



Kinship Caregiver Resource Guide



THE RIVERSIDE
PROJECT

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Introduction to Kinship Care

Extended relatives, such as grandparents, aunts/uncles, cousins, and even close friends (referred to as “fictive kin”) have always been a stabilizing force in the family system. These relationships have historically been, and are still today, a vital source of safety and permanency for children.

When the Department of Family and Protective Services (DFPS) finds evidence of child abuse and/or neglect, the court works alongside Child Protective Services (CPS) to place the child with a relative as opposed to a non-related foster care placement. Kinship care is an arrangement whereby relatives (or “fictive kin”) provide homes for children who have been separated from their birth parents. This arrangement may be short-term or the child may not be able to return home and need a new, permanent placement.

As you embark on providing a loving home for the child(ren) in your life, it’s important to keep a few things in mind:

- 1) The Riverside Project partners with DFPS and many child placing agencies, but we are not a licensing agency, nor are we qualified to offer legal advice. Your caseworkers, CPA workers, Ad Litem Attorney, CASA workers, etc., should always be your first line of support. We want to provide guidance and connect you to resources, but we are also committed to respecting the appropriate channels of communication.
- 2) Every child placed in kinship care has experienced trauma as a result of being removed from their home. They need caregivers who know how to bring healing through love, and their birth parents need communities who are willing to support, guide, and mentor them toward restoration and reunification.
- 3) There is always a degree of uncertainty in kinship care. Kinship caregivers take on this uncertainty so that the children don’t have to carry it alone. If you are hoping to eventually adopt, remember that no case is clear cut. Embrace the uncertainty as the heart of kinship care.
- 4) There is assistance available for kinship caregivers in the form of benefits from the state (monthly stipends, Medicaid coverage, mental health services, educational reimbursements, etc). Some of these benefits extend beyond adoption, meaning that they have long-term positive impacts.

- 5) In order to access these benefits, kinship caregivers must become licensed to foster (a process called “home verification”). Kinship caregivers are required to meet the same standards for home verification as non-kinship placements.

Types of Kinship Care

There are four main categories of kinship care in the state of Texas.

- 1) Informal Kinship Care: Children are cared for by a relative or family friend without the involvement of state authorities.
- 2) Voluntary Kinship Care: CPS oversees the temporary placement of a child with a relative or close family friend while the parent retains custody.
- 3) Formal Kinship Care: Children are removed from their parents’ custody by the state and placed in the care of a relative either temporarily or permanently.
- 4) Verified Formal Kinship Care: Children are removed from their parents’ custody by the state and placed in the care of a relative either temporarily or permanently. Kinship caregiver completes the home verification process to become a licensed foster home.

	Informal Kinship Care	Voluntary Kinship Care	Formal Kinship Care	Verified Formal Kinship Care
CPS involved		✓	✓	✓
Financial assistance provided by the state*			✓	✓
Agreement made between parents and caregivers**	✓	✓		
Medicaid eligible until 18				✓
College tuition assistance				✓
State funded mental health support				✓
Financial aid for child care				✓
Required to have certified babysitters				✓

*Financial assistance: formal kinship care (\$400/month), verified formal kinship care (\$639/month)

**Agreement made between parents/caregivers: informal kinship care ("Authorization Agreement for Nonparent Relative or Voluntary Caregiver"), CPS voluntary kinship caregiver (Parent Child Safety Placement)

The vast majority of children in kinship care are in an informal placement. This guide will provide information on how to become a verified kinship placement in order to access long-term benefits.

Our team is available to answer your questions, connect you to resources, and help you to build a healthy support system. This *Kinship Caregiver Resource Guide* is meant to serve as a first step in that process. We don't pretend to have all the answers, but we're happy to walk with you and connect you with others. Please reach out to us at hello@riversideproject.org if you have questions and/or concerns not addressed in this guide. For a list of local resources, visit www.riversideproject.org/resources.

Frequently Asked Questions

Kinship care can be complex and overwhelming. There is a steep learning curve when a child is welcomed into a new home, and many families have questions. We've provided general answers to the questions we most commonly hear from families. Answers to these questions will vary because every child's story is different.

Please utilize your caseworker or agency worker for specific questions and concerns. If you have a question that is not included in this list, reach out to us at hello@riversideproject.org and we'd be happy to help you find an answer.

Why might children be placed in formal kinship care?

Children are placed in formal kinship care by a judge in response to allegations of severe neglect, physical/emotional abuse, and/or sexual abuse.

What happens before a child is placed with me?

A court must decide that it is in the child's best interest for them to be placed in your care. Prior to placement, DFPS will complete a "home assessment," which is a tool that helps determine the safety of your home. DFPS will check the criminal history and abuse/neglect history of all the members in your home who are 14+ years old.

What are the long-term permanency options for children in kinship care?

