

FOSTER CARE IN ALABAMA



Certified Public Manager® Program
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Certified Public **Manager**® Training

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The research, findings, and recommendations presented in this white paper do not represent the views of any agency or organization, but rather the collective educational research and analysis from a diverse group of participants in the Certified Public Manager training program.

INTRODUCTION

National statistics reveal foster children are 40% more likely to be incarcerated and 44% more likely to become pregnant all by the age of 21 (National Youth in Transition Database, 2019, p. 7).

Foster care is a short-term service, provided by the States, to children who are not able to live with their families (Child Welfare Information Gateway, 2020). In Raising Government Children, Catherine E. Rymph, states “Foster care is quite diffuse. It operates at a macro and a micro level. In the big picture, foster care is a system, a bureaucracy of regulations, rules, procedures, and budgets. At the more intimate level, it concerns families and other personal relationships that are made up of unique experiences and often painful stories” (Rymph, 2017, p. 60). The Alabama foster care system is one of 53 similar systems in the United States and its territories. Alabama foster care is a subsystem of the Federal Children’s Bureau, which oversees the operations of the nation’s foster care system.

The Alabama Foster Care Team was tasked with researching the resources and services Alabama provides foster families, the services other states provide foster families, and recommending strategies to improve foster care in Alabama. The team developed the following project statement to guide our research.

We will research Alabama's Foster Care System, as well as other states' processes, in order to improve foster care for Alabama's children.

To give insight on the current state of Alabama Foster Care, our team researched services provided by Alabama Department of Human Resources at the State and County levels, Child Placement Agencies, Advocacy Organizations, learned best strategies from other states, and discovered information from a limited survey of Alabama foster families.

BACKGROUND

The Department of Human Resources (DHR), was previously known as the Alabama Department of Child Welfare (ADCW). State legislature created ADCW in 1919 due to pressure given from advocacy groups. These advocacy groups were successful at lobbying for the passage of child labor, juvenile court, and compulsory school attendance laws. The creation of ADCW has been considered to be the greatest accomplishment in their efforts to secure acceptable living situations for the children of the state. By 1923, ADCW had focused on expanding services statewide by creating child-welfare boards and hiring social workers to provide services for the children and families in each county. Nationally, Alabama was one of the first six states to create such boards. Administering financial assistance from the federal government became ADCW's primary responsibility in 1933. By 1935, ADCW became part of the newly developed Department of Public Welfare (DPW), which was Alabama's first state level social welfare organization. This allowed Alabama to begin receiving federal money for new programs. The Department of Human Resources (DHR) adopted its current name in 1986. DHR began to develop new programs to comply with the new federal laws put into place by the passage of the Adoption Assistance and Child Welfare Act (1980) (Encyclopedia of Alabama, 2015).

DHR continues to support the citizens of the state with social welfare services, which include foster care. DHR is the largest employer of social workers in the State of Alabama (Encyclopedia of Alabama, 2015). According to the DHR website, these social workers are responsible for the 6,345 plus children who are currently in foster care. The website identifies the average number of days a child spends in the Foster Care system at 618 days and that there are currently 2,294 foster homes (Alabama Department of Human Resources Website, 2020), which equates to four children on average in each foster home, for an average of two years.

The purpose of the State Department of Human Resources "is to promote a unified development of welfare actives and welfare agencies of the State and the local governments so that each agency and each governmental institution shall function as an integral part of a general system" (Administrative Code of Alabama 660-1-2-.01, 1975). The County Department

serves as agents of the State Department by taking responsibility for the safety needs of the citizens within their county through the powers, duties, and responsibilities set forth by the State Department (Administrative Code of Alabama 660-1-2-.02, 1975). The central office serves as the support entity to the individual counties within Alabama and is responsible for making sure the counties follow the policies set forth by legislation, Chapter 660, under the Official Code for the State of Alabama. The powers, duties, and responsibilities set forth by the State Department are referred to as Minimum Standards, which is a federal requirement in accordance with the Child Care Act of 1971 (Minimum Standards for Foster Family Homes, 2016, p. 3). Foster Families, Placement Agencies, and Social Workers all have Minimum Standards requirements to follow in order to stay within State policy.

RESOURCES AND SERVICES ALABAMA PROVIDES TO FOSTER FAMILIES AND CHILDREN

The Department of Human Resources – State Level

Alabama DHR has many programs to assist foster children. One such program is Kinship Navigator, which Alabama implemented in August of 2019. The program is a single website designed for information and referral services, for grandparents, relatives, and other caregivers who are currently raising a child (Alabama Kinship Navigator, 2019).

