WHAT IS THE QUALITY PARENTING INITIATIVE (QPI)?
What is Quality Parenting Initiative (QPI)?

The Quality Parenting Initiative, a strategy of the Youth Law Center, is an approach to strengthening foster care, refocusing on excellent parenting for all children in the child welfare system. It was launched in 2008 in Florida, and as of 2018, over 75 jurisdictions in 10 states (California, Florida, Illinois, Louisiana, Minnesota, Nevada, Ohio, Pennsylvania, Texas and Wisconsin) have adopted the QPI approach.

In order to thrive, all children and youth need excellent parenting. When parents can’t care for their children, the foster or relative family must be able to provide the loving, committed, skilled care that the child needs, in partnership with the system, to ensure children and youth thrive. Both the caregiver’s parenting skills and the system’s policies and practices should be based on child development research, information and tools. QPI is based on five core principles:

1. Excellent parenting is the most important service we can provide to children and youth in care. Children need families, not beds;
2. Child development and trauma research indicates that children need constant, consistent, effective parenting to grow and reach their full potential;
3. Each community must define excellent parenting for itself;
4. Policy and practice must be changed to align with that definition; and
5. Participants in the system are in the best position to recommend and implement that change.

QPI is an approach, a philosophy and a network of sites that share information and ideas about how to improve parenting as well as recruit and retain excellent families. It is an effort to rebrand foster care, not simply by changing a logo or an advertisement, but by changing the expectations of and support for caregivers. The child welfare system commits to fully supporting excellent parenting by putting the needs of the child first. The key elements of the approach are:

1. Defining the expectations of caregivers,
2. Clearly communicating expectations (the Brand Statement) to staff, caregivers and other stakeholders, and
3. Aligning system policy and practice with those expectations.

When QPI is successful, caregivers have a voice. They work as a team with agency staff to support children and youth. Caregivers receive the support and training they need to work with children and families, understand what is expected of them, and know what to expect from the system. Systems are then able to select and retain enough excellent caregivers to meet the needs of each child for a home and family. When these changes are accomplished, outcomes for children, youth and families will improve.

For additional information, visit the QPI Florida website: http://www.qpiflorida.org
PARTNERSHIP PLAN

***Per Florida Administrative Code, a blank Partnership Plan for Children should be placed in the Green Child Resource Record at the time of placement and completed with all licensed caregivers at the time of placement, a copy named “Partnership Plan, Date” scanned into the file cabinet, and a copy should be left with the caregiver for the Child Resource Record.
Partnership Plan for Children in Out-of-Home Care

All of us are responsible for the well being of children in the custody of the Department of Children and Families (DCF). The children’s caregivers along with the Florida Department of Children and Families, community-based care (CBC) organizations, their subcontractors and staffs of these agencies undertake this responsibility in partnership, aware that none of us can succeed by ourselves.

Children need normal childhoods as well as loving and skillful parenting which honors their loyalty to their biological family. The purpose of this document is to articulate a common understanding of the values, principles and relationships necessary to fulfill this responsibility. The following commitments are embraced by all of us. This document in no way substitutes for or waives statutes or rule; however, we will attempt to apply these laws and regulations in a manner consistent with these commitments.

1. To ensure that the care we give our children supports their healthy development and gives them the best possible opportunity for success, caregivers and DCF, CBC and agency staff will work together in a respectful partnership.

2. All members of this partnership will behave professionally, will share all relevant information promptly, and will respect the confidentiality of all information related to the child and his or her family.

3. Caregivers, the family, DCF, CBC and agency staff will participate in developing the plan for the child and family, and all members of the team will work together to implement this plan. This includes caregiver participation in all team meetings or court hearings related to the child’s care and future plans. DCF, CBC and agency staff will support and facilitate caregiver participation through timely notification, an inclusive process and providing alternative methods for participation for caregivers who cannot be physically present.