- 1) Reunification with parents.
- 2) Permanent Managing Conservatorship (PMC): a judge appoints the relative or fictive kin to be legally responsible for the child, without adopting the child. Kinship caregivers with PMC are eligible for Post-Permanency Services.
- 3) Adoption. Kinship families who adopt will have access to Post-Adoption Services.

What is a child placing agency (CPA)?

Child placing agencies work in partnership with the Texas Department of Family and Protective Services (DFPS) to train parents and find homes for foster/adoptive children. While all CPAs must adhere to the State's minimum standards for operation, their specific policies and procedures may differ substantially.

What are the requirements for becoming licensed?

Requirements differ depending on the Child Placing Agency (CPA), but generally include the following:

- At least 21 years old
- Financially stable (some form of steady income—which can include child support payments, TANF, SSI, etc.)

- 1 bed and 40 sq. ft. per child in the home
- No more than 6 children in the home, including biological, adoptive, foster, and children for whom you provide childcare (exceptions may apply)
- Vaccinated pets
- High school diploma or GED (competency testing is available if neither of these requirements are met)
- Agency application: references, home study, fire safety inspections, CPR/First Aid certification, TB testing, background checks and fingerprinting for household members 14 years+
- Annual training hours
- Non-physical discipline agreement (no spanking)

How long does it take to become licensed?

The process could take a few months or up to an entire year, depending upon how quickly you move through the training and documentation. Because there are time constraints related to the legal timeline, it is in the best interest of the kinship caregiver to connect with a child placing agency and complete home verification as quickly as possible.

What is the legal process for children in formal kinship care?

After a child is placed in kinship care, DFPS will continue to assess what is in the best interest of the child (see “Navigating the Legal System” on page 15). Children may be reunited with their parents (usually following a “service plan,” whereby the parents demonstrate the ability to provide safe and nurturing care). Alternatively, an extended family member or close friend may be willing to assume responsibility for the child (kinship care). Typically, a child’s case will last 15-18 months, but any number of factors may prolong or abbreviate the process.

Do I have to be married or a stay-at-home parent to provide kinship care?

No. There is no requirement that a kinship caregiver be married or stay-at-home. However, as with any other parenting circumstance, arrangements must be made for taking children to daycare, school, medical/dental appointments, etc.

Do I have to own a home to become a kinship/adoptive parent?

No. There is no requirement that kinship caregivers own a home. However, moving to a new home during the licensing process requires an update to your home study. Children must have adequate living space as required by the DFPS Minimum Standards.

How much does it cost to become licensed?

There are miscellaneous costs associated with the licensing process (background checks, fingerprinting, TB testing, fire inspection, CPR certification, etc), however some CPAs may cover or reimburse these costs. Licensed families are given a

[monthly stipend](#) to assist with the costs of caring for a child. This stipend is based on their child's level of care (which is determined by the state). Children are also provided with medical and dental insurance through Medicaid and qualify for nutritional assistance through [WIC](#). Additional resources may be available depending upon the needs of the family (i.e. child care voucher, transportation, etc).

If I begin the licensing process and find out I am not eligible, will the child(ren) in my care be removed by CPS?

No. The home verification process is meant to approve families for additional support services. This should not be viewed as an exclusionary process. Basic background checks and a home assessment have already been completed in order to deem your home safe for the child(ren).

How much does it cost to adopt through kinship care?

The cost to adopt through kinship care is minimal. In many (but not all) cases, the adoptive family will qualify for a [State subsidy](#), which covers all legal fees, grants health care coverage, and offers ongoing monthly stipends.

What are the responsibilities of a kinship caregiver?

Kinship caregivers are expected to provide daily care, nurture, and support to the children in their home. This includes advocating for children in their schools and communities, acting as a positive role model, and helping children to learn the life skills necessary to thrive in adulthood.

Kinship caregivers are required to keep up-to-date documentation for the children, inform caseworkers of progress, adjustments, and any problems that may arise, including illnesses, accidents, or the need for therapeutic services.

What ongoing support or training is available for kinship caregivers?

There are several CPAs that work primarily with kinship families. In addition, some nonprofits and faith-based communities in Houston are committed to making sure families are well-supported and thriving. There are a growing number of support groups, parents' night outs, resource closets, Trust-Based Relational Intervention (TBRI) trainings, and other helpful resources. Email us (hello@riversideproject.org), and we'd be happy to get you connected to resources in your area. You can view a list of CPA comparisons at "Appendix C: Selecting a Child Placing Agency."

What is WIC and how does it work?

WIC is a federal government program that serves to safeguard the health of low-income pregnant, postpartum, and breastfeeding women, infants, and children up to age 5. WIC seeks to provide nutritious foods to supplement diets, information on healthy eating including breastfeeding promotion and support, and referrals to health care. All children currently in foster care under the age of 5 qualify for WIC.