Based on the most recent Child & Family Service Report issued by the Alabama Department of Human Resources, the length of time a child is in foster care exceeds the required time a child should be in foster care before returning home or parental rights are terminated. The Adoption and Safe Families Act requires children to be returned home within 12 months of entering foster care, however from FY13-FY18 children stayed in foster care for an average of 23.4 months. This is partly due to the 25% increase of children between 2014 and 2017 and the fluctuation in staff turnover rates, at times as high as 41%. With these rates, carrying out service needs and managing the assignments of children in the foster care system are greatly affected (2015 - 2019 Child & Family Service Report, 2019, pp. 40-41).

In the last three years, DHR has realized annual increases in adoptions from 511 adoptions in 2017, to 710 adoptions in 2018, to 731 adoptions in 2019. DHR has partnered with programs to help recruit more adoptions, such as the Wendy's Wonderful Kids Program (WWK) and the Heart Gallery Alabama. The WWK serves children who are historically challenging to match, such as older children, significant special needs children, and larger sibling groups. The Heart Gallery Alabama has been working alongside DHR for over a decade with the purpose to create forever families for children who are in foster care. (Annual Report, 2019, p. 5). They create photographs and video graphs as part of a traveling exhibit establishing a statewide media presence (Heart Gallery Alabama, 2020).

Another beneficial DHR program is the Independent Living (IL) Program. The purpose of this program is to help transition foster children to adulthood. The IL Program runs concurrently with other programs once the child reaches the 14-21 age group (Department of Human Resources Website, 2020). The IL Program supports a national survey that is organized by the National Youth in Transition Database. The program pays incentives to those children participating in a survey. The survey serves to report key items about life after foster care (Department of Social Services Website, 2020). Another program launched by DHR is the Fostering Hope Scholarship Program. This program is an investment in Alabama's youth and covers the cost of post-secondary education. It launched during the 2016-2017 academic year. The scholarship provides tuition, room, meals and fees for attendance at an Alabama college, university, or trade-school. To be eligible for the program, a child must earn a high school diploma or GED before leaving foster care. It is also available to children who are adopted out of foster care at age 14 or older (Alabama Fostering Hope Scholarship Website). In the last three years, 524 foster youth have participated in the program while attending a total of 42 state colleges and universities (Annual Report, 2019, p. 8).

The Department of Human Resources – County Level

Alabama consists of 67 County Departments of Human Resources. These County Departments are individually run by a different director and board of directors than at State Department level (Annual Report, 2019, p. 2). The county offices have flexibility in their operations as long as Minimum Standards are maintained (Administrative Code of Alabama 660-1-2-.02, 1975), but this flexibility can also lead to inconsistencies in services provided from county to county. For example, at time of placement, one county may have community resources available to provide foster parents with child clothing, hygiene products, car seat, pack and play set, etc., whereas another county may not have those same resources available. In the latter case, foster families cover such expenses using the stipend provided by the State. The allocation of community resources falls outside the Minimum Standards, so each county is permitted to reallocate these resources to the foster family as needed. In a survey conducted with 135 foster families responding, we learned that families received children in multiple counties. This survey also indicated families experienced difficulty in finding information related to their particular county. According the 2015-2019 Child & Family Service Report, DHR states “new staff, as well as staff turnover, has had a major impact on carrying out service needs, and follow through in terms of worker management of the Individual Service Planning process” (2015 - 2019 Child & Family Service Report, 2019, p. 73). At the county level there is limited access for the community to obtain information. For foster care county information, a phone number and email address are available from the State Department webpage.

Child Placement Agencies

A Child Placement Agency (CPA) is a private foster care agency that is licensed by the state to provide services in conjunction with the State Department’s Foster program (Private Fostering and Child Placement Agencies: The Basics, 2020). These agencies, such as Alabama Baptists Children’s Home (ABCH), United Methodist Children’s Home, and Agape, play the role of liaison between the DHR and a family, making sure the foster family has a clear understanding of every step of the journey. These agencies are independently financed and help to communicate the needs of the community in order to recruit foster homes and obtain financial resources, foster

parent resources, support, etc. Children are placed with a CPA through DHR. Generally, if a foster home is not available, DHR will reach out to a CPA to see if they have availability. The support provided by CPAs has statistically shown that opportunities are greater for children in their care. According to ABCH, those getting a college degree after leaving foster care is 70% with ABCH, while only 3% of children with DHR. The explanation for this is due to the support ABCH gives to foster children while they attend college. Foster children with ABCH receive a stipend to help with living and educational expenses.

