

Department of Family and Children Services Administrative Policies and Procedures Manual	Section: Part: Page: Date:	Financial 2301.5 Page 1 of 6 November 2009
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2301.5 Foster Care – Respite Care for Foster Parents

A. Respite Care Overview

1. Respite family foster care is a support service to allow foster parents “time away” from their parenting responsibilities. **Respite care must receive prior approval by the case worker in order for them to have time to find an appropriate placement for the child. This is to benefit the foster parents. Concurrent care is for the benefit of the foster child.**
2. There are two types of respite care: overnight care and day care. Only children in DFCS approved foster homes and Private Agency (non-DFCS/CPA) foster homes are eligible for this service.
3. Respite care is paid at the child’s per diem rate, regular or specialized, for both the Primary Foster Home and the Secondary Foster Home

NOTE: A foster parent can receive up to a maximum of 5 days of overnight respite and 5 days of day respite for each foster care child in their home in any given fiscal year.

4. Both the primary foster home and the respite care giver will receive per diem payments during respite care.
 - **The Primary Foster Home will be reimbursed for their full months per diem from the regular foster care program as long as they do not exceed the 5 day limit rule as discussed in #3 above. Any days beyond the 5 day rule will not be reimbursed.**

NOTE: County Directors can not waive the 5-day policy limit for foster parent respite; a state office waiver is required. County funds cannot be used to pay the primary foster care home in excess of the 5 day limit rule

- **The Secondary Foster Home will be paid their per diem from the respite care program the day the child comes to their home and throughout their stay (up to the 5 day maximum) but the Secondary Foster Home will not be paid for the day the child leaves their home.**
- **If the child remains in the Secondary Foster Home for a period that exceeds that 5 day yearly maximum, then the Secondary Foster Home will still be paid, but the expense (over the 5 days) should be charged to the child’s normal foster care program.**

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- If the child is IV-E, but the Secondary Foster Home is not in IV-E compliance, then the per diem will have to be paid from IV-B or Initial funds. The SHINES resource maintainer at the county is responsible for entering data in regards to a foster home's compliance to ensure that the system will generate an invoice from the correct funding source.
5. Overnight or Day respite days may be taken individually or consecutively in a fiscal year.
 6. Respite care providers must meet DFCS established standards.
 7. A child's Restricted Funds should not be used to reimburse the foster parent being paid from the respite care program (UAS program 520).
 8. County Departments should have a procedure in place to closely monitor the number of overnight respite days and day respite days taken by foster parents so as not to exceed the fiscal year maximum.

B. Overnight Respite Care

1. This type of respite care is designed to give foster parents a needed break from parenting for such purposes as vacation, hospitalization or any other reason or circumstance which makes the foster parent unable to provide for the child's care in their home.
2. The respite home provider, (DFCS approved foster home or Private Agency foster home), must meet the DHR Minimum Standards for Foster Homes, including the maximum number of children for whom respite care can be provided: i.e., six, including birth, foster and non-related children placed in the home, and the ages of the children served: i.e., no more than three (3) children under age three being served at any time.
3. A waiver is required from the Deputy Director of Policy and Programs for approval to place a child in a DFCS approved CPA or CCI foster home for respite or to place a CPA child in a DFCS foster home. The waiver should include child's information, reason for waiver, efforts to locate a DFCS approved foster home, and treatment plans. (Social Services Foster Care: Fiscal 1016.45) Currently at this time, SHINES does not have a WAIVER box established to capture this information, so a Paper Copy of the approved waiver must be provided to Regional Accounting.

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4. For overnight respite care, the Primary Foster Home provider will need to complete a Foster Care Invoice for the month, but should indicate the dates that the child was in overnight respite care. The Secondary Foster Home provider will also need to complete a Foster Care Invoice for the dates that the child was in their care.
5. For **Overnight Respite Care**, the Placement Page for respite must be completed and approved in SHINES indicating where the child is placed and the effective dates of placement. When the child returns back to the Primary Foster Home, the Placement Page for respite should be completed terminating the placement.
6. The SHINES system has safeguards built in that as long as the caseworker properly enters the respite care, the system will not allow for payments above the authorized 5 day limit per fiscal year.
7. The SHINES Placement Page Box for “Respite” should be marked so that the SHINES system will generate two invoices. This will alert the accounting staff to be looking for two invoices for per diem payments to two different foster care providers for a child.