Keep in mind the following when setting up WIC:

- The monthly household income disclosed on the WIC form is the *child's income*, which is the daily kinship reimbursement rate x 30 days per month (not the kinship caregiver income).
- WIC is most helpful when purchasing baby formula for infant placements.
- All infants are started on Similac Advance formula unless an alternative order is given by the pediatrician. If your child requires a different formula, be sure to get a prescription from your pediatrician.
- When the child turns 1 year old, additional food items may be covered by WIC, if needed (these items are brand and size-specific according to WIC guidelines).
- Call ahead to schedule your first WIC appointment and ask what documentation you will need to bring. Also, confirm whether you will need to bring the child to the first appointment.
- At your first appointment, you will receive a debit card with the child's prescription and a pin number. This card can be used for purchasing WIC-approved items.
- Always check to see if the child needs to be present for an appointment.
- Online training is required to be completed periodically. These can be completed online (write down your certificate number and take it to your next appointment).
- Most grocery stores accept WIC, but it's important to verify before purchasing.

Find your local WIC office [here](#).

What is NCI and how does it work?

NCI is a state-wide government program that offers financial aid for child care so that the cost doesn't prevent parents from attending work and/or school. This program is available to licensed kinship families, regardless of their income, if:

- The child is assessed at a Basic level of care.
- Both kinship caregivers work full-time or a single kinship caregiver works full-time (at least 40 hours/week).
- Child is not in adoptive placement (signed adoptive placement paperwork).

Not all child care facilities accept NCI payment. Click [here](#) for a list of NCI Providers and to apply for financial aid. There have been instances where the child care facility does not officially accept NCI, but they agree to accept the NCI negotiated rate from the State provided the kinship caregiver pays the difference between the NCI rate and normal tuition.

Licensed kinship caregivers are encouraged to apply as soon as possible as the approval process can take a few months.

Should I attend court hearings?

Unless discouraged by the child's Attorney Ad Litem, it is recommended that kinship caregivers attend court hearings, most importantly the status and permanency hearings. This allows kinship caregivers to stay updated on the child's case and provides an opportunity to advocate for the child.

Should it really be this hard?

In short, yes. Trauma that happens in relationship must be healed in relationship. And this is hard work. Progress often feels like two steps forward and one step back. As a kinship caregiver you play an important role, but it often takes a team of professionals to meet the needs of a child who has come from a hard place. Lean into your community, and do not be afraid to seek professional help from your agency, health care providers, and therapists.

Steps to Becoming Licensed

The licensing process can be confusing, and there is a lot to consider. Please review our recommended next steps below.

1. Select a child placing agency.

The city of Houston is home to a number of certified placing agencies (CPAs). All CPAs contract with the State of Texas and adhere to the State's Minimum Standards, but they may differ in their approach to licensing, training, and support.

There's no such thing as a perfect agency, but it's important to do some research and find the best fit for your family.

As you begin looking for a placing agency to guide you through this process, we recommend that you begin by reaching out to one or more of the agencies listed at Appendix C.

2. Begin the training and application process.

Once you have narrowed down your list of CPAs, register to attend an orientation class (or several). This class should give you a feel for the organization and help to answer your lingering questions.

Your agency will provide you with a list of trainings and documentation that will need to be completed during the licensing process. Be patient, take your time, and keep copies of all documentation!

3. Lean on your support system.

Kinship/adoptive families do not thrive in isolation. As you begin your journey, it's important to identify and enlist friends, family, and/or neighbors who can provide ongoing support for your family.

We highly recommend that the members of your support system get certified to babysit so that you can have the time and space to rest and receive ongoing training. Visit riversideproject.org/babysitting to see upcoming opportunities to certify babysitters and see Appendix B for our Family Profile.

4. Stay committed to the process.

After you submit your application and complete your trainings, you will be scheduled for a home study. Your agency will have further instructions on how to prepare.

Understand that there may be setbacks or heartaches along the way. If you had children in your home prior to beginning the process, then have conversations with them about love, patience, selflessness, and hospitality. Your entire family will be called upon to make room, both physically and emotionally. See page 24 for our list of Recommended Resources.

Questions to Consider When Choosing an Agency

We encourage kinship families to do their research before choosing an agency, and we recommend starting with the list of agencies who we have vetted and partnered with to serve kinship families (see Appendix C). To help you find the agency that is the best fit for your family, we have compiled the following list of questions:

General

1. Where are the agency's offices located? How far will you have to drive for trainings? Or are trainings offered online?
2. What is the agency's general reputation in the community? What do other kinship/adoptive families have to say about them?
3. What is the size and scope of the organization? (Typically, larger organizations have more flexible training options, but smaller organizations may be more attentive to your individual needs.)

Licensing

1. What are the agency's requirements for licensing?
2. What is the anticipated timeline for becoming a licensed kinship home?
3. How many families are currently licensed with the agency?
4. How many kinship families have worked with the agency?
5. Does the agency currently have any constraints in the licensing process (i.e. longer than normal review process, staff shortage, approval committee)?
6. Does the agency have an electronic system for documentation and/or submission of licensing requirements?
7. Are there any costs related to the licensing process?

