#   Placement Authorization – Kinship or Other Non-Foster Caregiver

**Purpose:** Use this form to authorize placement in a regular kinship placement.

**Directions:** To complete this form, see 2085KOins. After completing this form mark each box to indicate that information has been reviewed with the caregiver. Obtain signatures and give the original to the caregiver and maintain a copy in the case record. Contact your supervisor for issues regarding use of this form with regular kinship placements.

This form and other documentation frequently refers to “DFPS Caseworkers”. References to “DFPS Caseworkers” refers to employees of the Department of Family and Protective Services **or** employees of a Single Source Continuum Contractor (SSCC). The SSCC acts as an authorized agent of DFPS pursuant to Texas Family Code Chapter 264 Subchapter B-1. The SSCC has the same authority as DFPS regarding case management duties and associated responsibilities.

The Single Source Continuum Contract (SSCC) is      .

| CHILD'S INFORMATION   |
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| The Texas Department of Family and Protective Services (DFPS) has managing conservator of   |
| Child’s Name:      | Person ID:      | Medicaid No.      | Date of Birth:      |
| Legal County:      | Court No.:      | Cause No.:      | Date of Placement:      |
| Ethnicity:     Hispanic    Other | Race:      White   Black   Unable to Determine |    Asian   American Indian/Alaskan Native   Native Hawaiian/Pacific Islander |

| CAREGIVER INFORMATION  |
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| Caregiver’s Name:      | Relationship to child. Select all that apply:      Relative   Temporary Possessory Conservator   Other:       |