4. Excellent parenting is a reasonable expectation of caregivers. Caregivers will provide and DCF, CBC and agency staff will support excellent parenting. This requires a loving commitment to the child and the child’s safety and well being, appropriate supervision and positive methods of discipline, encouragement of the child’s strengths, respect for the child’s individuality and likes and dislikes, providing opportunities to develop the child’s interests and skills, awareness of the impact of trauma on behavior, equal participation of the child in family life, involvement of the child with the community and a commitment to enable the child to lead a normal life.

5. Children will be placed only with caregivers who have the ability and are willing to accept responsibility for the care of a child in light of the child’s culture, religion and ethnicity, special physical or psychological needs, unique situation including sexual orientation and family relationships. DCF, CBC and agency staff will provide caregivers with all available information to assist them in determining whether they are able to appropriately care for a child. Caregivers must be willing and able to learn about and be respectful of the child’s religion, culture and ethnicity, and any special circumstances affecting the child’s care. DCF, CBC and agency staff will assist them in gaining the support, training and skills necessary for the care of the child.

6. Caregivers will have access to and take advantage of all training they need to improve their skills in parenting children who have experienced trauma due to neglect, abuse or separation from home, to meet these children’s special needs and to work effectively with child welfare agencies, the courts, the schools and other community and governmental agencies.
7. DCF, CBC and agency staff will provide caregivers with the services and support they need to enable them to provide quality care for the child.

8. Once a family accepts the responsibility of caring for the child, the child will be removed from that family only when the family is clearly unable to care for him or her safely or legally, when the child and his or her biological family are reunified, when the child is being placed in a legally permanent home in accordance with the case plan or court order, or when the removal is demonstrably in the child’s best interest.

9. If a child must leave the caregiver’s home for one of these reasons and in the absence of an unforeseeable emergency, the transition will be accomplished according to a plan which involves cooperation and sharing of information among all persons involved, respects the child’s developmental stage and psychological needs, ensures they have all their belongings, and allows for a gradual transition from the caregiver’s home and, if possible, for continued contact with the caregiver after the child leaves.

10. When the plan for the child includes reunification, caregivers and agency staff will work together to assist the biological parents in improving their ability to care for and protect their children and to provide continuity for the child.

11. Caregivers will respect and support the child’s ties to his or her biological family (parents, siblings and extended family members) and will assist the child in visitation and other forms of communication. DCF, CBC and agency staff will provide caregivers with the information, guidance, training and support necessary for fulfilling this responsibility.

12. Caregivers will work in partnership with DCF, CBC and agency staff to obtain and maintain records that are important to the child’s well being including child resource records, medical records, school records, photographs, and records of special events and achievements.

13. Caregivers will effectively advocate for children in their care with the child welfare system, the court, and community agencies, including schools, child care, health and mental health providers, and employers. DCF, CBC and agency staff will support them in doing so and will not retaliate against them as a result of this advocacy.

14. Caregivers will participate fully in the child’s medical, psychological and dental care as they would for their biological child. Agency staff will support and facilitate this participation. Caregivers, DCF, CBC and agency staff will share information with each other about the child’s health and well being.

15. Caregivers will support the child’s school success by participating in school activities and meetings, including IEP (Individualized Education Plan) meetings, assisting with school assignments, supporting tutoring programs, meeting with teachers and working with an educational surrogate if one has been appointed and encouraging the child’s participation in extra-curricular activities. Agency staff will facilitate this participation and will be kept informed of the child’s progress and needs.

______________________________________________
Signature of Out-of-Home Caregiver

______________________________________________
Signature of Representative of Supervising Agency

Note: Signatures are requirements of F.A.C. 65C-13.030(1)(e).
NORMALCY
POLICY
CF OPERATING PROCEDURE
NO. 170-11

Child Welfare

PLACEMENT

This operating procedure describes requirements related to the appropriate placement of children who need out of home care.

This operating procedure applies to child protective investigators, case managers, and placement, licensure, adoption and independent living specialists.

