Reasonable and Prudent Parent Standard (RPPS) FAQs

*FAQs refer to minors only, not adults over 18 years of age and recommended

1. Can residential facilities still use a dress code or uniforms?
   Yes, residential facilities just like schools or other facilities may implement the use of a dress code or uniforms. However, agencies will still use the child’s clothing allowance to provide a minimum of five (5) non-uniform outfits, in addition to necessary sleepwear, outerwear, etc., per the agreement.

2. Can agencies have liability insurance policies that do not allow the use of certain recreational equipment, such as all-terrain vehicles (ATVs), trampolines, etc.?
   Yes. Foster parents are not required to have certain recreational vehicles or equipment. However, in regards to the recreational equipment the foster parents do own, the RPPS should be implemented to allow the children to have opportunities for equal access to the equipment, similar to the foster parent’s birth children or other similar peer’s access.

3. What is the expectation for supervision while a youth is hunting and handling a firearm or a bow?
   It is expected that the caregiver follow all applicable state laws regarding handgun education and supervision. It is also expected that the caregiver implement use of the RPPS in decision making to ensure a sound decision is made regarding a youth hunting and their supervision doing so.

4. If a caregiver decides to allow a child to participate in an activity that both the PCP agency staff and DCBS worker do not agree with, what happens?
   If the agency and DCBS worker disagree with a foster parent’s decision, the decision the caregiver has made is likely not a reasonable or prudent decision. This should inform the agency’s assessment of the family’s ability to parent a child in care. Action, such as making a child abuse or neglect report or calling the police, may be appropriate if the child is immediately at risk.

5. Can agencies have policies and procedures that conflict with RPPS?
   No, agencies cannot have blanket policies related to normalcy activities for children, such as owning a cell phone, having a social media account, etc. These decisions should be made on a case by case basis, based on the child’s developmental level, behaviors, diagnosis, progress in the program, etc.

6. Can agencies restrict activities on the supervision plan?
   Yes, agencies may continue to utilize supervision plans to ensure the safety of children based on the child’s developmental level, behaviors, diagnosis, progress in the program, etc. Any restrictions should be made on a case by case basis.
7. **What is the caregiver’s liability if they implement the RPPS and a child gets hurt?**

Under SB 174, implementation expected July 2016, caregivers will be immune from liability when a child is hurt as a result of a RPPS decision, **as long as the RPPS is implemented appropriately, taking into account the child’s chronological age, development level and their cognitive, emotional, physical and behavioral capabilities.**

8. **What decisions do not fall under RPPS and cannot be made by the caretaker?**

- Discipline Policy
- Court ordered visitation
- Medical approvals as stated in policy
- Return child without court approval
- Changing schools pursuant to policy
- Drastic change of child’s appearance – tattoos, body piercings, etc.
- Medications – psychotropic, birth control
- Changing their religion
- Court orders
- Birth parent and sibling visits
- Permanency decisions
- Pregnancy terminations
- Surgery

9. **Where can DCBS policy on the RPPS be found?**

DCBS RPPS policy, SOP 4.30 can be found at the address below:

[http://manuals.sp.chfs.ky.gov/chapter4/12/Pages/430NormalcyforChildrenandYouthinOutOfHomeCare.aspx](http://manuals.sp.chfs.ky.gov/chapter4/12/Pages/430NormalcyforChildrenandYouthinOutOfHomeCare.aspx)

10. **Can new foster parents take the RPPS Web-based training, developed for existing foster parents, as part of their pre-service training?**

Yes, however, this is recommended to be given in a group setting where dialog can occur and questions can be explored, to assist in understanding in the implementation of the RPPS.

11. **How do caregivers disclose information to babysitters without violating HIPAA?**

Caregivers can disclose the necessities of caring for their child, such as the child needs to take a certain medication at a certain time, without elaborating on what the medication is, the child’s diagnosis, etc. Only information relevant to the care of the child during the specified period should be disclosed.
12. **Can agencies implement an age for babysitters, beyond what the state has stipulated, such as babysitters must be 21 years of age to babysit children in care?**

DCBS has stipulated that babysitters for therapeutically leveled and medically complex children must be over the age of 18 years old. However, this is a minimum standard only. Agencies can require there to be further stipulations regarding babysitters. However, agencies should not set blanket policies that a teen in care cannot babysit younger children, as this violates expectations regarding normalcy.

13. **Can guidelines be set to restrict a child’s access to activities during the first 30 days in a new placement?**

Yes, it is reasonable to have a period to get to know a child before making a reasonable and prudent parenting decision regarding that child.

14. **Can foster parents post pictures of the child to social media accounts?**

Foster parents should make this decision on a case by case basis to determine if posting the child’s picture to a social media account is promoting normalcy for the child. The child should not be identified as a foster child and privacy and security should be considered. Pictures should not be posted that would be embarrassing to the child or the birth family.

15. **How do treatment decisions affect RPPS decisions?**

The caregiver should always consider treatment decisions that have been made when applying the Reasonable and Prudent Parent Standard, along with considering all factors unique to the child. For example, children that are at risk for abusing substances may not be allowed to have access to aerosol cans, such as hairspray cans.

16. **Blanket policies are not allowed. However, what if the rule or policy is related to treatment?**

If a policy is related to the treatment of all of the children in a facility it may be maintained to promote safety, as long as it does not inhibit a caregiver’s ability to consider and make a RPPS decision. Treatment plans or policies should be written in such a way that restrictions are clearly related to treatment needs and based on the youth’s developmental level, behaviors, diagnosis, progress in the program, etc. For example, a facility requiring all level V children to be supervised 24/7 would be a reasonable decision based on the level of care the children require.

17. **Can a foster parent sign Individual Education Plans (IEPs) or other educational related documents?**

The majority of educational specific documents, such as enrollment documents or IEPs are going to require a guardian signature, unless the county school board allows the foster parent to sign for enrollment or the foster parent is appointed as the educational surrogate for IEPs. RPPS in regards to education is going to apply to extracurricular activities, such as the foster parent signing for field trips, clubs, sports, etc.
18. Do residential facilities have to have someone on site 24/7 to make RPPS decisions?
   Yes, residential facilities must have a designated official on-site 24/7 to make RPPS decisions. It is also important to train all residential staff on RPPS to ensure a caregiver is always available to make a parenting decision. However, it may be appropriate to have a supervisor as the designated official or for staff to consult with more senior staff before making a parenting decision.

19. Do child-placing agencies have to have a designated official to make RPPS decisions?
   Child-placing agencies do not have to have a designated official, as foster parents should be making parenting decisions. However, it is recommended that child-placing staff with direct contact with foster parents complete RPPS training, in order to be able to consult with foster parents as needed for decisions making.

20. Can caregiver make an RPPS decision to get birth control for a child, if child is 16 and sexually active?
   No, any medical decision-making is a non-negotiable and does not fall under a RPPS decision making. The caregiver would speak to the Social Service Worker (SSW) in this situation about their concerns.

21. Can children in residential facilities attend holiday events offsite?
   Yes, if the resident wants to attend and this supports normalcy.

22. If a child earns an award or special recognition in a residential facility can the child be featured in the agency’s newsletter?
   Yes, if the resident wants to be featured and this is a normalcy activity for the youth and not used for agency publicity purposes.

23. If residents draw pictures for staff can they post the pictures in their office?
   Yes, if the child’s first name is the only name used, such that confidentiality is not violated.