







OCS Regional Licensing Specialist Contacts



 Anchorage	 Craig, Juneau, Ketchikan, Petersburg, Sitka	 Aniak, Bethel, St. Mary's	 Gakona, Homer, Kenai, Kodiak, Wasilla, Valdez	 Delta Junction, Fairbanks, Kotzebue, Nome, Utqiagvik	
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Alaska Center for Resource Families

 1-800-478-7307

 www.acrf.org

 acrf@nwresource.org

Anchorage

840 K St, Suite 101
Anchorage, AK 99501
Phone: 907-279-1799
Fax: 907-279-1520

Fairbanks

815 2nd Avenue, Suite 202
Fairbanks, AK 99701
Phone: 907-479-7307
Fax: 907-479-9666

Mat-Su

5050 Dunbar Street, Suite A2
PO Box 876844
Wasilla, AK 99687
Phone: 907-376-4678
Fax: 907-376-4638



Access Resource Family Training

webinars
in-person
virtual
lending library



Foster Parent Information & Resources

faqs
orientation schedules
applications



Adoption Information & Resources

paths of adoptions
licensing
PARKA program



Resources for Relative Foster Care

micro-trainings
guides
support networks

1-855-60-FUNDS
or
hss.ocsservicearray@alaska.gov

Do you need help or have questions about your payments, where to submit receipts or get reimbursed?

Our centralized contacts are here to help.



hss.ocspfd@alaska.gov

providepay@alaska.gov

hssocsstateofficechildcare@alaska.gov

Provide signed mileage log to your case worker

RESOURCE FAMILY MILEAGE REIMBURSEMENT ELIGIBILITY CRITERIA

- 1) Trip is for an OCS child in the resource family's home
- 2) Trip is pre-approved by the case worker
- 3) Trips exceed 50 miles per week (Sunday through Saturday)
- 4) Mileage is for one of the following reasons:
 - Counseling Appointments
 - OCS required activities (ie: family contact approved on a family contact plan)
 - Doctor, dentist, other medical appointments
 - Educational continuity, if the home the child is placed is not on the bus route to their school (excludes mileage to school for extracurricular activities)





RESOURCE FAMILY MILEAGE REIMBURSEMENT PROCESS

- 1) Traveler completes mileage form -> located [HERE](#) (under M)
- 2) Traveler signs mileage form and submits to case worker
- 3) Case worker will provide case number and names of children traveling
- 4) Case worker signs mileage form and submits to hss.ocs.vendor.payments@alaska.gov
- 5) Vendor Payments Unit (VPU) will review log, assess eligibility using CODE, deduct 50 miles/week
- 6) VPU will then send the mileage to providepay@alaska.gov
- 7) Provider Payments Unit will create the Request for Funds and process payments in IRIS
- 8) Mileage reimbursement issued to resource family



VACATION TRAVEL REIMBURSEMENT GUIDELINES

- 1) Provide as much notice as possible to the case worker regarding the vacation travel.
 - 2) Reimbursement for vacation travel is limited to once in a 12-month period per child.
 - 3) Maximum allowable reimbursement is \$800.00 per child.
 - 4) Booking of vacation travel is the responsibility of the resource parent (OCS does not purchase tickets for vacation travel).
 - 5) Reimbursement for transportation occurs after travel has been completed.
 - 6) Reimbursement only covers the cost of transportation (bus, ferry, airfare) and does not reimburse for lodging, rental cars, food or entertainment.
 - 7) Tickets booked using mileage points, companion fares or coupons will only be reimbursed for the taxes and fees associated with the trip. OCS can only reimburse what was actually paid by the resource parent.
 - 8) Copies of paper boarding passes are required in order to submit receipts for reimbursement. Boarding passes from an app may disappear once travel is complete (keep paper copies).
 - 9) Upon completion of travel resource parent submits copies of boarding pass and travel receipts to the Special Needs Hotline at hss.ocsservicearray@alaska.gov
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RESOURCE FAMILY REPORT OF DAMAGED/STOLEN PROPERTY OR PERSONAL INJURY

Per 7 AAC 53.110 and CPS policy 6.2.2.9

Reimbursements for damage/loss will be considered under the following conditions:

1. The loss exceeded that which a parent might encounter in caring for a child not in foster care;
2. The loss was not provoked by the actions or statements of the resource family;
3. The incident resulting in financial loss was reported to OCS by the resource family within 72 hours. If the loss was caused by theft, criminal mischief or other criminal conduct, it must have been reported to the law enforcement agency having jurisdiction;
4. The resource family has submitted a completed Resource Family Report of Stolen/Damaged Property or Personal Injury (06-9440), within a reasonable period following the damage or loss; and
5. Adequate PS Specialist action has been taken to have the child assume responsibility for their actions. The PS Specialist may assist in facilitating restitution to be paid by the child in lieu of payment by OCS. That facilitation may include an agreement with law enforcement, the courts, or the Division of Juvenile Justice.

Resource Parent(s) Name:

Date:

Address:

Phone Number:

Email:

Location of Incident:

Date of the incident or date the item was noticed as stolen/damaged:

Foster child responsible for the damage/injury:

Please list the items that were stolen or damaged

Item Name:

Brand & Model Number:

Date Purchased:

Cost of Item:

Did you notify your homeowner's insurance company? Yes No

Is the item/injury covered under your insurance? Yes No

How much of your insurance deductible was used as a result of this incident (OCS may reimburse for deductible):

Did you notify law enforcement? Yes No

Name of law enforcement:

Date law enforcement was notified:

Who did you notify at OCS:

Date OCS was notified:

Please describe the details of the damage, loss, or injury:

What supervision and precautions were taken before and during the incident to prevent damage, loss, or injury:

Who else has information about the incident:

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

I hereby certify that, to the best of my knowledge and belief, the above statements are true and correct.

Resource Parent Signature: _____ Date: _____

Resource Parent Signature: _____ Date: _____

Please return this completed form to the OCS Service Array Unit

Fax: (907) 465-3397 **Email:** hss.ocsservicearray@alaska.gov

Address: OCS

Attn: Service Array Unit

P.O. Box 110630 Juneau, AK 99801

Questions? Contact the OCS Service Array Unit at 1-855-603-8637

**INCIDENT, EMERGENCY, ACCIDENT, ILLNESS, AND CHANGE REPORT
FOSTER HOME / FOSTER GROUP HOME**

Name of Provider:	Name of Child:	Date:
Date of Occurrence:	Place of Occurrence	Time:
Witness Name(s) (if applicable):	Address/Phone Numbers (if known)	
<p><u>Immediately Report to OCS:</u></p> <ul style="list-style-type: none"> • Suspected abuse or neglect to child – 1-800-478-4444 <p><u>Immediately report to licensing:</u></p> <ul style="list-style-type: none"> • Death of a child in care • Serious injury or illness requiring medical attention by medical personnel • Fire or other disaster that affects the foster home • Any unplanned changes that occur • An absence of more than 72 hours of the foster parent, including the plan for supervision of children in care by a responsible adult during that absence <p><u>Immediately Report to Child's Placement Worker:</u></p> <ul style="list-style-type: none"> • Death of a child in care • Attempted or threatened suicide • Life threatening illness or hospitalization * Unapproved absence of child more than 10 hours 	<p><u>Report to licensing within 24 hours:</u></p> <ul style="list-style-type: none"> • Knowledge that an administrator, employee, volunteer or household member has been convicted of or charged with an offense of a felony or misdemeanor as described in AS 47.32.200); or found to have neglected or abused a child as described in AS 47.10. <p><u>Report to Child's Placement Worker by Next Working Day, Knowledge of:</u></p> <ul style="list-style-type: none"> • Pregnancy of a child in care • Severe distress or depression • Violation of a condition of probation • Allegations of criminal conduct of a child • Non emergency medical care requiring consent from parent 	<p><u>14 day Notice to Licensing Prior to change in</u></p> <ul style="list-style-type: none"> • Mailing address • Addition of a household member for 45 days or longer <p><u>20 day Notice to Licensing prior to effective date of a decision to relinquish.</u></p> <p><u>30 Days Notice to Licensing Prior to Change In:</u></p> <ul style="list-style-type: none"> • Name of provider or another individual residing in the foster home • Foster parent status (i.e., births, marriage, divorce, separation, etc) • Age, sex, or number of children served • Addition or deletion of a specialization • Relocation of home
Brief description of emergency/incident:		
Describe circumstances leading to emergency/incident:		
Describe action taken:		
First aid given? <input type="checkbox"/> Yes <input type="checkbox"/> No By whom?		