BY DIRECTION OF THE SECRETARY:

[Signature]

JOSHDONDA GUERRIER
Assistant Secretary for
Child Welfare

SUMMARY OF REVISED, ADDED, OR DELETED MATERIAL

Revised Chapter 6 by adding three items to paragraph 6-3; adding the phrase "or care precaution plan" to paragraph 6-5e; adding the phrase "and enrolling in" to paragraph 6-8a; adding the phrase "auto insurance" to the end of the sentence in paragraph 6-8c; and adding paragraph 6-9.
6-1. **Purpose.** This chapter describes the Department’s policies and procedures regarding the concept of normalcy. It is the policy of the Department to fully support the efforts of caregivers, providers, and Community-Based Care Lead Agencies to ensure that children in our care have the opportunity to fully participate in activities in their schools, neighborhoods, and communities.

6-2. **Scope.** The policies and procedures within this operating procedure apply to all staff of the Department, Community-Based Care Lead Agencies, and subcontracted providers involved with children in out-of-home care of all ages. This includes child protective investigators, case managers, Children’s Legal Services attorneys, foster families, child caring agency staff, relatives, nonrelatives, and Department program specialists. Local policies must not be more restrictive than the policies and procedures outlined in this chapter.

6-3. **Authority.** The following provide the legal authority for the purpose and scope.

   b. Section 39.4091, F.S.
   c. Section 409.145, F.S.
   d. Section 409.1454, F.S.
   f. Rule 65C-13.033, F.A.C.
   g. Rule 65C-14.018, F.A.C.

6-4. **Explanation of Reasonable and Prudent Parent Standard.** In accordance with s. 39.4091, F.S., “reasonable and prudent parent standard” means the standard characterized by careful and sensible parental decisions that maintain the child’s health, safety, and best interests while at the same time encouraging the child’s emotional and developmental growth, that a caregiver shall use when determining whether to allow a child in out-of-home care to participate in extracurricular, enrichment, and social activities.

6-5. **Normalcy Overview.**

   a. A child’s right to live a healthy, normal childhood is paramount.
   b. A reasonable and prudent parent standard will be applied to decisions regarding a child’s participation in normal childhood activities.
   c. Out-of-home caregivers shall be supported in their decision making.
   d. Normalcy focuses on enabling opportunities for social development, recreation, academic growth, and positive life experiences based on a child’s desires and developmental, emotional, physical, and other needs. Caregivers are empowered to make decisions using a reasonable and prudent parent standard. Guidelines aimed at also increasing normalcy for caregivers are addressed in Chapter 7 and Chapter 8 of this operating procedure.
   e. Decisions shall not contradict any existing court order or care precaution plan.
f. While caregivers have authority to make decisions about the normal activities of foster children in their care, the caregiver needs to consider known parental wishes in these decisions.

g. The assigned child welfare professional will make diligent efforts to keep the parent(s) informed and involved, including the resolution of differences between the caregiver and parent.

6-6. Overnight / Planned Activities and Outings.

a. The out-of-home caregiver must determine that the activity or outing is safe and appropriate in accordance with the reasonable and prudent parent standard.

b. Children shall be encouraged to participate in normal school, community, or social activities and outings such as employment, school field trips, dating, scout camping trips, and activities with friends, school, and church groups as appropriate for the child based upon a reasonable and prudent parent standard.

c. Background screening is not required for the child’s participation in normal childhood activities and outings like sleepovers with friends, participation in school lock-in’s, or team sports.

d. The caregiver may take children placed in their care on vacations and must inform the assigned child welfare professional in advance of the travel. Travel must be in accordance with any existing court orders.

e. The caregiver shall notify the assigned child welfare professional in advance of overnight stays exceeding three (3) nights. Examples of such stays include sleep away camps and school trips.

f. The assigned child welfare professional shall make efforts to accommodate planned activities for the child’s participation by assisting in coordination with the family and court, particularly as related to scheduled visitation.

NOTE: See also Chapter 7 (“Babysitting and Overnight Care”) and Chapter 8 (“Out of Town Travel / Vacation”) of this operating procedure.

6-7. Social Media / Computer Usage / Cell Phones.

a. Children are permitted to participate in social media, computer usage, and have a cell phone as long as permission has been given by the caregiver.

b. Caregivers shall apply the reasonable and prudent parent standard to decision-making regarding social media usage. Caregivers should be sensitive to the risks of the various forms of social media.

c. Children have the right to self-disclose information about themselves on social media. Caregivers should educate children regarding the potential impact and ramifications of such disclosure.

d. Caregivers are permitted to post pictures on social media including children placed in their care. Caregivers may not use the child’s last name or identify the child as residing in out-of-home care.

