



Alternate/Respite Care Agreement

Types of Caregivers

Occasional Caregiver

Baby-sitters who provide short-term or infrequent child care are considered occasional caregivers. These temporary caretakers who provide baby-sitting must be skilled and experienced caregivers. They must be age appropriate, mature, and trustworthy.

Background Check: A criminal history and CANRIS (Child Abuse and neglect check) are not required for occasional caregivers, but Grace Manor staff may request that the caregiver have a background check completed, especially if this person is used on a routine basis.

Alternate Caregiver

Alternate caregivers are baby-sitters who routinely provide child care and supervision when the foster parent is unavailable or provides respite care services (over 72-hour of care). Alternate caregivers must be verified foster parents, licensed day care providers or they must complete the requirements below and be approved by Grace Manor:

1. **Background Check:** For all adults identified as alternate caregivers, Grace Manor staff must complete a criminal history and a CANRIS (Child Abuse and neglect check) on all household members 14 years of age and older. These checks are assessed in the same manner as verified foster families.
2. **Complete Application for Respite Care Provider:** This must be completed and references must be sent out and responses returned and evaluated.
3. **Training:** CPR & 1st Aid must be complete and current for the primary alternative care provider. Psychotropic Medication Administration/Blood Born Pathogens must be completed by primary alternative care giver.
4. **TB test results** n all household members over age 1 (one).
5. **An alternate caregiver agreement** (which includes Grace Manor's discipline and confidentiality policies) must be signed.

Reimbursement of Services

Foster families will make their own arrangements outside Grace Manor with their own personal friends, family members, babysitter, etc. to provide babysitting, overnight care or respite. Grace Manor would not be responsible for reimbursing these caregivers.

If the Grace Manor Case Manager or other staff makes arrangements for respite or alternative care, each foster child's daily per diem would be paid to the respite/alternate care provider. The foster family taking respite would not be paid the daily per diem while each foster child is in respite care. When respite care is completed, the per diem will begin to be paid again to the original foster family.

Confidentiality Policy

All children in the care of Grace Manor and TDFPS have the right to confidentiality. Access to child information and records is limited to the parent or managing conservator, when the child is a minor, and authorized Grace Manor personnel except when contrary to law. Foster parents or Grace Manor staff will share information with the Alternative caregiver that will affect their ability to care for each child. The Alternate caregiver will only share information regarding the child with the foster parents or other Grace Manor staff.

Safety Policy

All firearms should be kept locked and ammunition locked separately from the firearms.
All medications should be locked or kept out of reach of children.
All chemicals should be stored out of reach of children.
All dangerous tools and equipment should be stored out of reach of children.

Agency Policy on Discipline

Appendix 7120: TDFPS Discipline Policy

TDFPS Child Protective Services /CPS 97-2

Physical discipline may not be used on a child in any TDFPS foster home or adoptive home prior to consummation. Discipline must be constructive and educational in nature. Correction must be fair, reasonable, consistent, and related to the specific misbehavior. Foster/adoptive parents and other caregivers should point out clearly and emphatically

- What the child has done wrong,

- Why the discipline must occur, and
- The full extent of the discipline (how long the discipline is in effect and/or what has to occur to end the discipline period).

Discipline should be individualized and related to the child's special misbehavior, the child's age, the child's developmental level, the child's previous experience, the child's previous reaction to discipline, and other relevant factors concerning the child.

Discipline of children must not result in bruises, welts, burns, fractures, sprains, exposure, poisoning, or other types of injuries. Discipline cannot consist of withholding food, shelter, supervision, medical or educational care, other necessities, mail, or special items such as Christmas gifts, or birthday gifts. Threatening the child with loss of placement, loss of parental visits, name calling/labeling the child, and embarrassing or degrading the child are not acceptable means of discipline.