Provider Name: _____

Medical attention required? <input type="checkbox"/> Yes <input type="checkbox"/> No Where did you go?	
Hospitalized? <input type="checkbox"/> Yes <input type="checkbox"/> No Name of hospital?	
Agencies notified: <input type="checkbox"/> Yes <input type="checkbox"/> No Who?	Time/Date:
Name of parent or guardian notified, if applicable:	Time/Date:
Were police called? <input type="checkbox"/> Yes <input type="checkbox"/> No Officer name?	Time/Date:
Physicians statement (regarding injuries, treatment ordered, medications), including copies of medical documents.	
Report of Changes	Effective Date
Request for change: Age range: _____, Gender _____, Capacity _____	
Specialization: _____, Condition _____, Relinquishment _____	
Name change of household member:	
Changes in the foster home, including marriage, separation or divorce of foster parent:	
Name of household member convicted or charged with an offense of a felony or misdemeanor as described in AS 47.32.200 or found to have neglected or abused a child as described in AS 47.10.	
Foster parent absence of more than 72 hours, including a plan for supervision during absence.	
Change of phone number / email address:	
New mailing address:	
New physical address:	

Addition of household member(s) who remains or intends to remain in your home for 45 days or more within a 12-month period:

Name	Relationship	Date Moved In	Birth Date	Age

*Age 16 or older must have a valid criminal history check including fingerprint results. Youth turning age 16 must be printed within 30 days of their 16th birthday.

The following household member(s) moved out of foster home:

Name	Relationship	Date Left

Name & Title of Person Reporting

Date

REPORTING CHILD ABUSE AND NEGLECT IN ALASKA

Report Abuse and Neglect to Office of Children's Services

Alaska law **AS 47.32.200 (c)** requires foster care providers to report child abuse and neglect. Foster care providers who, in the performance of their professional duties, have reasonable cause to suspect that a child has suffered harm as a result of abuse or neglect, must immediately (as soon as reasonably possible - no later than 24 hours) report that information to the nearest office of the State's Department of Health and Social Services, Office of Children's Services.

If you have a reasonable suspicion, even if you are not sure about the existence of abuse or neglect, you are obligated to report. It is not your responsibility to determine whether your suspicions are correct or to investigate those suspicions. It is also not your responsibility to determine if the abuse or neglect occurred in the child's home or in the foster home.

If you cannot contact the nearest office of the Office of Children's Services for any reason, and immediate action is necessary for the well-being of the child, make your report to a police agency. An officer will then take immediate action to protect the child and, at the earliest opportunity, will notify the nearest office of the Office of Children's Services.

There may be times when you wonder whether something constitutes abuse or neglect, or if your suspicions are adequate to warrant reporting. Please feel free to contact the Office of Children's Services office nearest you.

What is child abuse or neglect?

State law defines child abuse or neglect to include the following actions by those responsible for a child's welfare:

- Physical injury that harms or threatens a child's health or welfare;
- Failure to care for a child, including neglect of the necessary physical (food, shelter, clothing, and medical attention), emotional, mental and social needs;
- Sexual abuse, including molestation or incest;
- Sexual exploitation, including permitting or encouraging prostitution;
- Mental injury -- An injury to the emotional well-being, or intellectual or physiological capacity of a child, as evidenced by an observable and substantial impairment in the child's ability to function in a developmentally appropriate manner; or
- Maltreatment -- A child has suffered substantial harm as a result of child abuse or neglect due to an act or omission not necessarily committed by the child's parent, custodian or guardian.

Medical, Dental, and Medication Record

Child's Name _____	Emergency Contact Name _____
Birth Date _____	Address _____
Medical Plan _____	Phone _____
Medicaid Number _____	Alternate Phone _____

Date	Nature of Visit	Attending Physician	Prescribed Medication	Diagnosis/Recommendations/Notes

For each visit to a physician, health center or dentist, enter date (month/day/year), complete name of the provider, prescribed medications, what was done, and recommendations. All evasive treatment must be prior approved by the guardian.