6-8. Driving.

a. Caregivers and child welfare professionals shall assist children in finding and enrolling in a driver’s education program.

b. Support of the child’s efforts to learn how to drive a car, obtain a learner’s permit, and driver’s license shall be based upon the child’s age, maturity, and access to insurance.
c. The Keys to Independence program is available to assist caregivers, youth, and child welfare professionals to maximize children’s access to learners’ permits, driving education, drivers’ licenses, and auto insurance.

6-9. **Right to Privacy**

a. All youth in care have the right to be given a space that is private and to store personal belongings safely and securely.

b. Proper care should be taken when closed circuit television (CCTV) or video camera surveillance is used to ensure its use is appropriate and does not violate a youths right to privacy. It is reasonable to believe that a youth could fully disrobe in private, without concern of being recorded or viewed by another, in a location such as a bedroom or bathroom.

   1. Cameras placed in bedrooms, bathrooms, or toileting areas are prohibited.

   2. Anyone affected by the use of surveillance equipment should be made aware of its existence by the clear and obvious manner in which it is installed or by a written notice conspicuously posted on the premises.

   c. Prior to the use of any cameras, the department should be informed where any cameras will be positioned along with a diagram showing their position, why they are in use and when, who is responsible for the camera(s), and what happens to the footage. The surveillance system is not to be used in place of direct supervision by a staff member or caregiver. The information should be kept securely, and the information recorded by the system is only used for the purpose for which it is intended.

   1. Surveillance systems should have the capacity to store footage for at least 14 days before rewriting or deleting. Video footage recorded on an external disc, USB thumb drive, or video home system (VHS) shall always be locked and secured and only accessed by authorized staff. This includes the transmission of footage digitally.

   2. The child welfare professional or DCF licensing staff member shall work with the caregiver or residential care provider to create an agreement which discusses prudent use of any video surveillance, including the use of baby monitors for children older than the device’s recommended age.

   3. CCTV footage is subject to review by the Department and access to view footage must be granted within 24 hours upon request.

**NOTE:** See Chapter 4 (Child Placement Agreements for Care Precautions and Behavior Management Plans) of this operating procedure regarding privacy for care precaution plans.
Chapter 7

BABYSITTING AND OVERNIGHT CARE

7-1. **Purpose.** This chapter describes the Department's policies and procedures regarding children in out-of-home care and babysitting. While normalcy focuses on allowing children to participate fully in normal childhood activities and outings, it is the position of the Department of Children and Families that out-of-home caregivers should be supported to function as normal as possible.

7-2. **Scope.** The policies and procedures within this operating procedure apply to all staff of the Department, Community-Based Care lead agencies and subcontracted providers involved with children in out-of-home care. This includes child protective investigators, case managers, Children’s Legal Services attorneys, foster families, relatives, nonrelatives and Department program specialists. Local policies must not be more restrictive than the policies and procedures outlined in this chapter.

7-3. **Babysitting Overview.**

   a. Babysitting does not include overnight care or daily childcare.

   b. Babysitting does not have to occur in a licensed setting and background screening is not required.

   c. Caregivers should use the reasonable and prudent parent standard when choosing babysitters for children placed in their care. Caregivers will ensure:

      (1) Babysitter is suitable and appropriate for the age, developmental level, and behaviors of the child.

      (2) Babysitter receives guidance on handling emergencies, including telephone numbers for themselves, child welfare professional, and physicians.

      (3) Discipline and confidentiality policies for the child have been fully explained.

      (4) Water safety precautions have been explained.

      (5) Babysitters must be age 14 or older.

   d. Caregivers shall use the reasonable and prudent parenting standard when assessing a child’s ability to stay home alone. Examples of factors to be considered by the caregiver include:

      (1) Physical and developmental age.

      (2) Child’s knowledge of safety rules, emergency contacts and comfort level.

      (3) Child’s history of trauma and reasons for entry into care.

