and private behaviors, must be reminded of concepts on a daily basis.

- **Adults:** need to deal with many daily obstacles, such as affordable and appropriate housing, transportation, employment and money handling.

Strategies for Living Establish a relationship with a pediatrician and consult him or her with any problems or questions. Here are some other helpful tips—

For Infants:

- **Poor sleep-wake cycles/irritability:** Play soft music and sing to your baby. Rocking, frequent holding, low lights, automatic swings and wrapping them snugly in a soft blanket also can be helpful.

- **Poor weight gain:** Consult a nutritionist to develop a food plan or discuss supplement use.

- **Chronic ear infections:** Speak to a specialist about evaluating your

child's hearing and effectively treating infections.

- **Delays in rolling over, crawling, walking:** See an occupational therapist for assistance. Also help your baby in crawling, grabbing and pulling.

- **Speech delays:** Consult a speech therapist and purchase tapes or toys that are specifically designed for children with delays. Speak and read aloud expressively to your baby.

Toddlers:

- **Continued motor skill delays:** Work with an occupational or physical therapist. Use toys that focus on manipulating joints and muscles.

- **Distracted easily:** Establish a routine and use structure. Simplify rooms in the home and reduce noises or other stimulation.

- **Dental problems:** Consult a pediatric dentist. Your child may not be able to sit still, so be sure to prepare your child for the exam and allow more



Syndrome Disorders

time for the appointment.

- **Small appetites or sensitivity to food texture:** Serve small portions that are lukewarm or cool and have some texture. Allow plenty of time during meals and decrease distractions such as television, radio or multiple conversations.

School age:

- **Bedtime:** If your child cannot sleep at night, shorten naps or cut them out completely.

- **Making and keeping friends:** Pair your child with another who is one or two years younger. Provide activities that are short and fun.

- **Boundary issues:** Create a stable, structured home with clear routines and plenty of repetition.

- **Attention problems:** Medication may be helpful. Keep the child's environment as simple as possible, and structure time with brief activities.

- **Easily frustrated/tantrums:** Remove your child from the situation and use calming techniques such as sitting in a rocker, giving a warm bath or playing quiet music.

- **Difficulty understanding cause and effect:** Repetition, consistency and clear consequences for behavior are important.

Adolescence:

- **Anxiety and depression:** Medication may be helpful, as well as counseling or encouraging your child to participate in sports, clubs or other structured activities.

- **Victimization:** Monitor the activities of your child and discuss dealing with strangers.

- **Lying, stealing or antisocial behavior:** Family counseling is helpful, as well as setting simple and consistent rules with immediate consequences.

Adulthood:

- **Housing:** Finding appropriate housing for adults affected by FAS/FASD is extremely challenging. Contact your state's department of disabilities to pursue residential funding and get on every waiting list you can find that offers housing options.

- **Poor peer or social relations:** Enroll your child in classes or social clubs for adults with disabilities.

- **Mental health issues:** Provide structure, routine and plenty of activities. Investigate medication options and counseling.

- **Handling money:** Many FAS adults need the family to handle all financial matters.

- **Difficulty obtaining or keeping jobs:** Investigate trade schools, job training programs or job coaches. Be sure to select jobs that offer structured, routine activities that won't cause overload or stress.

More Tips

Routine:

- Keep your family's routine as consistent as possible.

- If the family's routine or schedule changes, remind your child about changes.

Behavior:

- Learn how to tell when your child is getting frustrated, and help out early.

- Make sure your child understands the rules at home.

- Tell your child about what will happen if he or she has good behavior or bad behavior at home.

- Let your child know when he or she has good behavior.

- Teach self-talk to help your child develop self-control. Use specific, short phrases such as "stop and think."

- Repeat everything you say and give your child many chances to do what you ask.

- Be patient.

- Give directions one step at a time. Wait for your child to do the first step in the directions before telling your child the second step.

- Tell your child before you touch him or her.

- Be sure your child understands your rules, and be firm and consistent with them.

