Alliance CaRES

QUARTERLY REPORT
FIRST QUARTER
OCTOBER-DECEMBER 2023

SUMMARY

The Alliance CaRES team walks alongside caregivers at all points of their journey: with kin receiving unexpected placement of a child, with prospective foster parents inquiring about licensure until the first time a child is placed in their home, and through the ongoing joys and challenges of caring for children and partnering with their families and the child welfare team. CaRES offers a variety of individual and group supports and connections, including the engaging, skill-building training for which the Alliance is known.

This report is our chance to share updates on the CaRES program's scope and impact including successes, challenges, recommendations, and details of our support to caregivers during our second quarter of 2023-2024 (October 2023-December 2023).

The CaRES program's support provides individual outreach to caregivers and prospective caregivers at specific points. In addition, we offer topic-based discussion support groups across a wide variety of subjects (see Appendix B). We also host innovative special events and community-based support groups with remote and in-person options, and partner with community organizations.

The CaRES team is proud to run a program that makes a difference to caregivers across the state. By offering genuine and robust support opportunities, we impact caregiver satisfaction and retention, and improve outcomes for children in care. We are grateful to all the partners, stakeholders, and team members who are helping guide and inform our work. Together, our small steps lead to big changes.

Alliance CaRES
FY24 2nd Quarter Snapshot
Notable Achievements

Across the state, **1009** current caregivers received supportive contacts from CaRES program staff.

903 caregivers participated in special events.

119 caregivers participated in topic-based support groups with training.

133 prospective caregivers received individual supportive contacts.

There were **343** caregivers who attended a local community group representing every region in the state.

CARES
PROGRAM ELEMENTS

The Alliance CaRES Program is made up of six elements, listed below and detailed in Appendix A. Each section of this report details the relevant successes, challenges, trends, and data, as well as sharing quotes and stories from the CaRES Program.

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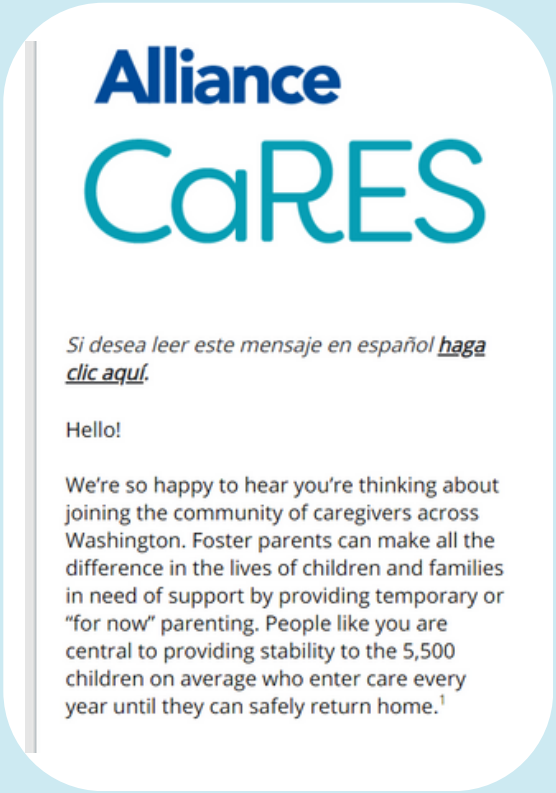
1) SUPPORT THROUGH THE LICENSURE PROCESS

Prospective caregivers can find the licensure process confusing and intimidating. We send clarifying information to all those who inquire about licensure. CaRES staff call all prospective kinship caregivers for individual support. CaRES staff also call all those who inquire about foster care who live within the top 25 highest removal ZIP codes. We offer answers to licensing process questions, a monthly evening session focused on kinship licensing, as well as a "While You Wait" support group for those who are preparing to welcome their first placed child.

922 welcome emails were sent this quarter by the CaRES team to prospective caregivers providing guidance and offering resources.



Alliance CaRES

Si desea leer este mensaje en español ***haga clic aquí****.*

Hello!