This form is to be given to the child's placement worker when requested and/or when the child leaves the foster home.

Name: Known allergies:					Date:	
Name of Medication	Date Started	Dosage, Dosage Times	Refill Number	Pharmacy Phone Number	Physician Name and Phone Number	Comments

All medication and/or dosage changes must be approved by the guardian.

Clothing Inventory Form

Childs Name: _____

Date: _____

Clothing Request **Clothing Inventory at Discharge**

For clothing requests, complete the clothing request type and item inventory below.

The clothing request type can be skipped for discharge inventories, only the item inventory section is required.

Clothing Request Type (**select one**):

- EMERGENCY CLOTHING REQUEST:** If it is found that clothing is inadequate within the first 30 days of the Emergency placement. OCS will request special needs funds.
- EXTRAORDINARY CLOTHING REQUEST:** Extraordinary clothing includes clothing attire needed due to unusual circumstances. Examples of extraordinary matters include medically fragile, rapid weight gain or loss, seasonal clothing needs or damaged clothing due to flood/fire.
- Once it is determined that the child has an adequate supply of clothing upon placement, routine replacement of clothing is the responsibility of the out-of-home care provider.
- **10% of the monthly foster care reimbursement is to be used for clothing.**
- The Clothing Inventory must be completed and returned to the Protective Services Specialist (child's caseworker) when the child leaves care.
- Clothing is the property of the child and must follow them to their next placement.

Item(s)	What clothing does the child have? <i>(Describe below upon Request or Discharge)</i>	What clothing is needed? <i>(For a request to purchase clothing)</i>	Total Amount Requested:
Pants			
Shirts			
Underwear (bras, socks, panties, briefs)			
Shoes			
Seasonal gear			
TOTAL REQUESTED:			

If you have any questions about the clothing requests or how to complete the form please email hss.ocsservicearray@alaska.gov or call the **Special Needs Hotline at 1-855-60-FUNDS.**

STATE OF ALASKA

Personal Vehicle Use Reimbursement Log

This form is to request reimbursement for mileage and parking when no Travel Authorization form is needed. You do not need to attach this form to a Travel Authorization when claiming mileage in connection with a trip. If other than a personal automobile or truck was used, please indicate what type of equipment so we may pay at the correct rate. Vehicle types and rates are listed in AAM 60.

TRAVELER'S NAME	ADDRESS, CITY, STATE ZIP	PHONE #	VN CUST NUMBER

DATE	PURPOSE INCLUDE TRIP DETAILS SUCH AS DEPARTURE AND ARRIVAL LOCATIONS AND TIMES	VEHICLE SELECT TYPE USED	ODOMETER READING		MILEAGE RESIDENCE TO DUTY STATION	TOTAL MILES	MILEAGE RATE	MILEAGE ALLOWANCE	PARKING & OTHER EXP.	LINE TOTAL
			BEGIN	END						
		AUTO				-	\$ -	-		\$ -
		AUTO				-	\$ -	-		\$ -
		AUTO				-	\$ -	-		\$ -
		AUTO				-	\$ -	-		\$ -
		AUTO				-	\$ -	-		\$ -
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		AUTO				-	\$ -	-		\$ -
		AUTO				-	\$ -	-		\$ -
		AUTO				-	\$ -	-		\$ -
SUBTOTALS						-	\$ -	\$ -	\$ -	\$ -

I certify that I used my personal vehicle on State of Alaska business.

Traveler's Signature

Approval Signature

FINANCIAL CODING TO BE CHARGED		
ACCOUNTING TEMPLATE OR REQUIRED IRIS ELEMENTS	OBJECT	DESCRIPTION

AMOUNT DUE TO TRAVELER	
MILEAGE ALLOWANCE	\$ -
PARKING & OTHER EXP.	-
TOTAL DUE	\$ -

Resource Family COVID-19 FAQs

With the rising number of COVID-19 cases in Alaska, is OCS doing anything different around visitation and family contact? Are we going back to all digital visits? Why or why not? What are the current expectations around visits and face-to-face family contact?