**"For I was hungry, and you gave me something to eat;
I was thirsty, and you gave me something to drink;
I was a stranger, and you took me in."**

~ Matthew 25:35

Supervision of your foster child

By Dr. John DeGarmo

One thing I have learned over the years as a foster parent is that I must be flexible. To be sure, I never know when a child will arrive or leave my home, as there is often very little notice in either regard. In the past few months, I have seen the number of children in my home go from six to nine and then down to seven. As I write this, we currently have eleven children in our home; three biological, three adopted, and a sibling group of five children from foster care. Now, if you believe we are a group home, this is not correct. Emergencies crop up, and my wife and I simply have a difficult time saying no. Fortunately, the addition of several of these is for respite purposes.

As you can imagine with eleven children, it seems that all my wife and I do is clean, wash, and supervise. The cooking is nonstop, the washing of dirty clothes is around the clock, and the supervision is often done with one eye towards one group of children, while the other eye is watching out for the others. Is it pandemonium in our house? Perhaps. Is it a house that is never fully clean? Without a doubt. Is it a house full of love? Absolutely! At the moment, my wife and I seem to be burning both ends of a candlestick, and we are a little tired. Just a little, mind you. Yet, as exhausting and as grueling as it can be with so many children in our home, and with so many emotional issues and challenges, one thing we have to be consistent in is with supervision.

Supervision of your foster child is a must at all times. You will be held responsible for his whereabouts and safety, and may be held accountable if he should come to harm. It is not only important that you know where your foster child is at all times, it is essential. If your foster child should wish to visit a friend's house or another home, do a thorough check of who lives there, the environment he will be in, and the level of safety and supervision he will be under. Be sure to call the parents of the home he wishes to visit; not only to ensure that the environment is a safe one, but to express any concerns about your foster child you might have with them. If you

feel that the friend's home environment is not a safe one, do not be afraid to say no to the foster child. After all, you will also need to be certain that all after school functions he participates in are closely supervised as well, before giving him permission and before he takes part.

The supervision of your foster child is necessary in your own home, as well. Like with many children, it might be unwise to allow him to play unattended at any one time. If he is in his room playing or even napping, make sure that his door is open, if just a little bit. From time to time, check in on him, and make certain that he is okay and not doing anything that you would disapprove of. If he is in the back yard, make sure that he will come to no harm out there by stray animals, sharp objects, unwelcome visitors, or by simply wandering off by himself. Again, you will wish to periodically check in on him from time to time, while he is outside. If he is rather young, you will want an adult out there with him, at all times. Whether he is inside your home or outside, make certain that there are not too many places where he might hide himself. Some children might escape into a world of imagination and fun by hiding, while others might hide in an attempt to escape the harsh realities they have faced, or do so out of anger and resentment towards an adult. Make sure you know the locations of all the places your foster child might hide, and try to eliminate as many of these as possible.

As I travel across the United States, delivering speeches and training seminars, I am often asked by foster parents how I am able to do it, while looking so young. I jokingly respond by stating that a number of plastic surgeries on my face has kept me half way decent looking, while working under a 32 hour day, as well. Yet, in truth, I am just like any other good foster parent in that that I have to delegate my time throughout each day, in order to accomplish at least half of what I set out to do at sunrise. Much of this time is spent in caring for the children in my house, and ensuring that they are safe. Indeed, not only safe, but protected and loved as well.

MAY IS NATIONAL FOSTER CARE APPRECIATION MONTH!

By Pamela Allen, NFAPA Executive Director

I would like to take this opportunity to thank all Resource Parents (foster parents) for opening your homes and your hearts to children. Resource Families help children and families heal and come back together!

I am hoping that each and every one of you that are fostering, and those who have adopted from the foster care system, will take the opportunity to reach out in your community and connect with one family that can do what you are doing!

Governor Heineman will be signing a Proclamation declaring May as Foster Care Appreciation Month, on **May 14, 2014 at 11:00** at the **State Capitol. YOU ARE ALL INVITED!!** Proclamations are given in recognition of a special event. So come join foster parents in support of National Foster Care Month. We had a great turnout last year and hope to again this year.