| TERMS AND CONDITIONS   |
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| The Texas Department of Family and Protective Services (DFPS), as the managing conservator of this child, hereby authorizes the individual described above to serve as the child's caregiver under the following terms and conditions (only the items checked apply to this placement):     |
| 1.    Daily Care. The caregiver must provide the child’s daily care, protection, control and reasonable discipline. Physical discipline, including spanking may not be used on a child that is in the conservatorship of DFPS. Reasonable discipline should be related to the child's specific misbehavior, age, developmental level, previous experiences, reactions to previous discipline, and any other relevant factors. The caregiver must comply with any applicable court orders and must provide care for the child which conforms to all applicable DFPS rules and standards and any specific instructions from DFPS. The child's placement with the caregiver is based on the caregiver's compliance with the requirements set forth in the contract with DFPS. DFPS, at its sole discretion, may transfer the child to another placement at any time.             |
| 2.    Safe Sleep. The caregiver must ensure age appropriate, safe sleeping arrangements for the child and must not sleep in the same bed with the child at any time. See Texas Administrative Code §749.3027     |
| 3.    Education. The caregiver must enroll the child in public school and / or other educational program(s) as directed by the child's caseworker or the caseworker's supervisor. The caregiver may sign any documents needed to enroll the child in a school or other educational program to implement DFPS's decisions about the child's education. The caregiver may also receive and review all the child's educational records. The caregiver may not consent to corporal discipline.        |
| 4.    School Programs and Extracurricular Activities. The caregiver may authorize the child to participate in routine school programs and extracurricular activities that do not involve an unusual risk of injury to the child. The caregiver must inform the child's caseworker of all such activities.     |
| 5.    Foster children who are the legal responsibility of the State or formally placed with a caregiver by the court are categorically eligible for free meals/milk in the National School Lunch Program/School Breakfast Program (NSLP/SBP), Special Milk Program (SMP), Summer Food Service Program (SFSP), and Child and Adult Care Food Program (CACFP). A caregiver who wants free meals/milk for their foster child/children need only present this document to the school, the summer feeding site, or their child care provider. No further application is required.       |
| 6.    Travel. The caregiver may provide routine transportation for the child, including transportation for medical and dental care. The caregiver may also travel with the child within the state of Texas and remain away from the caregiver's facility for as long as 72 consecutive hours, or may arrange for the child to travel within the state of Texas and remain away from the caregiver's facility for as long as 48 consecutive hours.          If the travel is within the state of Texas and for more than three 3 calendar days (72 consecutive hours), the caregiver must obtain prior written approval from the Department’s caseworker or DFPS staff in the caseworker’s chain of command. When the caregiver desires to take a child outside the state or country, the caregiver shall work with the Department’s caseworker to follow policies and procedures.           Prior to allowing any trip, activity, or visit to the home of any non-related person during which the caregiver will not be present, excluding Intermittent Alternate Care, for a period of time exceeding 48 consecutive hours, the caregiver must obtain written approval from the Department’s caseworker or caseworker’s chain of command.      Written approval for travel and visits is not required when:• The Department’s caseworker arranges for the child to visit with members of the child’s own family or with relatives; or    • The Department’s caseworker authorizes the child to travel in specified circumstances (usually routine trips or visits.)  In cases where approval is required, the caregiver must seek approval from the child’s caseworker or the caseworker’s supervisor at least 10 days in advance of the trip, if possible.     |
| 7.    Photographs and videotapes. The caregiver may take photographs and record videotapes of the child for the child's and the caregiver's personal use and for purposes of identification. The caregiver generally may not release any photographs or videotapes of the child for public use without DFPS's prior written permission. Prior DFPS written permission is not necessary if the child gives permission and the use of the photograph is in the child's best interest, no reference is made to the fact that the child is in the conservatorship of DFPS, and the release is in the course of normal school or extracurricular activities or to the child's friends or the caregiver's friends and family.            |
| 8.    Medical Care. The caregiver has been provided with current information as to who has authorization to consent to healthcare (medical, dental, vision, and behavioral healthcare) for the child. DFPS will notify the caregiver if this information changes. Healthcare for children in foster care in Texas is provided through Superior Health Plan Network (STAR Health 1-866-912-6283). For out-of-state placements, contact the child’s caseworker for questions about healthcare coverage. The medical consenter for a child placed in Texas must select a STAR Health Primary Care Physician (PCP) from the STAR Health Provider Directory located at www.fostercaretx.com. Only the medical consenter can select a PCP. If the caregiver is not the medical consenter, the caregiver must coordinate with the medical consenter to select a PCP for the child. If you have any questions at any time, please contact the caseworker named below.       |
| 9.    Confidentiality. Under penalty of law, the caregiver must not release information about the child to anyone without the prior authorization of the child's caseworker or the caseworker's supervisor, except as specified below:• To the extent the information is needed for the child's education or medical, dental, or psychological treatment, the caregiver may provide information about the child to the child's school and other DFPS authorized educational programs; to doctors, dentists, and other medical providers; and to counselors and therapists. • The caregiver must give DFPS unrestricted access to information about the child at all times.           |
| 10.    Contact with the Family. The caregiver must permit the child and the child's family (as well as other individuals who are significant to the child) to maintain contact through direct visitation, telephone calls, mail, and gifts under the terms and conditions specified by DFPS and the court.     |
| 11.    Contact with Court Appointed Individuals.     • The caregiver must give an individual appointed by a court of competent jurisdiction (such as a Guardian ad Litem, an Attorney ad Litem, or a CASA staff or volunteer) access to the child's information. A contractor or caregiver must ensure that the individual has a valid court order and a notification letter of volunteer assignment and acceptance that clarifies the individual's appointment to the child.      • The contractor or caregiver must give an individual appointed by a court of competent jurisdiction access to the child. Parties will exercise reasonable attempts to plan and coordinate visits but unannounced visits will not be prohibited as long as it does not disrupt the child's routine, including school, therapy, family visitation, or outings.  • If the contractor or caregiver cannot readily determine the identity or authority of an individual appointed by a court of competent jurisdiction, then the contractor or caregiver must obtain approval from the Department prior to granting the individual access to the Child.     |
| 12. Briefly discuss the child’s out of home placement below:      |
| 13. How long is the child expected to be in care:      |

| PRIVACY STATEMENT   |
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| DFPS values your privacy. For more information, read our [Privacy and Security Policy](https://www.dfps.texas.gov/policies/Website/). |

| SIGNATURES   |
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| DFPS, at its sole discretion, may remove the child from the caregiver at any time, subject to applicable court orders.  |
| Kinship Caregiver:**X**       | Date Signed:      | Telephone No. :      |
| DFPS Caseworker:**X**       | Date Signed:      | Telephone No. :      |
| DFPS Supervisor: **X**       | Date Signed:       | Telephone No. :      |