Advocacy Organizations for Foster Families

An Advocacy Organization, just as its terminology implies, is a support organization for foster families. The key difference between a CPA and an Advocacy Organization is that an advocacy organization does not work in direct support for DHR. It does provide resources to the foster child and family. Because these organizations have experience working with foster care system issues, they often assist in explaining DHR policies and procedures to foster families. Most Advocacy Organizations are non-profit and community organized entities that are started by an individual or a group detecting a need in the community. They fill the need of the foster families who find it difficult to locate resources and assistance. The Big House Foundation is one advocacy organization. They help support foster families through the creation of clothing closets and activities to help promote relationships. Clothing closets provide foster families with the tangible items needed to care for a child at no cost. The clothing closet receives the items through donation and then distributes them in kind. Big House Foundation also supports foster families by sponsoring several outlets that help build relationships. These include Kid's Night Out and Moms' Meet Up. Kid's Night Out is an event that brings kids in foster care together for an evening of fun while the parents enjoy a quiet evening. Moms' Meet Up is an event for foster mothers to help build relationships with one another (Our Big House Programs Website). The central premise is building relationships. Other organizations, such as Alabama Foster and Adoptive Parents Association offer foster family training and scholarships. Shepherd's Staff is an organization like the Big House Foundation and offers foster parent training as well as food, clothes, and back to school items and Mom's Day Out. Free summer

camp is provided by an organization called Raleigh's Place. All these resources serve to benefit Alabama children in foster care.

Community Involvement

The partnership of child welfare is partially public, paid with public funds, and partially private, paid by the families providing the care. DHR, Child Placement Agencies, and Advocacy Organizations can only be successful when acting in cooperation with the community. Community involvement manifests itself in church and civic activities such as food drives, fun days, clothing donations, and corporate and business sponsorships. The need for focused and ongoing communication with the public is paramount in meeting the needs of foster children. In some communities, involvement is high. In other communities, involvement is moderate to low. Communication appears to be the key. If the community knows what is needed and knows the full range of programs and resources available from the State and county, then the community is in a better position to respond and support the needs of foster families and children.

NEED FOR MORE FOSTER FAMILIES

In Fiscal Year 2015, 2016, and 2017 the number of new foster family homes reported by DHR were 1,484, 1,124, and 524 respectively (Alabama Annual Progress and Services Report, 2018, p. 120). Our team administered a survey that represents 5% of the total number of foster families in Alabama. Of those responding, 80% have been a foster family for 5 years or less. In searching for answers to why the number of new foster families are dropping, responses from the survey were explored.

Searching for basic on-line information or contacting DHR directly was the first step of 62% of the families surveyed, which indicates the availability of online information and DHR staff in assisting and recruiting potential foster families. The first step for a potential foster family is getting licensed. Upon searching for licensing requirements in Alabama, the only place a list of requirements could be found was on the Adopt Us Kids' webpage (Adopt Us Kids Website, 2020). While the licensing standards for Alabama are similar to other states, Alabama is the only state that takes nine to twelve months to license a foster family. As of July 22, 2020, the

Interstate Compact on the Placement of Children’s website reveals 62% of the 50 states can license a foster family in three to six months. One reason for the delay in receiving a license is the wait time experienced in receiving fingerprint scan results. Alabama is one of only eight states that takes a minimum of 15-30 days to return fingerprint results. The nation reports a 64% faster turnaround for fingerprint scan results, with 32% taking less than four days (Interstate Compact on the Placement of Children).

A common challenge is knowing where to go for help once becoming a foster parent. Communication regarding support and resources is crucial. It could make the difference in a families’ decision to continue fostering. There is a plethora of resources available to assist foster families in caring for children. Building an adequate support network is critical in making sure funding and services are available to all that need it. Funding and provisions are available for all foster families in Alabama, through DHR or Advocacy Organizations.

BEST STRATEGIES OF OTHER STATES

The Administration for Children & Families offers 52 strategies for improving child welfare services and outcomes (Administration for Children & Families Presentation, 2018). A few of these strategies were considered when identifying what other states do well.