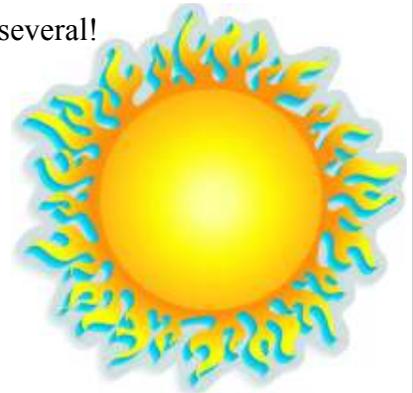
NFAPA will be hosting an open house at our office immediately following the Proclamation Signing, at 2431 Fairfield Street, Suite C. PLEASE COME. (*rsvp to Felicia@nfapa.org ...we want to be sure and have plenty of food*). I look forward to seeing you at the Capitol!

SUMMER FUN!

By Pamela Allen

Did this school year go by fast or what? Now what are you going to do with the kiddos all summer? Here are some ideas that might be helpful! Enjoy! (*be sure, if you are taking your child out of the state, to notify your worker*)

- Go for a walk (*walking with your child is a great way to spend time with them...it is amazing the things you can learn about when you are walking...they don't have to look at you and it can be easier for them to "share"*)
- Blow bubbles (*yes, even with your teens!*)
- Play tag or hopscotch (*Do YOU remember how to play hopscotch? If not, give me a call*)
- Catch fireflies at night (*my girls think they are fairies*)
- Roast marshmallows over a fire and make s'mores
- Have a picnic on the lawn (*in the living room if it is raining*)
- Lie in the grass and watch the clouds (*how many different things can you see in the clouds?*)
- Go fishing (*foster children receive free fishing licenses*)
- Camp out in the backyard
- Find a camp close by the kiddos can go to for a few days! There are several!
- Play catch
- Find a drive-in theater (*yes there are still a few*) and go see a movie
- Go to a baseball game
- Play badminton
- Make lemonade from scratch
- Run through the sprinkler
- Take the children to a local nursing home
- Go to the library
- Go on a bike ride
- Park at the airport and watch the planes come in
- Take lots of day trips! Nebraska is full of fun places to see!



Code of Ethics for Foster Parents

Preamble

The mission of the National Foster Parent Association is to support foster parents in achieving safety, well-being, and permanency for the infants, children, and youth in their care commensurate with the Adoption Assistance and Child Welfare Act passed in 1980, and the Adoptions and Safe Families Act passed in 1997. The Code of Ethics for Foster Parents begins by emphasizing that family foster care is an integral component of the child welfare system which:

- Recognizes the rights of children and youth to safe, nurturing relationships, intended to last a lifetime;
- Assists parents to regain custody or make alternative plans, intended to be permanent, for their children and youth;
- Emphasizes the developmental needs of children and youth
- Provides each child or youth with a foster parent and social worker who have the skills to support the child or youth's safety, developmental, and permanency needs, and provide foster parents and social workers with the supports necessary to develop and use these skills;
- Designs family foster care as a part of a comprehensive, coordinated, inter-disciplinary service delivery system;
- Provides legal representation to ensure timely and skillful responses to case plans involving court proceedings;
- Collects, analyzes, and disseminates accurate and relevant data about children, youth, and their families leading to informed policies, programs, and practices; and
- Supports family foster care – and all child welfare services – with effective and accountable leadership in city halls, governors' offices, national organizations, the judiciary, the federal government, Congress, and the White House (National Commission on Family Foster Care, 1991, p. 5).

Historical Perspective and Definitions

The Code of Ethics for foster parents is based on the definition of family foster care established by the 1991 National Commission on Family Foster Care,

sponsored by the Child Welfare League of America and the National Foster Parent Association. It reframed the historical term, “foster family care” to “family foster care,” to emphasize the importance of family. This is based on the premise established by the first White House Conference on Children in 1909 (Rycus & Hughes, 1998) and the United Nations Convention on the Rights of the Child in 1997 that children need and have the right to a family life Family foster care: An essential child welfare service option for children and parents who must live apart while maintaining legal and, usually, affectional ties. When children and parents must be separated because of the tragedy of physical abuse, neglect, sexual abuse, maltreatment, or special circumstances, family foster care provides a planned, goal-directed service in which the care of children and youth takes place in the home of an agency-approved family. The value of family foster care is that it can respond to the unique, individual needs of infants, children, youth, and their families through the strength of family living, and through family and community supports. The goal of family foster care is to provide opportunities for healing, growth, and development, leading to healthier infants, children, and youth, and families, with safe and nurturing relationships intended to be permanent (National Commission on Family Foster Care, 1991, p. 6).