C. Day Respite Care

1. This type of respite care is designed to provide less than 24-hour childcare in order for the foster parent to deal with short-term situations of being away from the home: e.g., hair appointments, unexpected family illness, or any other personal activities.
2. For Day Respite Care, the foster parent should record the service as “Day Respite Care” along with the date and cost (limited to the child’s current per diem rate) on Form 526, Foster Care Invoice. Paid receipts must be attached.

NOTE: The Day Respite Care charges are paid like supplemental supervision in addition to the Primary Foster Home’s normal per diem.

NOTE: Day Respite Care must be paid by the Primary Foster Home and should not be submitted by the respite care provider on a separate foster care invoice.

3. The respite care provider must meet the same requirements as Supplemental Supervision providers.

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EXAMPLE

Situation: Foster Home “A” (Good) requests Respite from parenting responsibilities 5/22/XX to 5/26/XX. Case Manager informs Foster Home “A” (Good) of fiscal policy allowing reimbursement for only 5 days of Respite per diem.

Case Manager approves respite and finds placement for child at Foster Home “B” (Green) beginning 5/22/XX.

Respite placement must be entered and approved in SHINES.

(Example continued)

Dates of Service	FH “A” Good	FH “B” Green	Explanation of charges
5/1-5/21/XX	503	N/A	
5/22/XX	503	520	Day the child leaves “A” & enters “B”
5/23/XX	503	520	FH “A” Good– Respite
5/24/XX	503	520	FH “A” Good – Respite
5/25/XX	503	520	FH “A” Good – Respite
5/26/XX	503	N/A	Day the child leaves “B” & returns to “A”, SLEEP RULE
5/27-5/31XX	503	N/A	Child at “A” through end of service month



Training

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My Tasks Case Search Financial Reports Resources

Case Summary Person Contacts/Summaries Service Authorization Legal Child Plans Placement History Foster Care Eligibility Case Management

Placement Info Placements for Case Payment of Care Relative Care Assessment

Stage Name: Harvin, Glenn
Case ID: 5606407
Placement Information
* required field
‡ conditionally required field

Approval Status [Expand All](#) [Collapse All](#)

Placement Detail

* Start Date/Attempted Date: 05/22/2009 * Time: 11:00 AM * Actual/Attempted: Actual

* Placement Type: DFCS Family Foster Home

Contacted By: Smallwood, Glenn * Method: Announced Face to Face

Temporary Placement Temporary Placement Type: Respite Night

‡ Temporary Placement Foster Family going vacation

Comments:

Placement Name

‡ Agency: ‡ ID:
‡ Facility: Dolores Green ‡ ID: 5600527
Contact:

Waiver Required ‡ Case ‡ Home ‡ Waiver ID:

Placement Information

Date Last Discharged From Last Foster Care Episode: Match%:

‡ Permanency Report Due Date: 08/31/2010

Medicaid and Plcmt Addr Diff Sibling Group
 Intended to be Permanent Boarding County
 Supervision Contracted Placement Services to Parents
 Close Family Friend

‡ Boarding County:

Trial Home Visit

‡ Court Ordered Begin Date: ‡ Court Ordered End Date:

- ▶ Placement Checklist
- ▶ Placement Discussion
- ▶ Placement Removal/Refusal
- ▶ Address/Phone Detail

Narrative



Training

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Placement Name

‡ Agency: ID: 5600527
‡ Facility: Dolores Green ID: 5600527
Contact: [Text Box]

Waiver Required Case Home ‡ Waiver ID:

Placement Information

Date Last Discharged From Last Foster Care Episode: Match%: [Text Box]

‡ Permanency Report Due Date: 08/31/2010

Medicaid and Plcmt Addr Diff Sibling Group
 Intended to be Permanent Boarding County
 Supervision Contracted Placement Services to Parents
 Close Family Friend

‡ Boarding County: [Dropdown]

Trial Home Visit

‡ Court Ordered Begin Date: [Text Box] ‡ Court Ordered End Date: [Text Box]

▶ Placement Checklist

▶ Placement Discussion

▼ **Placement Removal/Refusal**

‡ End Date: 05/26/2009 ‡ Time: 12:00 AM

‡ Removal Reason: Respite Placement Ended

Comments: [Text Box]

Continued Contact Recommended

▶ Address/Phone Detail

Narrative