We're so happy to hear you're thinking about joining the community of caregivers across Washington. Foster parents can make all the difference in the lives of children and families in need of support by providing temporary or "for now" parenting. People like you are central to providing stability to the 5,500 children on average who enter care every year until they can safely return home.[1]

SUPPORT THROUGH THE LICENSURE PROCESS

CONTINUED

This quarter, while a total of **922** prospective foster parents received a welcome email detailing next steps, **789** received a general welcome email, and **133** (**81** from high removal ZIP code areas and **52** who identified as prospective kinship caregivers) received specific emails as well as a personal phone call. These individual contacts were based on our contracted engagement strategy. There were an additional **108** supportive contacts to prospective caregivers this quarter.

The following are two examples of the type of support a prelicensure call provides from this quarter:

"Talked with I. regarding an ICPC she is working on to get she partner's niece in Alaska. I. had questions on the timeframe for licensure, how ICPCs work and what her next steps are. She has already started CCT. I explained what ICPCs are and how states work together to place children in homes not in the same state as the case. We discussed the licensing process, timeframe and how homes are licensed. I also let her know the process of being assigned a licensor and what to expect when they come out to license her home. I. asked about the CaRES program and how we support caregivers. I also recommended she find a local support group to join as the social worker in Alaska recommended she have a mentor and good support around her before and during placement."

"Spoke with M. He had a lot of questions in general about becoming a respite caregiver, what to expect, what the home study process looks like, types of kids he may have coming through his home... I walked him through the licensing process and sent him an email with the DCYF webpage link as well as the Journey to Licensure brochure. I also discussed why kids may be placed in a respite/short term care home and behaviors that could come up. I explained the role of the licensor, placement coordinator and social worker. M is excited to begin and said he would reach out if he has any further questions."

SUPPORT THROUGH THE LICENSURE PROCESS CONTINUED

TRENDS, CHALLENGES, AND RECOMMENDATIONS

Licensure for Prospective Kin

We were pleased to increasingly hear kin caregivers report that they were in the licensing process or already received an initial license. Kinship license inquiries often focus on questions about getting placement of a child that the family heard may be coming into care rather than questions about a child-specific license for a current placement. These family members continue to request KCT and child-specific license options for potential placements.

Kinship Caregivers Confusion about Guardianship and Licensure

Again this quarter, kinship caregivers are reaching out asking about the option to become licensed after getting "emergency guardianship." Mentors are reporting that kin who took placement as temporary guardians are now struggling to find the necessary resources to care for the children placed in their homes. They believe that since the children were placed there through CPS, a child-specific license will lead to increased support. These caregivers are very dismayed to find out that temporary guardianship does not allow for the monthly foster stipend. More clarity from workers would be helpful to address this ongoing issue.

Licensing Clarity

Prospective caregivers seem to find WaCAP and the licensing process relatively easy. The requests for support with licensing are minimal and are most often related to caregiver's confusion about the steps between completing CCT and submitting the licensing application. The most common challenge is related to prospective caregivers' expectations of adoption. To help prospective caregivers better understand the goals of out-of-home placement, we have added a section about reunification and permanency to our "While You Wait" topic support group.

2) SUPPORT AT KEY POINTS

CaRES Mentors reach out to all caregivers at those moments when we know support is most needed, including at the time of licensure, at the time of first placement of a child into a home, when kinship placements occur, as well as one month after kinship placements and six months after licensure. These calls provide community resources, advice, and emotional support. We work to ensure that caregivers will build an ongoing connection with their local Mentor so they have someone to call as issues arise.

Over the last quarter, the CaRES Mentors called every foster and kin caregiver with a new placement, and all newly licensed caregivers for a total of **585**, per our engagement strategy. Of those calls, 91% were to kinship caregivers, 6% were to newly licensed caregivers, and 3% were to caregivers with their first placement.

We think it is important to highlight that there have also been **424** additional contacts (individual emails, calls, and texts) to support current caregivers in this quarter (including calls to caregivers at one month post kinship and six months post licensure). These contacts show that we are successfully building ongoing relationships with caregivers so that they seek more support when issues arise. These contacts are one way we measure our program's success.