ARIZONA - Resource Guide

Everyone can appreciate having a one-stop shop to locate answers to questions. The Arizona Friends of Foster Children Foundation (AFFCF) 2020 Resource met almost all the criteria we used to identify best strategies. It is a directory of organizations aiding Arizona foster children in Arizona. The directory offers a County-specific organization directory and provides a list of services offered by the organizations aiding the State’s foster children. The brochure lists Foster Care/Adoption Licensing Agency; Behavioral Health Services; Family Support Services; Education; Support; Resources; Young Adult Services; Mentoring; and Spanish-Language Services. Pertinent information is provided for each organization, such as contact information, a brief detailed description of the organization's purpose, and their mission. The resource also provides a Quick Glance Index of Organizations. The resource guide is color coded with

identifying markers throughout the brochure, which makes it uniquely user friendly (Arizona Friends of Foster Children Foundation, 2020)

TEXAS - Health Passport

Medical information accessibility is a concern for individuals and families. Texas has a unique, computer based, resource that eliminates some of those concerns for foster care children and foster families. The Health Passport was created to make sure medical information follows each child in the Texas Department of Family and Protective Services (DFPS) conservatorship wherever they go. The Passport travels with each child, even when the child moves. It can also be used from a mobile device. The Texas Health Passport resources offers the following benefits:

- A computer-based system that has health data about children in the program.
- The Health Passport is not a full medical record. It has information on diagnoses, gaps in care, doctor and dentist visits, hospital stays, prescriptions and shot records.
- Non DFPS Medical Consenter
- DFPS Caseworker or Supervisor access
- The DFPS caseworker will provide a copy of the Health Passport to youth who exit foster care at age 18.

(Texas Department of Family and Protective Services, 2020)

WASHINGTON – Foster Parent Shared Leave Pool

The act of combining resources to help family, friends, co-worker, and in some instance's strangers, is not uncommon. Funds are generally used to finance an expense that would benefit the participating group members or be identified as a gift from the entire group. The U.S. Office of Personnel Management (OPM), which serves as the chief human resource agency and personnel policy manager for the Federal Government, offers the following to describe and explain shared leave and voluntary donations. Leave sharing allows an employee who is a member of his or her agency's voluntary leave bank to receive annual leave from that leave

bank if the employee experiences a personal or family medical emergency and has exhausted his or her available paid leave.

An employee may donate annual leave directly to another employee who has a personal or family medical emergency and who has exhausted his or her available paid leave. Each agency must administer a voluntary leave transfer program for its employees. There is no limit on the amount of donated annual leave a leave recipient may receive from the leave donor(s).

However, any unused donated leave must be returned to the leave donor(s) when the medical emergency ends.

Each agency is responsible for determining whether, and how much, donated annual leave is needed by affected employees; approving leave donors and/or leave recipients within the agency; and facilitating the distribution of donated annual leave from approved leave donors to approved leave recipients within the agency. For clarity, OPM, provided the following definitions:

A medical emergency is a medical condition of either the employee or the employee's family member (see below) that is likely to require the employee to be absent from duty for a prolonged period and to result in a substantial loss of income because of the employee's lack of available paid leave.

Family member covers a wide range of relationships, including spouse; parents; parents-in-law; children; brothers; sisters; grandparents; grandchildren; step parents; step children; foster parents; foster children; guardianship relationships; same sex and opposite sex domestic partners; and spouses or domestic partners of the aforementioned, as applicable. The list of family members for whom an employee may request donated annual leave under the VLTP (as well as important associated definitions for the terms son or daughter, parent, domestic partner, and committed relationship) may be found in the fact sheet entitled Definitions Related to Family Member and Immediate Relative for Leave Purposes.

The Federal Government offers a wide range of leave options and workplace flexibilities to assist an employee who needs to be away from the workplace. These flexibilities include annual

leave, sick leave, advanced annual or sick leave, leave under the Family and Medical Leave Act (FMLA), leave without pay, alternative work schedules, credit hours under flexible work schedules, compensatory time off and telework (external link). Agencies may also have a voluntary leave bank program (Voluntary Leave Transfer Program, 2020).

Washington State Department of Children, Youth & Families (DCYF), offered a unique resource which also meets all the standards for recommendation. The Foster Shared Leave Pool (FPSLP), established February 2018, allows any state employee to voluntarily donate their leave to a shared leave pool for foster parents. Eligible state employees who are licensed foster parents can receive the donated leave for foster children. Legislation was passed by the Washington State governing legislative branch (Foster Parent Shared Leave Pool, 2020).

YouTube Video Therapy

Foster parents and caregivers are critical in providing supportive home environments to children in out-of-home care. Often, these children have special challenges and needs. DCYF provides video links as a resource to support the diverse needs of children in foster care. The site offers videos specific to behavioral strategies, behavior management and de-escalation techniques in foster care. The videos are prescreened by DCYF to meet the needs of the foster parent. The videos help parents learn how to handle challenging behaviors in children; learn how to deal with behavior management, and help the parent develop skills to bring the tension down with children in care (Parenting Resources, 2020).