Training

1. How much of the agency's training curriculum is Trauma-Informed?
2. Is childcare offered during annual training classes?
3. How much assistance does the agency provide with regard to annual training requirements?
4. Are any of the trainings available via livestream or online access?

Support

1. Is the agency staff trained in Trauma-Informed Care?
2. Are they willing to come to your home to offer assistance with severe behavioral challenges, if necessary?
3. How often do agency representatives attend court hearings, mediations, and/or permanency conferences?
4. How often does the agency conduct unannounced home visits?
5. Do they offer support groups or other types of support for families?
6. Do they offer post-adoption support?
7. What are the agency's requirements for babysitters and respite care providers? Will it be reasonably easy for you to get the childcare support you need?

Navigating the Legal System

The legal system pertaining to child welfare cases is complex, and there are many key players. Understanding the timeline and people involved in a child's case is beneficial for helping kinship caregivers advocate for the child in their care.

It is important to note that every child's story is different, and every legal case is different. The information provided below is intended to provide a general overview of legal cases within the Region 6 child welfare system. For more specific information, consult with your child's Attorney Ad Litem or your Caseworkers.

Key Terms:

- **Removal Hearing:** Emergency hearing wherein DFPS requests a court order to remove a child from parental custody; in certain circumstances may be conducted as a non-emergency removal hearing.
- **Show Cause (Adversary) Hearing:** Hearing wherein DFPS must prove necessity for removal of and continued conservatorship (custody) of a child; if standards are met, DFPS may be named temporary managing conservator (TMC) and additional orders may be issued (i.e. visitation, service plans, appointments of representatives, etc); occurs 14 days after removal hearing.
- **Status Hearing:** Hearing held to discuss the contents and execution of the family's service plan filed with the court; occurs within 60 days of DFPS being named TMC.
- **Permanency Hearing:** Hearing to discuss and review reasons child is in conservatorship, where child is placed, whether parents are able to provide safe care to the child, updates to child's medical care, other determinations regarding care, custody of the child; occurs within 180 days of DFPS being named TMC. Subsequent permanency hearings must be held no later than 120 days after initial permanency hearing, but usually occur more frequently.
- **Final Order:** An order issued by the court, either during a contested trial on the merits or a mediated settlement, that specifies the party's new legal relationship.
- **Temporary Managing Conservatorship (TMC):** When temporary custody of a child is given to a party that is not the child's biological parent (most often given to DFPS in child welfare cases).

- Permanent Managing Conservatorship (PMC): Permanent custody and legal responsibility for a child, but not adoption; may be given to someone other than a biological parent, including DFPS, a relative, close family friend, or a foster parent.
- Termination of Parental Rights (TRP): Outcome in a DFPS care where a parent and child no longer have a legal relationship. TRP is a prerequisite to adoption or other permanency outcomes for a child; may be voluntary or involuntary; typically occurs for both parents, but may also occur for only one.
- Family Reunification: Occurs when a child is returned to one or both parents and DFPS is dismissed as the child's conservator; may include monitored return before reunification.

Who is involved in the legal case?

- Judge: Elected official who presides over the courtroom and makes final decisions on the case (e.g., monitoring by child protective services, services plans for parents, permanency decisions, final orders, etc)
- Associate Judge: Appointed by the presiding judge, and is able to make rulings on cases and generally handle cases in the same manner as presiding judges.
- Attorney for DFPS: Legal representative for the Department of Family and Protective Services. May be a regional attorney employed by DFPS or the prosecuting attorney (District or County) in a particular jurisdiction. This representative brings charges of abuse/neglect before the court, provides evidence for the need for removal, and gives recommendations to the court for a permanency plan.
- Parents' Attorney: Legal representatives, typically court-appointed, for each of the child's parents. May also be hired by a parent. An attorney will be appointed for each parent, even if a parent is not involved in the case or has not yet been identified.
- Attorney Ad Litem (AAL): Legal representative for the child's best interest; may also serve as the child's Guardian Ad Litem.
- Guardian Ad Litem (GAL): May be a legal representative or a layperson who serves the same purpose as the Attorney Ad Litem, and also acts as an advocate for the child's best interests.