- In-person family contact is preferred. With spikes in COVID-19 cases in certain areas, OCS has issued the following recommendations to limit exposure:
 - OCS supports virtual family contact if a child or family member is in quarantine or unable to participate in person for family contact.
 - OCS recommends family contact outdoors with appropriate precautions.
- OCS staff will advise if there are changes to the family contact. Questions regarding the status of in-person family contact should be routed to the caseworker.
- Travel for in-person family contact is managed on a case-by-case basis. Travel may depend on community restrictions related to COVID-19. Contact your caseworker if you have any questions.

When we are asked for placement of a child, will we be given any information about their COVID-19 exposure or status? Can we take a child to get tested for the virus if they show symptoms or might have been exposed in our home or community?

- Yes, the assigned Protective Services Specialist or OCS Nurse Consultant can provide you with information regarding a child's COVID-19 exposure or status when seeking placement in the home.
- Yes, COVID-19 testing is considered emergency and routine medical care when children show symptoms or were potentially exposed to COVID-19. Resource Families may take children placed in their home to get tested for COVID-19. Please consult with the assigned Protective Services Specialist or OCS Nurse Consultant before testing occurs.

With OCS offices being closed due to COVID-19 cases and workers in quarantine, what are the expectations about how often caseworker visits will happen? What are the safety precautions around those visits?

- In-person caseworker visits are the preferred method. However, with spikes in COVID-19 cases in certain areas, OCS has had to make modifications to caseworker visits. When this occurs, a Program Instruction (PI) is issued to workers in that region or office.
- OCS Protective Services Specialists can complete virtual caseworker visits via Zoom or other virtual platforms when OCS has had to limit in-person contact. In this case, there may be times when an OCS Protective Services Specialist would be required to do face-to-face contact with a child. The staff member would be required to wear approved Personal Protective Equipment (PPE), including a Medical-grade surgical mask, a face

shield, and disposable gloves. Before starting their work shift, OCS staff are self-monitoring for potential COVID symptoms.

What is the support available for foster families around childcare and respite? If a childcare center is shut down and a foster parent works, are there any resources or information supports a family can draw on?

- The OCS Childcare Hotline can assist with setting up childcare for families. During the pandemic, OCS has allowed for more flexibility regarding the use of unlicensed childcare facilities. Please contact the childcare team at 465-5648 or ocschildcare@alaska.gov with questions and assistance with locating alternative daycare as needed.

What kind of safety precautions are being taken in rural areas where rotational workers are coming in and out of the community?

- OCS caseworkers are directed to reach out to communities to find out about existing requirements before traveling and will adhere to the community testing and PPE requirements.

What are the expectations around school? Can foster parents make those decisions to return children to classroom teaching when schools open back up? Is this a good time to ask a child to be moved to a different school if it is easier for our family?

- The OCS caseworker, Guardian ad litem, biological parents, and foster parents should be included in decisions regarding a child's education. OCS is still required to follow the Every Student Succeeds Act, which requires children to maintain their 'home' school unless it is not in their best interest. If you feel it is in the best interest of the child in your home to change schools or schooling options (in-person, virtual, homeschool), please consult with the Protective Services Specialist.

What are the expectations for extracurricular activities, cultural, enrichment, and social activities?

- OCS follows the recommendations from the CDC regarding [travel](#), [sports](#), and [social activities](#). OCS does not support high-risk activities for children in care.
- Resource families are expected to use the Reasonable and Prudent Parent Standard when making decisions around these activities. Many cultural and social activities have gone virtual or are practicing social distancing and mask-wearing practices. COVID-19 presents special challenges if a child, foster family, or biological family member has a medical condition that requires extra precautions.
- If you are unsure if an activity is safe, contact the child's caseworker.

Is COVID impacting court hearings or planning for permanency? How are timelines for reunification or permanency being impacted by COVID?

- Most courts have returned to in-person hearings. The procedures are based on the specific judicial district.

Can children and youth receive the COVID vaccines? Are foster parents able to consent to the vaccination?

- See [CDC](#) and [State of Alaska](#) for current vaccine approval information.
- The COVID-19 vaccine is considered an elective immunization. This means that the child's parent or guardian must consent to the vaccine. Consent will need to come from the child's biological parents or OCS if parental rights have been terminated. OCS would notify the legal parties before consenting to the vaccination.

