

BRIDGING TO PROMOTE FAMILY CONTACT

Methods of connecting with the birth parents can be divided into four categories that spread out along a continuum of contact.

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SUPPORTIVE: This is defined as providing the child and the birth parent with social and emotional connections without having face to face contact. This may be appropriate when the birth parent is still angry or hostile with the child's placement or if the parent is dangerous. Some examples are:

- Sending holiday cards to the birth parents.
- Sending school papers, report cards, pictures
- Allow the birth parents to send letters/cards to the child.

ENGAGEMENT: This means meeting the birth parent on neutral ground such as a visitation center or OCS. The focus of this contact is to provide the parent with limited contact on neutral ground with the hopes the child can maintain some contact. *Some examples are:*

- Meeting at another relative's home.
 - Visits at the Office of Children's Services or identified neutral place.
 - Setting up email correspondence
 - Allowing the birth parent to call your home
 - Arranging/hosting sibling visits
 - Sending a notebook back and forth between families with ideas, suggestions and stories

JNVOL VEMENT: This broadens the ways in which the kin parent has contact with the birth parent. The connection is face to face and can occur in the community or the birth parents' home. Involvement may be used to build a new relationship or repair a damaged birth parent-child relationship.

Some examples are:

- Transporting the child to visit in the birth parents' home.
- Inviting the birth parent to attend school/church functions.

- Sharing a meal with the birth parent.
- Allow the birth parent to phone your home.
- Encouraging the parent to participate in normalized activities, such as going to a movie.

PARTICIPATION: The caregiver is confident and secure enough to invite the birthparent to participate in various aspects of the child's life. The caregiver and birthparent can talk with and contact each other comfortably and easily around arranging contact with the child.

- Invite the birth parent to the home to participate in holiday and birthday celebrations with the child.
- The child may be able to spend the night with the birth parents. (Which in tum provides you respite.)

OTHER IDEAS TO HELP A CHILD STAY CONNECTED TO FAMILY

Help Your Child With:

- Making a birthday cake or giving a birthday party for birth parents
- Making or buying gifts for birth parents
- Taking photo of the child with birth family to give to parents.
- Showing parents grades, awards, etc.
- Have child make pictures or write a story to share with parents at visits
- Remembering Mother's Day and Father' Day
- Maintaining contact with siblings in other resource families
- Making allowed phone calls or allowing phone calls to child
- Help child take a picture or get a picture of birth parents to keep in room
- Help a child write letters or make pictures to send to parents
- Help a child put together a scrapbook or a life book
- Bring in a ritual or tradition from the child's family to help celebrate holidays

Other Ways To Keep Connected:

- Ask birth parents about schedule or food preference of the child
- On visits, make it a point to tell the birth parent some compliment about the child
- Invite the birth parent to dinner
- Make a family tree or scrapbook of photos for the child
- Take the child to cultural events
- Have different books, arts movies and magazines featuring the culture or race of the child
- As for parents input on clothes, toys, equipment or behavior change
- Include birth parents in school conference, Parent's Nights, school plays

FAMILY CONTACT HIGHLIGHTS

(Summarized From OCS Policy and Procedures Section 6.5.6 Family Contact)

When a child is removed from his parental home, OCS should encourage frequent, regular, and reasonable visitation of the child with the child's parents. The nature of that contact should be unique for each child. Frequent family contact facilitates reunification and/or and permanency and contributes to the wellbeing of children placed out of home. Family Contact is defined as:

Normalized family contact for children that is least restrictive, most family like setting; parents performing activities as they normally would; parents taking full responsibility for the safety and well-being of their children.

Contact between parents and children should take place in the community whenever possible and the level of supervision shall be determined based on whether the contact can be **unsupervised**, **supervised intermittently** or in more **structured family time**.

Family contact plan will be developed and will include:

- A Level of supervision and reasons for the level
- B. Goal of family contact
- C. Schedule, frequency, duration, location and participants
- 0. Suggested activities
- E. Instructions for the parent during family contact
- F. Procedures for emergencies and special situations.