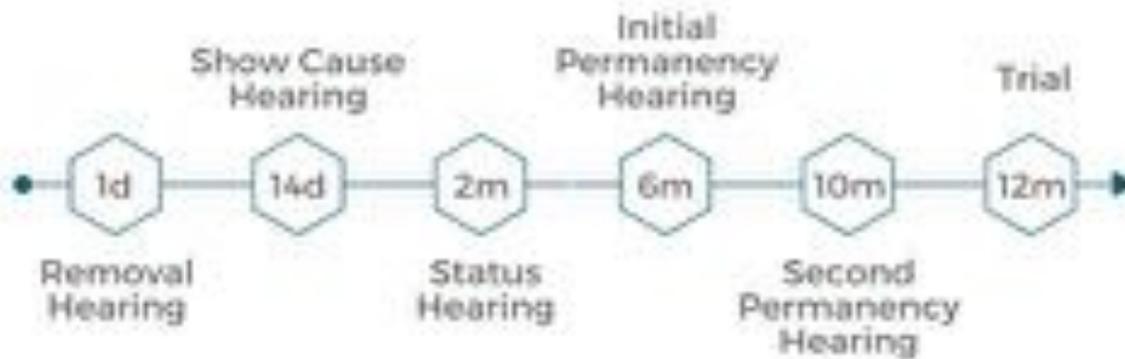
- Court Appointed Special Advocate (CASA): A trained volunteer appointed by the court in some (but not all) child welfare cases. This volunteer will report how the child is doing and give recommendations to the court regarding what is in the child's best interest. May also serve as a Guardian Ad Litem (see above).
- DFPS Caseworker: Employee of the Department of Family and Protective Services who may be investigating the reports of abuse/neglect or providing updated information about the case as a witness in a hearing. The caseworker is typically the most consistent point of contact for a child and/or foster family for information regarding a child's care.
- Child Placing Agency (CPA) Caseworker: Employee of a child placing agency contracted by the State who provides support, training, and oversight to ensure a foster family is in compliance with Minimum Standards. CPA caseworkers may also be called as a witness to provide additional information during a hearing.
- Court Administrator/Clerk: Handle administrative matters for judges and help schedule hearings for attorneys, among other duties.
- Bailiff: Law enforcement officer who ensure the safety in the courtroom
- Court reporter: Employee of the court who transcribes word-for-word information during hearing or trial.

What is the general timeline for a child's legal case?

This is an example of a timeline for an emergency placement that ends at trial. A trial results in a Final Order which may include the following potential outcomes:

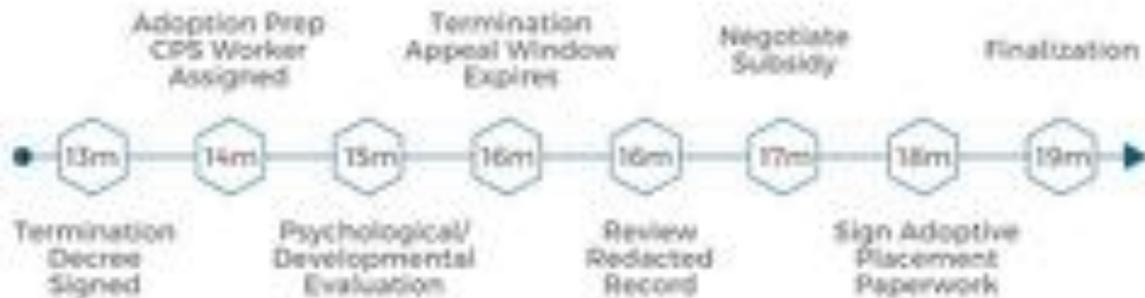
- Return of a child to a parent
- Managing conservatorship granted to a relative or other person
- Permanent managing conservatorship (PMC) granted to DFPS *without* termination of the parent-child relationship
- Permanent managing conservatorship (PMC) granted to DFPS *with* termination of the parent-child relationship

If termination of the parent-child relationship occurs at trial and DFPS is given permanent managing conservatorship (PMC), the court must hold a Permanency



Hearing 90 days after the final order and every 6 months thereafter to review the child's placement, permanency plan, and progress.

This is an example of a timeline in which trial resulted in termination of parent-child relationship and appointment of Permanent Managing Conservator to DFPS until adoption consummation by a foster parent.



Again, each case will vary in complexity and duration. Situations that may increase complexity and duration include but are not limited to Review and Selections (RAS), service plan extensions, appeals, relatives asking for placement later in the timeline, and DFPS understaffing.

Source: www.dfps.state.tx.us/handbooks/CPS/Files/CPS_pg_5400.asp

Resources:

- Child Protective Services Handbook (DFPS): www.dfps.state.tx.us/handbooks/CPS/default.asp
- Common Child Protective Services Acronyms: benchbook.texaschildrenscommission.gov/pdf/Bench%20Book%202016%20Common%20Acronyms%20and%20Abbreviations.pdf
- Placement Process Resource Guide (DFPS): www.dfps.state.tx.us/handbooks/CPS/Resource_Guides/Placement_Process_Resource_Guide.pdf
- What you should know about your Child Abuse, Neglect, or CPS Case (Texas Young Lawyers Association) [www.texasbar.com/AM/Template.cfm?Section=Free_Legal_Information2&Template=/CM/ContentDisplay.cfm&ContentID=36108#:~:text=The%20attorney%20ad%20litem%20will%20act%20as%20an%20advocate%20for,\(GAL\)%20for%20the%20child.](http://www.texasbar.com/AM/Template.cfm?Section=Free_Legal_Information2&Template=/CM/ContentDisplay.cfm&ContentID=36108#:~:text=The%20attorney%20ad%20litem%20will%20act%20as%20an%20advocate%20for,(GAL)%20for%20the%20child.)
- Foster Care Advocacy Center: www.fcactexas.org