SUPPORT AT KEY POINTS
CONTINUED

KINSHIP SUCCESS STORIES

Every quarter we report on examples of our caregiver support by sharing comments, testimonials, notes from Mentor calls, and examples. Here are a few from this quarter to illustrate the impact of our Mentors' support.

The following are pulled from Mentors' notes describing successful kinship support calls:

- *“Called and spoke with V she said the kids were placed [approx. 2 weeks prior]. Worker said she would order beds from Amazon but there are not beds yet and she has not received a reply in regards to when she might get them. She does not have workers email so I looked that up and gave her the workers email and supervisors. Encouraged her to send an email to both asking when she can expect the beds. She also said that the GAL told her she is supposed to be getting payment but she has not heard anything about that., I encouraged V to include that in her email. Emailed kinship brochure, who to contact link, and the Its All Relative flyer.”*

- *“The mentor contacted the caregiver, who shared that she's caring for her 4-year-old niece. She said things were going well. She's just finishing up the last few steps to become licensed. The caregiver asked about if she would be able to get a copy of the parent's medical history. The mentor shared that the caregiver's SW should review the discovery process with her. So she'll be aware of what information she will likely receive. The caregiver and mentor talked about the difference between guardianship and adoption. The caregiver mentioned she's planning to petition for guardianship after the 6- month mark has passed.”*

- *“Talked to M. Everything is going fine in terms of having what they need, granddaughter is doing well, their only frustration/concern is with the system and how slowly everything moves, they've been waiting for some clarity for 10 months and were recently told by the department that "we're just beginning." Offered to send kinship email again but she declined, said they have everything they need. Offered to text my contact info in case she ever just wants to chat/vent/learn more about support groups, etc. and she said she would welcome that. Followed up with text.”*

SUPPORT AT KEY POINTS
CONTINUED

FOSTER PARENT SUCCESS STORIES

The following are pulled from Mentors' notes describing successful newly licensed, follow up, and referral calls to foster parents:

- *"Spoke to S. Family is licensed for two kiddos 0-5 yrs old. They hope to adopt from foster care but understand reunification or permanency with relatives is the goal. They have one 6 yr old bio son and want to keep him the oldest child in the home. I shared info about providing respite care, and what questions to ask before agreeing to placement. Answered questions about general permanency timelines, ICW, foster care home study vs adoption home study, Northwest Adoption Exchange, and the general logistics of adding another kiddo to your home. Sent a welcome text with local placement desk contact info and sent the newly licensed email with newly licensed brochure." (A newly licensed contact)*

- *"We talked for about an hour on the phone about his current placement, 14-year-old non-binary youth. Most of our conversation was about school, youth has been struggling, not making friends, being bullied. Youth is not always compliant with going to school, attendance is decreasing. Discussed advantages and disadvantages of changing schools vs. staying at the current school, facing down the bully, etc. Shared local options that were new to J. in terms of potential school placements that had worked well for some of my kids who were in similar situations. At the conclusion of our conversation, J. had made a plan to look into these options." (A post-training follow up contact)*

- *"Called J. after getting a referral. S. and J. have 2 girls placed with them, they have been with them for 5 months. Tomorrow they have court to determine if the girls are eligible for ICWA, but social worker is pushing them to request guardianship if adoption is not a possibility. J. and S. love the girls, but they are not sure if they are the best placement for them as they feel they have not really bonded yet. I talked through some of J's concerns, told her of my story when we adopted our daughter (very similar feelings to what they are feeling) and let them know if is perfectly acceptable to discuss their concerns with their agency and/or social worker. J. said she may have S. call me later as he is the one who is really concerned about the lack of bonding they have with the girls." (SW referral contact)*

SUPPORT AT KEY POINTS
CONTINUED

TRENDS, CHALLENGES, AND RECOMMENDATIONS

Placement Challenges
We are hearing increasing desperation from kinship families who report feeling unprepared and unsupported when taking a relative placement. They express frustration with inadequate resources for material goods, transportation, and childcare and concern that when they voice needs children will be removed from their care. Kin caregivers are requesting that children come to placement with carseats, diapers, supplies, and an automatic enrollment in TANF. They have many unmet needs and are reporting increasing challenges that lead to disruption of placements.