Foster Parent 1624 Consultation Team

Since 2007, statewide meetings in Washington have brought together subject matter experts' caregivers, administrators and managers of DCYF. Within DCYF and the caregiving community, these meetings are frequently referred to as "1624 meetings." 1624 reflects the legislative bill number that created the committee. The meetings include foster parent representatives who are elected for a two-year term by other caregivers in their region, elected representatives from the Foster Parent Association of Washington State (FPAWS), and DCYF staff who are

appointed by agency leadership. The committee discusses issues of statewide concern to foster parents (Foster Parent 1624 Consultation Team, 2020).

RECOMMENDATIONS

Based on our research of Alabama's Foster Care system and other state's processes, we would like to propose the following recommendations in the three distinct areas of communication, resources, and training.

Develop a Foster Parent Consultation Team

In an effort to strengthen communication within the foster care system, we recommend the development of a Foster Parent Consultation Team similar to the current "1624 team" convening in Washington State. This team would conduct round table meetings with foster parent representatives, agents from the Foster Parent Association, DHR staff, and community and legal leaders to discuss issues of statewide concern to foster parents. This would allow each facet of the foster system to have a voice, in which recommendations can be offered to improve the system.

As a way to address the issue of insufficient resources, the team suggests the implementation of a Health Passport and an enhancement to the current resource guide.

A Health Passport

Alabama has a health packet that is to be filled out prior to child placement. To further develop this resource, we recommend establishing a database for foster children's health records accessible to the foster parent and health professionals, similar to Texas. Texas has a secure database, referred to as a Health Passport, for foster parents and healthcare professionals to access health and wellness information for children in foster care. Though it is not a full medical record, it contains diagnoses, shot records and prescriptions for each child in their program. Other advantages of implementing a health passport in Alabama is that it can allow providers and medical stakeholders the ability to view more patient information than what is currently available. By having access to this information,

it can give providers the opportunity to reduce medical errors due to missing information or a young child's inability to speak effectively. This recommendation could result in a cost-savings benefit to the state due to a reduction in duplicate testing, immunizations and prescriptions.

Develop an Expanded Resource Guide

Alabama DHR provides a resource directory on their website, called the Automated Placement Resource Directory and is also a Residential Facility Directory. It is a directory designed to provide detailed narrative and pictorial information about the various organizations that help nurture, protect and care for the children who have been placed with the Department. The site also provides the requested information by county, if chosen. It is an informative site that provides over one-hundred resources.

Another resource recommendation is to expand the resources lists on the DHR website, or place the list on the website portal to be developed, two critical resource lists; one for agencies and one for family support. A great example of the suggested resource list is included on the Arizona website. It is a color-coded PDF resource guide that is all inclusive, easy to navigate and printable for easy access (Arizona Friends of Foster Children Foundation, 2020).

Web-Based Training for Foster Families

The last area of recommendation is training. Our hope is for adoption numbers to continue rising for children in need of permanent homes. Ongoing and recurring training and development of county employees will contribute to this goal. It is our recommendation to include an option for web-based training in order to help the prospective foster families to receive licensing in a timelier manner. This web-based training could also be a valuable component of the recommended web portal.

Also, to help foster families receive additional training to assist their foster children with challenging behaviors, we recommend the use of YouTube Video Therapy. This therapy is currently being used by Washington State.

Develop a Communication/Training Web Portal

As a way to improve communication between DHR and the community, foster families, and potential foster families, we recommend the development of a state web portal that would bring all foster care resources together into a single site. This site will allow users to access state, as well as their specific county, information. The Consultation Team, Health Passport, Expanded Resource Guide, and Web-based training recommendations could be embedded into this web portal. This portal would be a way to distribute information to the community and allow the community to be involved in the needs of foster families. A list of the licensing requirements and forms could be maintained for those interested in beginning the process, local advocacy organizations could maintain their agency information and resources, local foster parenting groups could list meetings information and needs, and county staff could notify the general public of ways to assist the foster care community. By developing this portal, it would give foster families, potential foster families, advocacy organizations, and the community a single site to retrieve or promote needs. This readily available resource could also decrease the workload of county Social Workers.

CONCLUSION

The children entrusted to the State of Alabama's foster care community are fortunate to have such a committed group of people ensuring their temporary, or long term, care experience is adequate and safe. Strengthening channels of communication, providing a rich resource system and providing appropriate and easily accessible training for foster families can only enrich the foster care community for the foster children in Alabama.

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