Meeting the Medical Needs of Children in Kinship Care

Children who have experienced abuse, neglect, and/or trauma are likely to have medical needs. These needs may include physical injuries, developmental delays, undiagnosed or untreated illnesses, etc. Physical, emotional, and behavioral struggles are often associated with the trauma that occurs from being removed from biological parents. Each subsequent placement further exacerbates these struggles.

Additionally, children often change medical providers and insurance carriers when they enter kinship/foster care. This can lead to difficulty accessing a child's previous medical records, miscommunication between providers, lack of awareness of a child's medical needs, and disruptions in medical care.

One of the best ways to begin advocating for the child in your home is to begin communicating with their pediatrician. Let them know about the child's history, circumstances, and any concerns you have. Make sure they are able to access prior medical records. For infants and small children ask about their developmental milestones and get referrals as needed.

There are many great pediatricians in the Houston area, but not nearly enough who are accessible and well-informed to the needs of children in kinship/foster care. Because of their experience in caring for children who are impacted by the child welfare system and their access to a vast network of specialists, we recommend considering the following institutions at least for the child's initial evaluation. These providers can complete an initial assessment, facilitate necessary referrals, assist with medical records, and, when necessary, connect you to a primary care physician in your area.

Harris County Resources for Children and Adults



Integrated Healthcare Clinic

The Integrated Healthcare Clinic was established to make accessing healthcare easier for children and youth in the care of DFPS. The clinic offers medical, dental, and mental health care in one location. The clinic also offers assistance to families in navigating the DFPS system. For more information visit:

<https://resources.harriscountytexas.gov/clinic>



Contact: Adriane Anderson, MPA - Clinic Manager

Phone number: 832-927-6492

The Foster Care Clinic at Texas Children's Hospital is dedicated to providing care for children in foster care as well as those in at-risk social situations. Services include medical evaluations, support and education, case management and care coordination, mental health screens, and coordination of trauma informed care. For more information, visit:

<https://www.texaschildrens.org/departments/child-abuse-pediatrics-cap>

Contact: Katelan Janik, LMSW - Clinic Social Worker

Phone number: 832-824-6522



The CARE Clinic provides initial assessments as well as ongoing comprehensive medical and psychiatric care to child victims of abuse and neglect, as well as complete care for children living in kinship/foster care. The clinic provides case management and therapeutic services. For more information, visit:

<https://www.utphysicians.com/clinic/ut-physicians-care-clinic-tmc/>

Contact: Kristen Soudelier, LCSW - Manager of Social Work and Outreach

Phone number: 713-500-7513

For more information, including local pediatricians and specialists who serve children in the foster care system, please visit riversideproject.org/resources.

It Takes a Village

We encourage all kinship families to reach out to their immediate community for support. If you do not have a community, please consider joining one. We'd be happy to help you get connected!

Why is this so important? First and foremost, kinship and foster/adoptive families do not thrive in isolation. You will need some sort of support system. And by inviting others into your journey, you give them opportunities to serve you and your family.

The best places to begin building your support system are (1) your biological family members, (2) your faith community, or (3) your neighborhood. Not only do you get the support you need, but sharing the load fosters community and makes our city a better place to live. To that end, The Riverside Project is committed to helping your faith community to be your greatest advocate and support network. Email us at hello@riversideproject.org if you would like to connect us with your faith community. We would be happy to provide resources and tools for serving and supporting current and future kinship or foster/adoptive families.

For a list of local community resources including support groups, parent night out events, closets for tangible needs, etc, visit riversideproject.org/resources.

The Babysitting Collaborative

Becoming a certified foster care babysitter can be time-consuming, confusing, inconvenient, and expensive. Different agencies have different requirements, including background checks, fingerprinting, and CPR/First Aid certification. As a result, most kinship families operate on a very short supply of certified babysitters. This is a key indicator that kinship families are isolated and under-supported.