Both kin and foster caregivers are also reporting significant concerns with rapid returns home. There has been a marked increase in kin telling Mentors that the youth has been returned home during the initial contact. In some cases, kin express dismay that the home environment is unsafe or that they are losing contact with their relative due to DCYF involvement. Foster parents express similar concerns about a lack of transition period for children and youth who have lived in the same foster home for several years. While they celebrate reunification, the speed at which the change takes places does not acknowledge the children or youth's bond with the family and community.

Data Challenges for Kinship Contacts
We continue to experience significant problems with DCYF's kinship caregiver data that allows our Mentors to contact kin to offer support. Again this quarter about a third of the DCYF provided kin phone numbers and email addresses were incorrect or missing. Many kinship caregivers express gratitude for the support and resources CaRES offers and incorrect contact information is a barrier to providing support to those kinship caregivers. We are eager to find more accurate data from DCYF.

3) DIFFERENT TYPES OF SUPPORT GROUPS

CaRES has **26** online topic-based support group options for facilitated discussion and problem solving with other caregivers. These confer training credit and are listed in Appendix B. Community-based groups offer the opportunity for state-wide connections with caregivers with shared experiences and local in-person supportive connections with other caregivers. Some of these include trainings for credit, depending on the interest of the group. Our community-based groups include "walk and talks," coffee meet-ups, park playdates, and more. Our drop-In groups are online informal groups that give caregivers the chance to connect as the need arises around topics like integrating TBRI principles into their caregiving.

DIFFERENT TYPES OF SUPPORT GROUPS
CONTINUED

TOPIC SUPPORT GROUPS

Over the last quarter, CaRES offered **33** Topic Support Groups covering a range of topics. In the last quarter support groups were attended by a total of **119** people. (As a reminder, these are not necessarily 119 unique participants as caregivers may take multiple sessions of a group or engage with multiple groups.)

DIFFERENT TYPES OF SUPPORT GROUPS
CONTINUED

FEEDBACK FROM TOPIC SUPPORT GROUPS

The response from attendees has been extremely positive. This quarter we received 11 surveys from participants in 7 support groups. Participants were asked to rate several statements on a scale of 1 (strongly disagree) to 5 (strongly agree). Overall, caregivers were satisfied with the group they attended (4.2). Participants would recommend the group to others (4.5) and plan to attend more support groups in the future (4.3). They feel they received useful resources and information from the group (4.5). This quarter, caregivers' average rating of the item "I feel better able to cope with caregiving challenges after attending" was lower (3.6) compared to last quarter (4.8). When asked if they were able to make connections with other caregivers during the group, the average rating was 3.9, which may be a function of low attendance in some groups. Participants indicated the online discussion format worked for them (4.5). On a scale of 1 (very poor) to 5 (excellent), participants' self-reports of their skills related to the support group topic averaged 3.2 prior to the group and 4.2 after attending.

When asked what was most useful about the support group they attended, nine participants responded, highlighting their appreciation for connecting with other caregivers, having caregivers validate and share their experiences, and the support they received from the group. Participants also appreciated the facilitator(s), who were welcoming, understanding, and helped in getting questions answered. Comments included:

- *Validation through shared similar experiences. Hearing others' advice a different perspective for coping in my situation.*
- *Hearing that I'm not alone, learning how to navigate the adoption vs guardianship questions. I liked how the leader asked open questions, gave a chance for input, then presented some web links and info.*
- *Safe space, lots of valuable experiences scattered between [the facilitators].*

DIFFERENT TYPES OF SUPPORT GROUPS
CONTINUED

FEEDBACK FROM TOPIC SUPPORT GROUPS, CONTINUED

When asked to share their thoughts about the accessibility, equity, and inclusion of the support group they attended, comments included:

- *Everyone respects each other's backgrounds, thoughts.*
- *I was thankful someone was in the group to speak to her personal experience as an adult who has been adopted.*
- *Everyone was welcome and included. Every voice felt valued.*
- *Everyone is extremely inclusive.*