      (4) Child’s treatment recommendations and needs.

7-4. **Overnight Care.**

   a. Caregivers may allow a family or person who is well known to them to provide care for children placed in their care overnight.

   b. Caregivers shall utilize the reasonable and prudent parent standard when selecting substitute care.
c. Substitute caregivers chosen by the caregiver for babysitting will be background screened for all stays exceeding three (3) nights. When the substitute caregiver is utilized due to unexpected circumstances, background screening will be initiated within one (1) business day.

d. Caregivers shall notify the assigned child welfare professional in advance of all overnight stays exceeding three (3) nights.

e. The assigned child welfare professional shall consult with the supervisor and other involved parties, such as the Guardian Ad Litem, when the overnight stay needs to exceed seven (7) nights. When relevant, agreement by all parties shall be documented by the child welfare professional in Florida Safe Families Network.

f. Caregivers shall ensure that the assigned child welfare professional can contact them at all times regarding the location and needs of the child.
Chapter 8
OUT OF TOWN TRAVEL / VACATION

8-1. Purpose. This chapter describes the Department’s policies and procedures regarding children in out-of-home care and out of town travel. While normalcy focuses on allowing children to participate fully in normal childhood activities and outings, it is the position of the Department of Children and Families that out-of-home caregivers should be supported to function as normally as possible. Caregivers are strongly encouraged to include children in all activities while maintaining their right to make reasonable and prudent parenting decisions.

8-2. Scope. The policies and procedures within this operating procedure apply to all staff of the Department, Community-Based Care lead agencies and subcontracted providers involved with children in out-of-home care. This includes child protective investigators, case managers, Children’s Legal Services attorneys, foster families, child caring agency staff, relatives, nonrelatives and Department program specialists. Local policies must not be more restrictive than the policies and procedures outlined in this chapter.

8-3. Vacation.

   a. Caregivers shall be encouraged to take children placed in their care on planned family vacations.

   b. When travel involves visiting with friends or family of the caregivers, background screening is not required. Caregivers shall utilize a reasonable and prudent parent standard when choosing who to visit when traveling.

   c. Caregivers will notify the assigned child welfare professional of all out of town travel in advance and in accordance with existing court orders.

   d. Travel cannot conflict with orders of the court. Additional court approval may be required prior to travel.

   e. While caregivers have authority to make decisions about the normal activities of foster children in their care, the caregiver needs to consider known parental wishes in these decisions.

8-4. Out of Town Travel.

   a. Out of town travel must also be in compliance with the above paragraph 8-3 concerning vacation.

   b. When caregivers need to travel and taking a child with them is not prudent, such as a family emergency, they may choose to leave the child in their care with a family or person well known to them in accordance with Chapter 7 of this operating procedure.
TRANSITION

POLICY
Series: 100

Policy Name: Transition Planning for Children in Out of Home Care

Policy Number: 146

Origination Date: 9/1/2017  
Revision Date: NA

Regulation: 65C-28.005, FL409.145 (2)(c)

Policy: Communities Connect for Kids recognizes that thoughtful transitions are critical for the child’s best interest and foster parent retention.

Procedure:

Once a caregiver accepts the responsibility of caring for a child, the child will be removed from the home of that caregiver only if:

a. The caregiver is clearly unable to safely or legally care for the child;  
b. The child and his or her biological family are reunified;  
c. The child is being placed in a legally permanent home pursuant to the case plan or a court order;  
d. The removal is demonstrably in the child’s best interest; (group to foster home, to place siblings together, etc.) or  
e. The caregiver provides a 30 day removal request of the child.

Emergency Situations:

In emergency situations, a change of placement can be made immediately.

The child welfare professional shall within 72 hours inform the child’s parents, unless contrary to court order, Children’s Legal Services and guardian ad litem and child’s attorney, if appointed, of the move and the reasons an emergency placement change was necessary.

Non-Emergency Situations:

1. The child’s parents, unless contrary to court order, licensed out-of-home caregivers and the guardian ad litem or attorney ad litem, if appointed, shall be given at least two (2) weeks notice prior to moving a child from one out-of-home placement to another and the reason
a placement change is necessary.