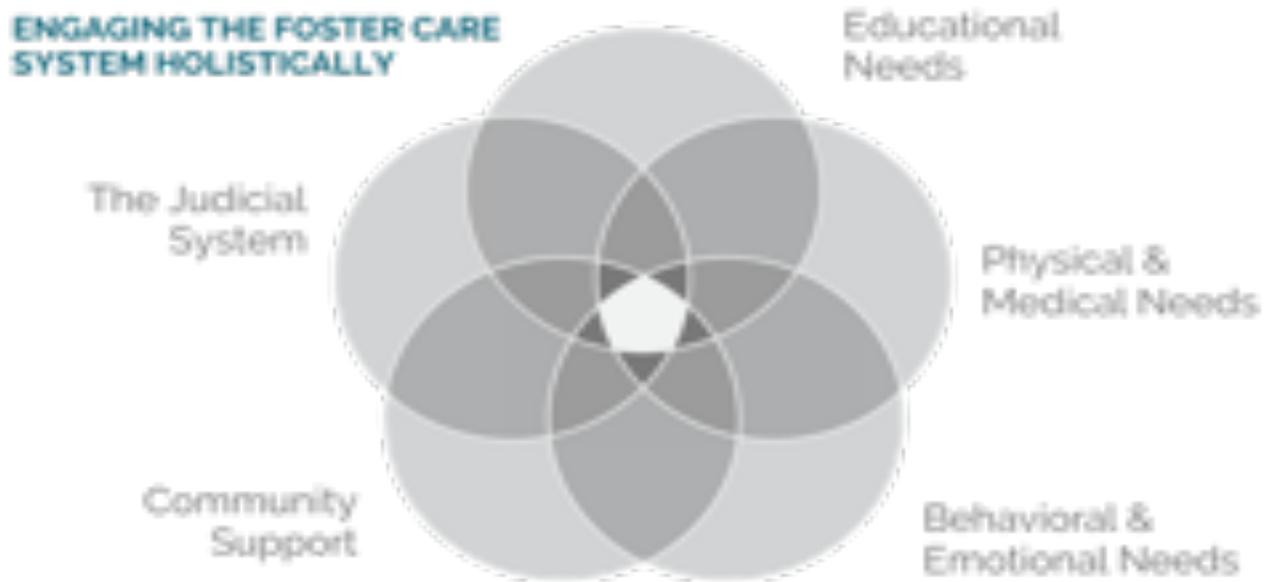
The Riverside Project has created a streamlined, multi-agency babysitter certification course for foster care babysitters. This one-day training course allows babysitters to complete most of the training and documentation necessary to serve and support foster children and families in their communities.

As you continue on in your journey toward becoming a licensed kinship caregiver, it's important to gather your team of support. Sending those you trust to become certified babysitters allows you to take time for rest, attend required trainings, and have options for childcare in case of an emergency.

For upcoming training dates and locations, a list of participating agencies, answers to frequently asked questions, or other details regarding our Babysitter Certification Trainings, please visit riversideproject.org/babysitting.

Recommended Resources

Houston has a variety of resources for children and families involved in the foster care system, but unfortunately, many struggle to access these resources. As a community, we can work together to make sure our neighbors are getting the help they need. In doing so, we believe Houston can become a city where children can thrive and families can heal.



Local Resources for Kinship Families

- [Child Advocates](#)
- [Monarch Family Services](#)
- [Houston Relatives as Parents](#)
- [JB Bobbitt Law Firm](#)
- [Arms Wide Adoption Services](#)

For a further list of local resources, visit www.riversideproject.org/resources.

Books

- [The Connected Child](#) by Karyn Purvis, Ph.D
- [The Connected Parent](#) by Karyn Purvis, Ph.D & Lisa Qualls
- [The Whole Brain Child](#) by Daniel J. Siegel, M.D. and Tina Payne Bryson, Ph.D
- [Integrative Parenting: Strategies for Raising Children Affected by Attachment Trauma](#) by Debra Wesselmann, Cathy Schweitzer, & Stefanie Armstrong

- [*The Body Keeps the Score*](#) by Bessel van der Kolk, M.D.
- [*Parenting From the Inside Out*](#) by Daniel J. Siegel, M.D. & Mary Hartzell, M.Ed.
- [*Twenty Things Adopted Kids Wish Their Adoptive Parents Knew*](#) by Sherrie Eldridge
- [*Dear Birthmother*](#) by Kathleen Silber
- [*In Their Own Voices*](#) by Rita J. Simon and Rhonda M Roorda

Additional Websites/Online Resources

- [Jason Johnson Blog](#)
- [Christian Alliance for Orphans- Resources](#)
- [Supporting Reunification as a Kinship Caregiver](#)
- [DFPS Kinship Manual](#)

Podcasts

- [The Riverside Project Podcast](#)
- [One Big Happy Home: The Empowered Parent Podcast](#)
- [CAFO: Foster Movement Podcast](#)
- [CAFO: More Than Enough Podcast](#)
- [The Honestly Adoption Podcast](#)
- [The Real Mom Podcast by Foster the Family](#)
- [Creating a Family Podcast](#)

Resources for Kids

- [A Grandfamily for Sullivan](#)
- [Living with Grandparents](#)
- [TBRI Books for Children](#)
- [A Terrible Thing Happened](#)
- [Book List for Children Who Have Experienced Sexual Abuse](#)

Resources for Informal Kinship Caregivers

- [Authorization Agreement for Voluntary Adult Caregiver](#) (must be notarized)
- [Monarch Family Services - Informal Kinship](#)
- [Your Texas Benefits Website](#)

Appendix A: Family Profile

Kinship caregivers do not thrive in isolation; they need friends and relatives who are willing to walk alongside them through the joys and sorrows and daily uncertainties. This worksheet is designed to (1) help families voice their needs and (2) help communities discover how best to serve and support. Feel free to utilize this resource as it works best for your community.