Attendees were also asked what improvements could be made to the support group they attended. Of the eight participants who answered this question, five did not have any suggestions. Suggestions included:

- *An outline of presentation by screen share to print and make notes. A biography of resources.*
- *Longer time for more questions/concerns/connection.*
- *All the emails about specific groups could include the time it starts. So many start at different times, so it was hard to hunt down that information.*

When asked to share their thoughts about the CaRES program, eight caregivers highlighted their appreciation for the program. Two caregivers indicated their appreciation for virtual groups, as it is easier for them to attend. Other caregiver responses included:

- *I appreciate CaRES and would love a class that explains the court process. I have been a foster parent for 9 years and it was not until this year that I learned that as a foster parent, I am not considered when they talk about "all parties".*
- *I'm new, but so far, so good. Still looking for information about the difference between guardianship and adoption.*
- *I was really relieved to connect with [facilitator] as I felt unsure of how the process worked prior to talking with her.*
- *Love love love.*
- *I really get the most out of support groups.*

DIFFERENT TYPES OF SUPPORT GROUPS
CONTINUED

TOPIC SUPPORT GROUPS: BOOK CLUBS

The Book Club portion of the program are consistently well attended and are now considered a flagship of the Alliance CaRES Program. The options continue to grow, now with five books: "Dancing With a Porcupine," "FASD: Trying Differently Rather Than Harder," "TBRI: The Connected Child", "TBRI: The Connected Parent," and the newly launched advanced book club, "TBRI: The Connected Therapist, Relating Through the Senses."

Book clubs are an excellent way for caregivers to build connection while learning new principles. They are also a wonderful tool to go a little deeper with challenging topics such as attachment issues, long-term outcomes, and self-care while caregiving. Our long-standing book club, "Dancing With a Porcupine" offers veteran caregivers a unique way to share their experiences and build self-care skills.

DIFFERENT TYPES OF SUPPORT GROUPS
CONTINUED

COMMUNITY GROUPS

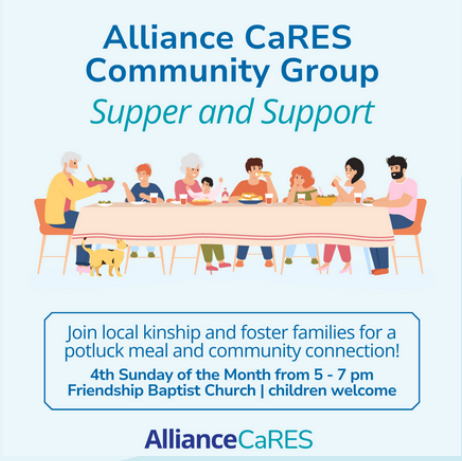
This quarter, Community Groups were attended by a total of **343** people with CaRES offering **19** groups across the state in **10** cities representing every region. There were multiple groups in Regions 1 and 2 to ensure that caregivers throughout those large regions had options near them.

Events this quarter around the state

DIFFERENT TYPES OF SUPPORT GROUPS
CONTINUED

COMMUNITY GROUPS, CONTINUED

CaRES Community Groups are local or digital groups that give caregivers a place to connect, share their experiences, explore their community, and have some fun! Digital Community Groups are hosted by CaRES staff or Mentors while the popular local, in-person Community Groups are hosted by our Community Connectors. Community Connectors have hosted a wide range of creative gatherings such as stop & shop events, caregiver walk-and-talks, and local seasonal activities. We look forward to adding more fun connection options in the coming months!



DIFFERENT TYPES OF SUPPORT GROUPS
CONTINUED

TRENDS, CHALLENGES, AND RECOMMENDATIONS

Attendance Challenges

The CaRES team is continuing to struggle with attendance for our events. Despite ongoing requests for support groups that provide training hours, ways to connect, and in-person gatherings, we are not getting high attendance at the events we organize. We have tried different types of activities, a wide variety of training topics, offering child care, providing food, and direct invitations from Mentors. Despite these diverse efforts we continue to see low turnout. We have been speaking to partner organizations and other community organizations who report the same response from caregivers to their events. The best attended events include giveaways of tangible goods, which our budget does not allow for. We will continue offering both remote and in-person events but we believe the landscape has shifted dramatically in this post-Covid time and in-person events do not have the pull they once did on the Western side of the state, in particular. In addition, as more and more caregivers are kin, who are not required to get training hours, attendance for support groups with training credit is lower.