Foster Parent: NFPA definition: Includes those providing kinship, guardianship, resource and family foster/adoptive care.

Statement of Purpose

The Code of Ethics is a public statement by the National Foster Parent Association that sets clear expectations and principles to articulate basic values and to guide practice. Family foster care is a public trust that requires foster parents, with essential supports from their agencies, to be dedicated to service for the welfare of the children in their care. Each foster parent has an obligation to maintain and improve the practice of fostering, constantly to examine, use and increase the knowledge upon which fostering is based, and to perform the service of fostering with dignity, integrity, and competence.

Principles

Successful family foster parenting includes competencies in the following domains:

Principle 1: Providing a safe and secure environment

Principle 2: Providing a loving, nurturing, stable family care environment.

Principle 3: Modeling healthy family living to help children, youth, and families learn and practice skills for safe and supportive relationships.

Principle 4: Providing positive guidance that promotes self-respect while respecting culture, ethnicity, and agency policy.

Principle 5: Promoting and supporting positive relationships among children, youth, and their families to the fullest possible extent.

Principle 6: Meeting physical and mental healthcare needs.

Principle 7: Promoting educational attainment and success

Principle 8: Promoting social and emotional development

Principle 9: Supporting permanency plans

Principle 10: Growing as a foster parent - skill development and role clarification; participation in training, professional or skill development, and foster parent support organizations and associations.

Principle 11: Arranging activities to meet the child's individual recreational, cultural, and spiritual needs.

Principle 12: Preparing children and youth for self-sufficient and responsible adult lives.

Principle 13: Meeting and maintaining all licensing or approval requirements.

Principle 14: Advocating for resources to meet the unique needs of the children and youth in their care (National Commission on Family Foster Care, 1991, p. 17).

Principle 15: Collaborating with other foster parents and the child welfare team, building trust and respecting confidentiality.

Principle 16: Promoting decisions that are in the best interest of the child/youth, promoting safety, well-being, and permanence.

Principle 17: Supporting relationships between children and youth and their families.

Principle 18: Working as a team member.

Context

A Code of Ethics for Foster Parents must be viewed within the context of the service delivery system in which individual foster parents are affiliated. Foster parents recognize that while they have the solemn responsibility for the 24-hour care of the children placed with them, their abilities and resources are influenced by caseworkers, the role reciprocals. The National Foster Parent Association urges social work professionals to view the Code of Ethics for Foster Parents within the Code of Ethics for Social Workers, promulgated by the National Association of Social Workers: competence, dignity, integrity, importance of human relationships, service, and social justice (National Association of Social Workers, 1996, p. 1).

References

- National Commission on Family Foster Care (1991). A blueprint for fostering infants, children, and youths in the 1990's. Washington, DC: Child Welfare League of America.

- National Association of Social Workers (1996). NASW Code of Ethics. Washington, DC.

L5 Youth Ranch

The L5 Youth Ranch sits on 112 acres of scenic rolling wooded countryside east of Sprague. It is operated by Matt and Daisy Langston and was opened the summer of 2006. The ranch provides a sanctuary for rescued horses and kids that are struggling with a variety of personal issues. Children are given the opportunity to ride the horses once a week to help them learn responsibility and give them a safe and supportive place to spend their time. Many of the horses at L5 Youth Ranch have been rescued from abusive situations. Some were seized with the help of law enforcement personnel, others by simply approaching the negligent owners directly, and others that simply needed a new home.