The placement change transition must be accomplished according to a plan that involves cooperation and sharing of information among all persons involved (all caregivers, parents, case management, GAL) respects the child's developmental stage and psychological needs, ensures the child has all of his or her belongings, allows for a gradual transition from the caregiver's home, (when appropriate and possible) and for continued contact with the caregiver after the child leaves.

a) Parental notification of any placement changes shall be documented in FSFN, unless the court previously excused the Department from further efforts to locate.

b) If the parent(s) is unable to be located, efforts to locate and notify the parent shall be documented in FSFN.

2. The child welfare professional shall prepare the child for a move and support the child during the re-placement process.

3. The child welfare professional shall provide supportive services to the caregiver where the child is residing to avoid a change in placement when possible. When a placement is in danger of disrupting, the child welfare professional shall urge the caregiver to wait to request removal of the child until efforts can be made to remedy the reasons for the child's instability. When efforts to stabilize a placement have not been successful or there are circumstances that preclude the child's continued stay, the child welfare professional will work with the caregiver to reach agreement on a move date that takes into consideration the following needs of the child:

a) There is a break in the school year;

b) An alternative placement can be located; and,

c) Arrangements for the child's transition to the new setting can be made and implemented.

4. The caregiver at the new placement shall be prepared and informed prior to placement of the child and shall be given needed support to help the child transition and achieve stability. Out-of-home caregivers shall be given all relevant information about the child in their care while maintaining confidentiality requirements. Specifically, the child welfare professional shall:

a) Inform the caregiver of all identified needs of the child;

b) Discuss any training the caregiver may need to care for the child, including any special needs of the child and possible reactions to the specific trauma that the child has experienced;
c) Discuss any services that the child may need and the role of the out-of-home caregiver with regard to transportation, participation in treatment sessions, communication with treatment provider(s) and potential implementation of treatment recommendations in the home;

d) Inform the out-of-home caregiver about available programs that may provide financial and medical assistance for the child;

e) Provide the out-of-home caregiver with counseling and information regarding the dependency process and support services available in the community;

f) Review with the licensed out-of-home caregivers their roles and responsibilities according to the "Partnership Plan for Children in Licensed Out-of-Home Care," incorporated in paragraph 65C-28.004(6)(c), F.A.C., available here: http://www.flrules.org/Gateway/reference.asp?No=Ref-06689, (see attachment). The child welfare professional shall sign a copy of the Partnership Plan and obtain a signature of the licensed out-of-home caregiver, attesting acknowledgment of the requirements at time of placement; and,

g) Provide to the out-of-home caregiver the Child’s Resource Record. The Child’s Resource Record from the previous placement(s) shall be reviewed with the out-of-home caregiver upon the child’s new placement. The child welfare professional shall discuss with the out-of-home caregiver the caregivers’ role in maintaining and updating the Child’s Resource Record.

It is at the discretion of the CCKids CEO to approve any transitions outside the above parameters.

Approved by:

[Signature]

Carol DeLoach, CEO

Date: 10-10-18
CARETAKER
INPUT FORM
DEPARTMENT OF CHILDREN & FAMILIES
CHILDREN’S LEGAL SERVICES
CARETAKER INPUT FORM

Child’s Name:_________________________________  DOB: __________
Child’s Name:_________________________________  DOB: __________
Child’s Name:_________________________________  DOB: __________
Child’s Name:_________________________________  DOB: __________

Child’s Current Location: __________________________________________________

Child’s Caretaker: _________________________________________________________

Relationship to Child:_____________________________________________________

To:

You are being asked for your input because a judicial review is being held for a
child or children placed in your home. It is important that the Department and the Court
make informed decisions regarding the children’s best interest. This form will be filed
with the court as an attachment to the Judicial Review Social Study Report/Case Plan
Update.