Family Contact should happen fairly soon after placement and supervised initially to determine appropriate levels of supervision in the future. Resource families may be asked to assist with supervision at some point as the family contact develops.

The Resource Family and other out-of-home care providers have a role in Family Contact and this is outlined in the Office of Children's Services Policies and Procedures. Resource families are expected to:

- · Have regular ongoing contact with the birth parent;
- Permit parent to visit children placed in their home;
- Support the positive intent of family contact;
- Provide transportation for the child, if pre-arranged by worker;
- Have the child ready to participate infamily contact at the agreed upon time;
- · Help the child accept separation from parent;
- Record observations problems, etc. that affect the child before during or after the visit and provide this information to the worker, and;
- · Support the child following visits.

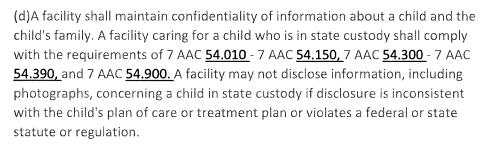
Handout 6-3 Confidentiality Guidelines for Alaska Resource Families Including Social Media

Acknowledgements

This franciout was developed by a committee consisting of staff from the Office of Children's Services Licensing, the Alaska Center for Resource Families, and the group administrators of Alaska's biggest Facebook support groups. Text written by Kimberly Mouriquand and Rachel Hanft of the Alaska Center for Resource Families.

When it comes to sharing information, talking about the foster youth in your home, or asking for advice on social media, what can a resource parent share? This handout reviews guidelines for resource families in the State of Alaska for what is expected when it comes to confidentiality in sharing information and in social media. Two major requirements of resource families will guide this conversation.

Confidentiality 7 AAC 50.130 Records



The Alaska Resource Family Handbook further discusses confidentiality regarding photographs and social media on page 28. "Resource parents who use social networking sites, including but not limited to Facebook and Twitter must never include the names, or any personal information about children in the custody of the State in information they post."

Confidentiality Requirements

Mandated Reporting Requirement

Reporting Suspected Abuse and Neglect

The Alaska Resource Family Handbook states on page 16, "Resource parents are mandated reporters under the State of Alaska statute AS 47.17.020(a). A mandated reporter is required to report suspected abuse or neglect. If you suspect a child has been abused or neglected, report immediately by calling 1-800-478-4444 or contact your nearest OCS office. If you are not sure whether to report, then report. Mandated reporters are not expected to investigate suspected child abuse or neglect before they make the required report. It is the duty of OCS to investigate allegations of abuse or neglect."

What this means for sharing on social media

Resource families should ensure the privacy and confidentiality of a youth in their care is respected in all interactions. Knowing the child's plan of care or treatment plan is an essential part of understanding what information can be shared and with whom. Additionally, resource families should go above and beyond protecting the personal identity and private family information of a child in their care. Regardless if a social media account or group membership is set to private, information is still discoverable and can become public when posted online. Erring on the side of caution is best when posting or sharing photos of information about a child with your family.

Regarding photographs, foster parents should seek permission from the placement worker before posting any pictures. The regulations state you cannot disclose information that is inconsistent with the child's plan of care or treatment plan, or if the information violates a federal or state regulation. You may not know if a photo violates any of these policies, so it is best to always seek approval first.

Pro-Tips

General Confidentiality Tips

- Talk with the caseworker and GAL about general and specific informational restrictions or concerns. There are likely situations where certain persons should not have access to information about a youth in custody.
- Information sharing with a provider will be different than sharing on social media or out in a public setting. Be sure to know, be prepared for, and practice the difference in information sharing. Best practice would be needto-know basis. W.A.I.T. before speaking (Why Am I Telling this).
- Information sharing with the medical provider, therapist or teacher may include information from a child's history, such as missed time in school, developmental delays, diagnosis, present supports/deficits or other important details to help a child get on track for development and success.
- Have a plan in place if someone asks you about the youth in the picture or the extra child you have with you at the fast food place. Use positive responses, but closed statements to address someone's curiosity questions.

Ramambar to W.A.I.T. before speaking. Telling?