The ranch is open May through October. Kids typically come out once a week and spend two hours at the ranch. The ranch tries to have one adult counselor matched up with each child. They do 15 minutes of chores before they start working with the horses. The chores may include grooming and brushing the horses, cleaning tack, or mucking stalls. The youth learn to bridle and saddle the horses before they are able to begin riding. They begin working in a round pen where they learn non-verbal cues and how to control the horses using body language. It takes, on average, about two months for them to learn to direct the horse from the saddle. Most parents note that for many kids, the ranch offers therapy that surpasses any other available options. The kids seem more relaxed, less anxious and more content and confident when they are at the ranch. When working with a horse, kids are focused on helping the horse and it makes it easy for them to open up and talk about school, talk about struggles, talk about life. One of the main benefits the ranch can offer families is that it's free for children to attend. The only requirement to be welcomed at the L5 Youth Ranch is a willingness to learn. Sessions with Matt, Daisy, or one of our wonderful volunteers are available by appointment; simply call Matt at 402.525.9963 or Daisy at 402.525.9964. To learn more about the Ranch visit us online at www.L5YouthRanch.org.

Foster Care Poem: To My Foster Parents With Love

I came into your lives a lost and lonely child,
Full of anger and resentment,
Overwhelmed with fear and confusion.
Yet you took me into your home, your lives, and
your hearts.
From the very beginning you tried to make me
feel welcome and wanted.
Though I fought you each step of the way you
never gave up on me.
Instead you patiently and lovingly took me under
your wings,
protecting, guiding and shaping me.
Showing me love and understanding.
Giving freely and openly the praise and affection
I so desperately needed.
All the while expecting nothing in return.

As days turned into years you were still there
Making me feel safe and secure,
treating me with respect and fairness,
pushing me to be the best I could be.
And still, there I was fighting you.
Oh, the pain and heartaches you endured at my
hands.
Yet there you stood, firm and unwavering.
Never walking away, never giving up.
Always loving me no matter what the cost.

All these years later as I look at my own children
I realize just what you saw and still see when you
look at me.
Your daughter!

I love you.

Open Letter to Foster Parents

Dear foster parent,
Your foster child's progress might not be that easy
to see on a day-to-day basis, but when you reflect
from time to time on how far he or she has come,
give yourself some credit: Would that progress
have happened if you hadn't been planning,
praying, pushing for it? Everything you do for your
child in foster care — every appointment, every
therapy, every intervention, but also every smile,
every hug, every conversation — makes a differ-
ence. Sometimes he acts up in church or melts
down at the mall, and you feel those judgmental
stares. You may hear that you're causing your
child's problems, or handling them all wrong. But
you know your foster child better than most
people. You know what works; you know what he
can handle; you create an environment in which
she can be successful. You are a force for good.

John DeGarmo, Ed.D.

Speaker, trainer, foster parent, author of the
children's book *A Different Home: A New Foster
Child's Story*

Helping foster children in need.

www.drjohndegarmofostercare.weebly.com

“The beggarly question of parentage—what is it, after all? What does it matter, when you come to think of it, whether a child is yours by blood or not? All the little ones of our time are collectively the children of us adults of the time, and entitled to our general care. That excessive regard of parents for their own children, and their dislike of other people's, is, like class-feeling, patriotism, save-your-own-soul-ism, and other virtues, a mean exclusiveness at bottom.”

~ Thomas Hardy, *Jude the Obscure*

View children waiting for adoption at:

dhhs.ne.gov/children_family_services/Pages/adoption_children

Celebrating Those Who Make A Difference

By Barb Nissen

During support groups last month, we asked you to complete the phrase

A foster parent is..... Here is a sample of your responses.

A foster parent is...

• an eternal optimist. They believe every human being deserves a second (and sometimes a third) chance; parents and kids alike. They live with a huge amount of unconditional love and do their best to teach that to others.

• someone who loves children and wants to heal hurts and make them feel safe and loved.

• a person who donates their time, home, and talents to help families in their community.

• a role model, a caregiver, a supportive person, a listener.

• someone who cares about the well-being of the child or children and want to make their life a little better in hopes that they can eventually go back home.

• someone who wants to make a difference in the life of a child.

• a teacher, a caregiver, a provider, a friend, a doctor/nurse. Someone you can trust.

• someone who takes in children and helps them overcome the adversity in their life to become the people they were meant to be. A foster parent opens their homes, hearts, and lives to help repair what is broken in the child's life. A good foster parent gives the child hope and helps them realize that not all people are bad and that things can and will get better.