[Click to Download](#)

Or visit www.riversideproject.org/resources

Appendix B: Licensing Timeline



Appendix C: Selecting a Child Placing Agency

Choosing a child placing agency is an important first step for kinship caregivers to begin the foster parent licensing process. Each agency listed below is highly experienced with kinship placements. As you begin looking for a placing agency to guide you through this process, we recommend that you begin by reaching out to one or more of the agencies listed below.

Agency	Training Platforms	Financial Assistance	Languages Spoken	Trauma Informed Staff	Risk Assessment Considered	Additional Services	Contact
Americas Angels	Virtual, in-home, in-office	✓	English	✓	✓	Contracted therapy, skills assessments and psychiatric services.	Nflint@americas-angels.com
Arms Wide Adoption Services	Virtual	✓	English, Spanish	✓	✓	Post-Adopt & Post-Permanency Support	cshephard@armswide.org
Arrow Child and Family Services	Virtual		English	✓		Behavioral Health, Treatment Foster Care	kari.dodson@arrow.org
Azleway	Virtual In-home		English, Spanish	✓	✓	Referrals for behavioral and post-adopt services	Keitha.Douglas@azleway.org
DePelchin Children's Center	Virtual	✓	English	✓		Integrated mental health services	gettingstarted@depelchin.org
Family to Family Adoptions	Virtual	✓	English	✓	✓	Referral to services	Stephanie@fam2fam.org
Grace Manor	Virtual, in-home, in-office	✓	English, Spanish	✓	✓	24/7 Crisis Intervention & Behavioral Support, Post-permanency Support	traci@gracemanor.us

Agency	Training Platforms	Financial Assistance	Languages Spoken	Trauma Informed Staff	Risk Assessment Considered	Additional Services	Contact
Houston Strong Children's Services	Virtual, in-home, in-office	✓	English	✓	✓	Crisis Intervention 24/7, community events	gtaylor@houstonstrongcpa.org
Kidz Thrive	Virtual, in-home, in-office	✓	English, Spanish	✓	✓	Behavioral Support Referrals, Adoption process support	info@kidzthrive.com
Lifeline Children and Family Services	Virtual, in-home	✓	English, Spanish	✓	✓	Mental health referrals, intensive case management, community resources & crisis intervention	lifeline@lifelinecfs.org
Monarch Family Services	Virtual, in-home	✓	English, Spanish	✓	✓	Psychological & Post-permanency (adopt & PMC) services	valeriejacksonphd@monarchfamilyservices.org
Parental Guidance Adoptions and Family Services	Virtual, in-home	✓	English, Spanish	✓	✓	Post adopt referrals	ldsmith@pgadoptions.org
Pathways Youth and Family Services	Virtual	✓	English, Spanish	✓	✓	Behavioral Health	sbatson@pathway.org
Presbyterian Children's Homes and Services	Virtual	✓	English	✓	✓	Post-adopt services, yearly events like back to school, Christmas gifts	gabrielle.smith@pchas.org
The Sanctuary Foster Care Services	Virtual		English	✓	✓	In-home crisis intervention, post-adopt support, in-agency therapy	contact@sanctuaryfostercare.org

Additional Information

Financial Assistance: There are some costs associated with preparing your home for verification. These may include purchasing fire extinguishers or fire escape ladders, gas inspection, CPR/First Aid certification, TB tests, etc. Some agencies cover or provide assistance to help with these costs. Contact the agency to find out what type of financial assistance (if any) is offered.

Trauma-Informed Staff: Children (and adults) who have experienced trauma need compassionate professionals and caregivers who understand how trauma impacts a child's development. Organizations who utilize trauma-informed principles can help families access needed resources to help their children to heal. These resources may include trauma-informed counseling/therapy, parent coaching, in-home crisis intervention, videos, books, podcasts, and more.

Risk Assessments Considered: Risk assessments may be requested by an agency for an applicant who has a criminal history. These assessments are completed to determine if an applicant may still be eligible for licensure. Assessments may take 2-4 months to be processed. Some agencies consider applicants who will require a risk assessment to be completed, and some agencies do not. Some will consider it on a case-by-case basis.

Additional Services: Many agencies offer additional programs and services that are useful to the children and families they serve. These may include post-adoption services, behavioral health programs, etc. Contact the agency for more information about the additional services they provide.