Contract and Program Revision Recommendations

Based on the ongoing attendance challenges, we believe that kin and foster caregivers may benefit from different pathways for engagement and support. Foster parents express a desire to be connected to their local communities and receive training credit. Kin caregivers seem to prefer individual support with opportunities to get timely resources directly related to their situation. We will continue to explore these different pathways and reallocating our resources as we expand our community engagement in eastern and western Washington.

4) SPECIAL EVENTS

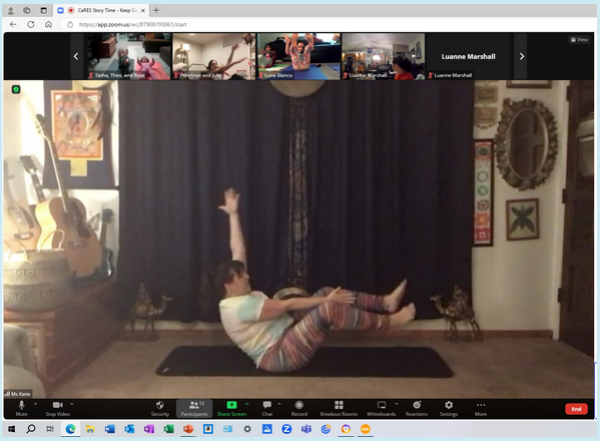
CaRES aims to reach caregivers at every level of need and interest. Beyond our varying support group offerings, we also have special events that build connections for caregivers around unique areas of interest. Special events are sometimes statewide, like Caregiver and Kids Craft, Education Resource Wednesday with Treehouse and OSPI, and Kinship Special Events. Other times, special events are in-person like our partnership with Vancouver Cloth & Foster Holiday event or Compelled to Care's Gingerbread House party. Special events give caregivers the opportunity to connect with CaRES and fellow caregivers outside of traditional or formal program elements. We are thrilled to be expanding this area of our program!

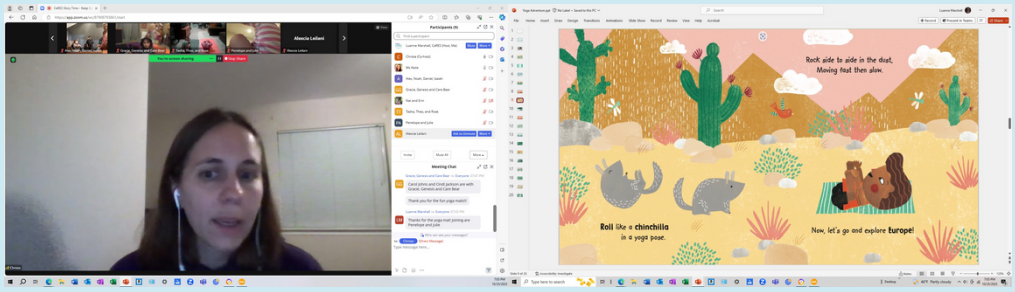
SPECIAL EVENTS
CONTINUED

903 caregivers and children participated in CaRES' special events this quarter. Special events include in-person community events in partnership with other organizations, digital community events, and drop-in discussion groups.

During the second quarter, we were thrilled to partner with organizations across the state for special events such as Treehouse, OSPI, Cloth + Foster, Compelled to Care, Little Hands Creations, and our many guest presenters from DCYF and local organziations.

We relish the opportunity to meet caregivers and the children and youth in their homes, as well as build partnerships with their community organizations.