Social Media Tips

- Respecting confidentiality applies not only for in person interactions, but within groups, online through social media, support groups, in emails and in text messages.
- Talk with your team about how you plan to share information on social media in advance. For example: posting group photos or asking a support group for behavior management ideas.

Questions you might ask:

- o Is it ok to do group photos and post?
- o Can I share successes? Examples: "My little guy just made honor roll!" or "Proud parent here: Z just made the varsity football team!"

- Information sharing on social media should never include details about what brought the child into care or any current situations that are happening in the resource family home or the birth family home. Seeking support in social media settings should be applied to any child and not include any specifics to the case nor references to birth family.
- Avoid posting photos with any type of identifying information (locations you frequent, your house in the background, your child's school name/mascot).
- When posting on social media, stay professional and avoid trashing or name-calling specific team members or OCS staff.

Things to take into consideration when posting:

- 1. Your Location If you live in a small connected community where it is likely that others would recognize the information you are sharing/requesting support around, you may inadvertently break confidentiality.
- 2. Self-Identification If your social media account identifies you as a licensed foster parent or you make posts like "I love being a foster parent" anything you post may inadvertently break confidentiality.

Examples of Making it Work

Even with restrictions, we can still be creative and be inclusive for our child and for ourselves. How do you seek support while still protecting confidentiality? Here are some examples for both in-person and online interactions.

- You may have to speak to a teacher about why the child is coming into a new school in the middle of the school year: share know grade level, previous school, diagnosis, IEP/504 in place, medications, known strengths and behavioral challenges.
- You may have to explain to the doctor about previous injury or gaps in check-ups or immunizations: share the child are in out of home care, you are taking them for their EPSTD/30 day exam and to direct any case specific question to the caseworker.
- You might have a 7-year-old foster youth with a recent diagnosis of FASD in your home. He has been struggling in school and the 2nd grade teacher has stated he is disrespectful and does not follow rules or directions. The teacher told you he is going to be kicked out of class for his disruptive behavior.
 - o How to ask for support on a Facebook page while protecting the confidentiality of the youth you are caring for: "I'm wondering if anyone has suggestions for helping a 2nd grade teacher understand a FASD diagnosis and how that may impact a student?"
- You have an annual tradition of doing a family holiday photo every year; every child living in your home is included in the picture. You have a beautiful collage on the wall in your entryway. It is your turn to host book club.

- o Make sure persons coming over know that you are a foster parent and you have a responsibility to guard the privacy of children in your care.
- o If you have concerns about the privacy of the child, consider temporarily hanging the collage in another part of the house or do not host meetings in the part of your home where questions may arise.
- You have a negative interaction with a birth parent or recently learned of information that is worrisome and you need to talk to someone.
 - One-on-one Interaction: "Hey, I'm sorry, I can't share details with you, but can I share some feelings I'm having about something I heard today?"
 - o Online: "I heard some tough things today/I had a really tough interaction today, broke my heart a little. Words of support and affirmation would be helpful right now."
- You bump into a coworker, family friend, etc. and they ask, "Well, who is this?" or "Where did this one come from?" and points to a foster youth. Try saying:
 - o "This is Julie, Julie, would you like to say hello to our friend Ms. Sue?"
 - o "This is Alicia, she's staying with us for a little while. How's the bathroom remodel going?"
 - o "Let me introduce you to Michael. He loves cookies and playing with his friends."

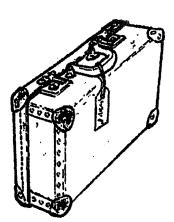
Placement Change and Permanency

What if someone from OCS asks to post a need for a family in a social media group such as Facebook? What then? Caseworkers and resource parents must work together during placement changes to best support the child. OCS has the final authority and responsibility for placement decisions. Below are a few guidelines to consider regarding social media engagement during transitions.