• a person or family who opens their home for children who are removed from dangerous situations and cares for them until they can either return home or an alternative place can be arranged. A foster parent needs to be nurturing, loving, and be nonjudgmental, because no matter how dangerous the situation was, the children will always have loyalty to their birth parents.

• A person who gives of themselves unconditionally to children who need to be cared for and loved. My foster children say the definition of a foster parent is "ME". We teach kids right from wrong, we teach that life has consequences, good and bad. We love the kids as our own.

Because of you, children who have lived nightmares during the daytime can learn to believe in themselves and other adults. With your help, they learn to trust and love again. Whether these children are part of your family for one night or a lifetime, you make an immeasurable difference in their lives.

Thank you for being a foster parent.

Adoption Book Club

Are you an adoptive parent who would love to learn more about the impact of adoption on your children?

Are you interested in learning how you can support your children through their identity development?

Would you like to meet other adoptive parents?

You are invited to join our book club.

The second Tuesday of each month

May 13, 2014

7:00 p.m.

**610 J Street, Basement Conference Room
Lincoln, NE 68508**

Our book is

***Telling the Truth to Your Adopted or Foster Child: Making Sense of the Past*
by Betsy Keefer & Jayne E, Scgiiker**

If you can, get started reading. If you can't, it is no problem. You will be welcomed.

Bring a snack to share.

**Please call Barbara Dewey, LICSW,
at 402-525-9825**

to let her know that you plan to be there.

NFAPA Support Groups

NFAPA offers support groups at the following dates/times/locations. Up-to-date information with each support group location will be on our calendar page on the website. This is your chance to gain understanding and parenting tips through trainings, discussions, and networking with fellow foster families. In-service training is offered at most support groups. Registration is not required, unless noted, but you are welcome to contact your Resource Family Consultant to let them know you are coming. Support groups will be cancelled for inclement weather. Call the office or check the calendar on our website at www.nfapa.org.

Central Area:

- Grand Island: St Paul Lutheran Church, 1515 Harrison
 - May 13: 6:30-8:00 p.m.
- Kearney: United Methodist Church, 4500 Linden Ave
 - May 8: 6:30-8:00 p.m.

Northern Area:

- Norfolk: Faith Regional 4700 Norfolk Ave
 - April 24: 6:30-8:00 p.m.
 - May 22: 6:30-8:00 p.m.
- South Sioux City: Building Blocks Office, 1312 Dakota Ave., Suite A.
 - July 15: 6:30-8:00 p.m.
 - August 12: 6:30-8:00 p.m.
- Columbus: Peace Lutheran Church, 2720 28th Street.
 - May 13: 7:00-8:30 p.m.
 - June 10: 7:00-8:30 p.m.

Western Area:

- North Platte: Harvest Christian Fellowship Church, 1501 S. Dewey. Childcare Provided.
 - May 11: 1:30-3:30pm
- Gothenburg: American Lutheran Church, 1512 Ave G.
 - May 13: 6:30-8:00 p.m.
- Lexington: Parkview Baptist Church, 803 West 18. Childcare Available.
 - May 6: 6:30-8:00 p.m.
- Ogallala: New Hope Church, 118 East B Street. Childcare Available.
 - April 27: 1:30-3:30 p.m.
 - May: No meeting in May
- McCook: Community Hospital, 1301 East H Street.
 - April 21: 6:30-8:00 p.m.
 - May 19: 6:30-8:00 p.m.

Eastern Area:

- Gretna: Little Red School House, 21730 Laura Street.
 - April 28: 6:30-8:00 p.m.

Give to Lincoln Day: May 29, 2014

On Thursday, May 29th, the Lincoln Community Foundation will be sponsoring Give to Lincoln Day. They are working to make this a record-setting 24 hours of giving and raising thousands of dollars to support nonprofits in Lincoln and Lancaster County. We know that nonprofit organizations enrich our lives every day, so we hope that one single day our community can show a collective appreciation by giving.