Shaking, harsh, cruel, unusual, or unnecessary punishment is not allowed. Caregivers who must use personal restraint or holding to protect the child from harm and injury to himself or others must comply with Minimum Standards 1630.10 through 160.18 for Child-Placing Agencies. Caregivers must receive appropriate training in restraint and de-escalation by a certified therapist or medical doctor. All training must be documented in the foster home record. "Holding intervention" is a therapeutic approach to promote the child's ability to bond with others and is not to be confused with holding or restraining a child from harming himself or others. This form of therapy is allowed only under the direct supervision of a therapist trained in "holding intervention" and is not to be practiced by the caregiver. If a caregiver is working with a therapist that uses "holding intervention" with a child in foster care, the child's caseworker must document in the child's service plan that this form of therapy is being used. Staff should also have the child's level of care (LOC) reviewed to ensure that all of the child's needs are being met by the facility.

Isolation of a child for time-out should have reasonable time periods with adult supervision. Boxes, closets, or other confined/enclosed structures are not allowed. Any form of discipline used cannot violate any of the specific prohibitions in the Minimum Standards.

The foster and adoptive parents and CPS caseworker will develop appropriate discipline methods for each child in the foster/adoptive home. Alternatives to physical discipline will be provided to you by foster home development and adoption staff.

Foster and adoptive parents and CPS staff must not give permission to any person to discipline foster/adoptive children in ways that are not consistent with this policy. This does include school personnel.

Foster and adoptive parents must keep a written record of all restraints. The foster/adoptive parents will provide a written monthly record to the child's caseworker and foster home development or adoption worker for inclusion in the child's record.

Alternate/Respite Care Acknowledgement

I have read, understand, and agree to abide by the regional and state discipline policy, the confidentiality policy, safety policy and the requirements for caregivers.

_____ Alternate Caregiver _____ Date

_____ Alternate Caregiver _____ Date



Alternative & Occasional Caregiver Application

Will you be keeping children at Your Home Their Foster Home ?

Primary Respite Caregiver

Name (First, Middle, Last)	Maiden Name (if applicable)
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Spouse

Name (First, Middle, Last)	Maiden Name (if applicable)
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Mailing Address	Zip Code
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Directions to Home (if keeping children in your home)

	Primary Caregiver	Spouse
Place of Birth		
Date of Birth		
Are you a US citizen?	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
If no, where is your citizenship? Are you a permanent Resident Alien?	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
If yes, how long?	_____ years, _____ months	_____ years, _____ months
Social Security #		
Driver's License #		
Race & Ethnicity		
How long have you lived in Texas?		
Mental Health Disorders: List all psychological and/or psychiatric treatment and medications		
Health: List all disabilities, serious illnesses, operations, and chronic conditions you have experienced during the past ten years. Also list all the medications you are now taking.		

1. For which foster home(s) will you be providing respite?

2. Are you willing to provide alternate or occasional care for other families if needed?

3. Do you have any experience in dealing with children, especially children with behavioral and emotional problems?

yes no If yes explain: _____

4. Do you have any volunteer experience? yes no If yes, please explain:

5. Do you have a history of drug/alcohol abuse? yes no If yes, please explain:

6. Do you smoke tobacco products? (ie cigarettes, pipes, cigars) yes no

Grace Manor requires that caregivers do not smoke in the presence of foster children due to the dangers of secondhand smoke. If you do smoke, explain what measures you will take to keep the smoke away from foster children and provide a smoke-free living environment (ie – only smoke outdoors, no smoking in vehicles, etc).

7. Do you own a gun of any type? yes no If yes, please explain how you will provide for a child's safety while they are in your home.

List all children in your home: (biological, step or children you baby-sit on a regular basis)

Name:

DOB:

List any other adults living in the home:

Name:

DOB:

Please list 2 persons (not including the foster parents for whom you will be providing respite) who have known you for a minimum of 3 years, are well acquainted with you and your family, and whom we may contact for a reference.

Name

Address

City, State, Zip

Telephone

Relationship

Name

Address

City, State, Zip

Telephone

Relationship

I hereby declare the information provided by me in this application for alternate care is true, accurate, and complete to the best of my knowledge. I give my permission for any of this information to be verified and I understand that if any of this information is found to be inaccurate or false, this may be used to terminate any further consideration of my application. I give my consent for any agency, employers, companies, friends, or family to be contacted.

Signature

Signature

Date

Date