- Resource parents still must protect the confidentiality of a child. This means that if there is an interaction with a "potential" placement through social media, the rule still applies that the other provider can only have information necessary to care for the child. Make sure to talk with the caseworker before sharing any information about a child, as willingness to take placement does not equal approval from OCS.
- Resource families do not have decision making authority for placement. This means you cannot determine who the potential placement for a child is and should never be making arrangements with another provider for potential placement change.
- If you are asked to help identify a potential placement for a child, this information should be shared directly with the caseworker. The resource parent's role here is to share names and information with the caseworker, not to share information about the child's history with the potential placement.

WHAT DOES A CHILD NEED AT THE TIME OF A MOVE OR A TRANSITION?

The following information was first presented by, Norma Nelson of the Northwest Adoption Exchange in a workshop for Anchorage foster and adoptive parents. It is adapted and used here by permission.



hformation: Children need to have information about when transition will happen and what will happen. Children need time to prepare and to make adjustments. Just like parents and resource parents who experience grief, separation, and adjustment, children do too. Lifebooks can help with this.

Answers to questions: Children need a chance to ask questions and they have the right to have ansy.rers.

Reassurance and Validation: Children need to hear that they will be okay and that their feelings are Important, even those feelings of anger, doubt or fear. They need a chance to talk and express those feelings without having them discounted.

Visitation with Birth or Adoptive Family: Children need visitation with their birth family on a regular basis in order to keep attachments going or to

build new ones. Visitation and contact with the adoptive family before the transition is made, also helps a child make the change form one home to another.

A Chance to Say Good-bye and Hello: Rituals of good-bye, dinners or parties, or some designated time to say good-bye is an important part of transitions both for children and for resource families. Conversely, if there is a welcome from adoptive parents or birth parents, it helps a child make a clear transition.

A Blessing: Children need to hear from their resource parents (especially if it has been a long term placement) that they "bless" or approve that this transition is taking place.

Post Placement Contact: Ideally, contact between family and former resource families can continue after reunification. Phone calls, remembering birthdays, doing respite care, or providing support to a birth parent are all ways to continue contact.

WHAT CAN THE RESOURCE PARENT DO?

- If the child is being adopted, provide information to the new family. Write out the child's schedule. Share photos, school papers, and artwork. With the child compile a lifebook to share with the new family.
- 2. **f** the child is being adopted, find out as much information as you can about the new family so that you can prepare the child and answer his/her questions.
- 3. Increase your availability to the child. That means "hanging out" and being there just in case a child wants to talk. Listen, allow for feelings and validate those feelings.

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- 4. Learn about, watch for and normalize signs of grieving. Help children understand and express what they are feeling. Don't rush to make everything okay for the child.
- 5. Facilitate and support visits with the adoptive family members. Help children deal with feelings about visits -both negative and positive.
- 6. Deal with concerns promptly. Learn to express your feelings and your concerns outright. When a problems start, deal with them right away before they get too big.
- 7. Make moving day significant. Send favored objects and toys and clothes with the child. Give a simple gift photo album or an address book, allow for good memories.
- 8. Talk about placement contact during transition, not after. Talk with parents and caseworker about what is acceptable to all parties.
- 9. Put together a lifebook for the child if he doesn't have one. Lifebooks are tools to help children make sense of the past and to keep track of things that happen during a child's lifetime. Children depend on the adults around them to be the memory keepers. It is helpful if resource parents help each child develop a llfebook or a record of important events that happen while he or she is placed with you. These scrapbooks contain photographs and drawings of people, places, pets and events that have been significant to the child.

Things you may want to include:

- A picture when the child first comes to your home
- Addresses, pictures and phone numbers of friends
- Report cards, certfficates of achievement, drawings
- Pictures of social workers and therapists
- Pictures of foster siblings, pets, teachers
- Pictures of holidays and birthdays
- Pictures of birth parents or extended families
- Programs from school, church or scouting events
- A handwritten letter to the child
- Stories about the child: how he showed affection, favorite foods, cute things he did, favorite games, or funny sayings
- Developmental milestones such as walking, sitting, or riding a bike
- Information about injuries, Illness or hospitalizations
- Pictures of him as a baby or small child
- Letters from birth parents or relatives
- Copy of the birth certificate