COMMENTS:

What information should the Court consider in determining the action to take in this
case?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Caretaker’s Signature  Date
PATH OF A CASE

(A glace at the Dependency Court Process)
Path Of A Case

- Abuse Report and Investigation
- Placed in Shelter
- Shelter Hearing
- Dependency Petition Filed (by day 21)
  - Mediation or Case Plan Conference
  - Consent or Admit
    - Pre-Trial Conference
    - Arraignment and Shelter Review (by day 28)
      - Deny
        - Pre-Trial Conference
        - Adjudicatory Hearing (by day 58---30 days after arraignment)
          - Disposition and Case Plan (30 days from the adjudicatory hearing)
            - Protective Services
            - Initial Judicial Review (90 days after disposition hearing, or date court approves case plan or 6 months after child’s removal from home)
              - Judicial Review (6 months after the initial review)
                - Judicial Permanency Review (12 months after date child placed in shelter)
                  - Placement in another planned permanent living arrangement
                  - Reunification
                  - Adoption
                  - Permanent Guardianship
                  - Permanent placement with a fit and willing relative

FL 2-6
ROLE CARDS
**Judiciary**
- Encourages and requests co-parenting between caregivers and birth family.

**Regional Counsel**
- Encourages birth family to engage in Ice Breaker and co-parenting.

**Children’s Legal Services**
- Ensures co-parenting is addressed in the courtroom.

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**Child Placing Agency**
- Recruit, train, and retain foster parents with co-parenting expectation.

**Communities Connected for Kids**
- Train co-parenting mentors and case managers on how to facilitate co-parenting and Ice Breakers.

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**Child Protective Investigator**
- After removal, completes the birth parent check in. Introduces the term of co-parenting and reassures the birth family that they will have communication with caregiver and child. Gets information about the child from the birth family and shares with the caregiver.

**Co-Parent Mentor**
- Facilitates the Ice Breaker between the caregiver and birth parent. Assists with setting mutually agreed upon boundaries for family time, which do not violate existing court orders. Provides continued support, as needed.
Case Manager
Works in partnership with birth families, caregivers, and providers to obtain input and assess progress toward meeting permanency goals. Encourages and supports co-parenting efforts by ensuring case related information is shared equally and timely to all parties.

Foster Parent Kinship Caregiver
Nurture parent/child relationship by supporting and mentoring birth family through re-unification and beyond.

Birth Family
Fully engage in co-parenting activities to support the child’s best interest.

Guardian Ad Litem
Understands co-parenting and supports all partners within the system of care in keeping the child's best interest in mind.
CAREGIVER SUPPORT PROGRAM TEAM
## Caregiver Support Program

<table>
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## Caregiver Support Program

### Relative and Nonrelative Support

**FOR NON-LICENSED HOMES**
- Issuing Caregiver Support Funds for Caregivers
- Disruption Prevention/Placement Stabilization

### Post Adoption Support

- One Year Follow Up Calls
- Collaborating with DCF for Post Adoption Intakes
- Linking Adoptive Families to Services

### Sibling Separation

- Provide Recommendations for Children Placed Separately for the Purpose of Adoption

### Level I Licensing

- Licensed Relative/Nonrelatives
- Issuing Caregiver Support Funds
- Assisting with Applying for Cash Assistance and Relative/Nonrelative Caregiver Funds
- Disruption Prevention/Placement Stabilization
- Agency/Caregiver Liaison

### Level II-V Licensing

- *Traditional, Therapeutic, Medical*
- Issuing Initial Clothing Vouchers
- Issuing Annual Clothing Vouchers
- Issuing Caregiver Support Funds for Foster Parents
- Disruption Prevention/Placement Stabilization
- Foster Home Concerns
- Agency/Caregiver Liaison

### Foster Parent Mentors

- Support from Seasoned Foster/Adoptive Parents
- Debra Wesley-Indian River
- Rose Bailey-St Lucie
- Jenny Price-Martain

### Quality Parenting Initiative

- Caregiver Retention Through Working in Partnership
- Supporting Co Parenting Efforts
- Reinforcing Normalcy
- QPI Champions:
  - Andrea Willocks-Indian River
  - Pending-Martain
  - Carla Garcia-Okeechobee
  - Joyce Edwards, Chyna DeGginger-St Lucie

### Guardianship Assistance Program

- Coming Soon!!!