The Nebraska Foster & Adoptive Parent Association (NFAPA) is participating in this event and every donation NFAPA receives on Give to Lincoln Day will increase because the Lincoln Community Foundation and their participating partners are offering a challenge match pool of \$300,000. Gifts on May 29th will be matched proportionally based on dollars raised by each nonprofit.

Please encourage family and friends to donate on May 29. Get more information at www.givetolincoln.com. Be sure to log in on May 29 to donate to NFAPA at:

www.givetolincoln.razoo.com/story/Nebraska-Foster-And-Adoptive-Parent-Association

Nebraska Foster & Adoptive Parent Association 2014 In-Service/Training Registration



May 13, 2014
Time: 6:00-9:00 p.m.
Peace Lutheran Church
2720 28th Street
Columbus, NE
3 hour in-service training
Cost: Free

Stan Waddell is returning to Nebraska to provide two 1.5 hour workshops on Tuesday, May 13 in Columbus. One workshop is on **Behavior Management and Using Behavior Charts**. Participants will be able to define behavior management, identify reasons children act out and keys to successful behavior management. You will also be able to identify the use of behavior modification plan to help manage children's behaviors, use of structure, routine and positive reinforcing to improve behavior and ways to use behavior charts to improve children's behavior. The other workshop is **Coping with Trauma Reminders**. Participants will be able to identify what is a trauma reminder, role the five senses play in trauma reminders and identify flashbacks and ways to deal with flashbacks.



May 22, 2014
Time: 4:00-5:30 p.m.
NFAPA Office
2431 Fairfield Street, Suite C
Lincoln, NE
1.5 hours in-service training
Cost: Free

"Foster alumni and National Child Welfare Specialist for Markel Insurance Company, Rhonda Sciortino, will be presenting in Lincoln on Thursday, May 22nd on **Preventing Tragedy in Foster Care**. Ms. Sciortino brings 25 years of in-depth understanding of the ways foster kids and families get injured or killed. You'll hear the times of day when kids are most likely to be injured, the 5 most frequent ways kids and family members are injured, and the two months of the year when injuries occur. Don't miss this powerful training."

Please fill out the registration below and mark which training you will be attending.
Send form and payment to: NFAPA, 2431 Fairfield Street, Suite C, Lincoln, NE 68521

Foster Parent In-Service Registration Spring 2014:

Name _____ Training Date & Location _____

Name _____ Training Date & Location _____

Email Address _____ Cell # _____ Home # _____

Address, City, State, Zip _____ NFAPA Membership Number _____

For those interested in Guardianship training,
check out our website at www.nfapa.org for a training near you.



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2431 Fairfield Street, Suite C
Lincoln, NE 68521
www.nfapa.org



JOIN NFAPA....your support will enable NFAPA to continue supporting foster parents state-wide!

Benefits

- Ongoing trainings/conferences at local and state level
- Networking opportunities with other foster (resource) families, adoptive families, and relative caregivers
- Opportunity for all foster (resource) families, adoptive families and relative caregivers to be actively involved in an association by serving on committees and/or on the Executive Board
- Working to instigate changes by alertness to legislation affecting the child welfare system
- An advocate on your behalf at local, state and national levels
- Alertness to legislation affecting the child welfare system

Thank you for your support!

Please mail membership form to:
NFAPA, 2431 Fairfield Street, Suite C,
Lincoln, NE 68521.

Questions? Please call us at 877-257-0176.

NFAPA is a 501c3 non-profit organization comprised of a volunteer Board of Directors and Mentors.

Name(s): _____

Organization: _____

Address: _____

City: _____ County: _____

State: _____ Zip: _____ Phone: _____

Email: _____

I am a Foster/Adoptive Parent. I have fostered for _____ years.
(circle one)

I am with _____ agency.

I wish to join the effort:

- Single Family Membership** (a single foster or adoptive parent), \$25
- Family Membership** (married foster or adoptive parents), \$35
- Supporting Membership** (individuals wishing to support our efforts), \$75
- Organization Membership** (organizations wishing to support our efforts), \$150
- I wish to join the effort through a donation.

My donation will be acknowledged through Families First newsletters.

- Gold Donation, \$1,000 Silver Donation, \$750
- Platinum Donation, \$500 Bronze Donation, \$250
- Other, \$ _____