SPECIAL EVENTS
CONTINUED

TRENDS, CHALLENGES, AND RECOMMENDATIONS

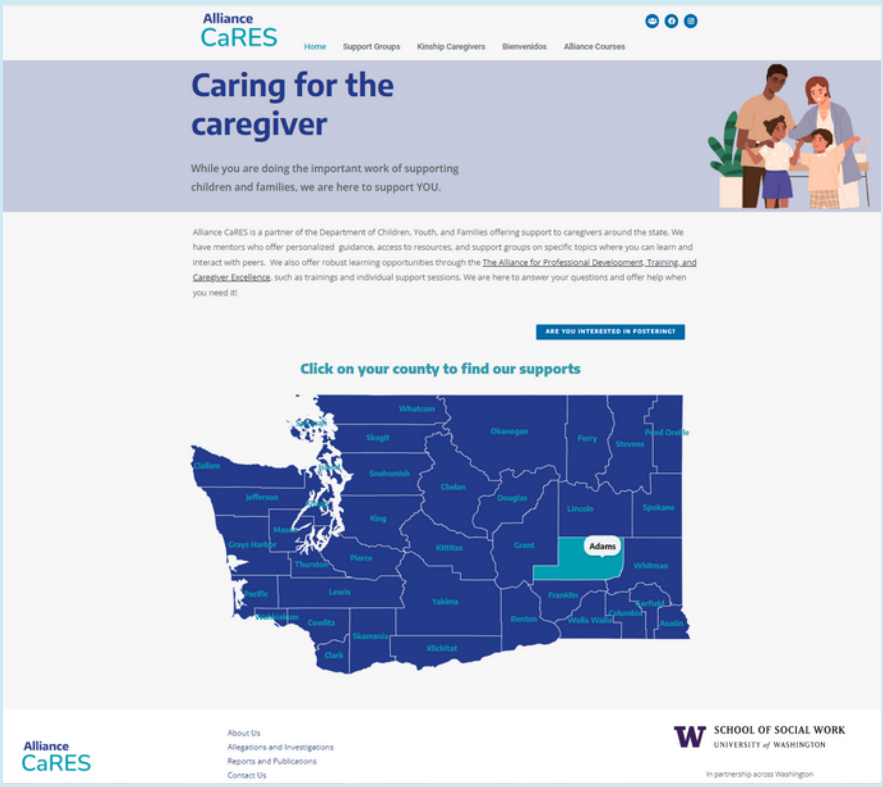
Special Events are a Highlight
Special events are frequently our most well-attended offerings. Caregivers express appreciation for the opportunity to try something new or engage with caregivers who have had similar experiences. We recognize the value of informal, creative, and fun options for caregiver connections and look forward to continuing expanding our special events. We are always looking for new ideas and opportunities for partnership in the community.

DCYF Regional Disparities in Appreciation Events
As CaRES partners with DCYF around caregiver appreciation events we are observing the differences between regions in terms of the time and budget allocated for caregiver appreciation events. We want to support DCYF's work to show caregivers how much they matter but the regional disparity is a challenge and is leading to caregivers in some regions feeling undervalued and unseen. The CaRES Program would love to explore taking the lead on planning appreciation events in partnership with DCYF.

5) ANYTIME SUPPORT, INCLUDING RESOURCES AND TRAINING

We offer a wealth of resources through emails, Facebook, Instagram, and the CaRES website. We were thrilled to launch a redesigned website this quarter with an interactive map, regional calendars, improved navigation, and easier referral process.

We also connect caregivers to free and extensive training and coaching opportunities through the Alliance. While caregivers are doing the important work of supporting children and families, we are here to support the caregivers. Workers can refer caregivers who need mentorship and caregivers can reach out directly to Mentors for ongoing support, to get additional questions answered, and for advice.



ANYTIME SUPPORT, INCLUDING RESOURCES AND TRAINING
CONTINUED

TRENDS, CHALLENGES, AND RECOMMENDATIONS

Increasing Referrals as a Sign of Program Success
We are thrilled to continue to be invited to present to DCYF units, at events, and with partner organizations like CASA/GAL. These partnerships are contributing to the number of referrals from workers seeking information about resources to support kinship and foster caregivers on their caseloads. Requests for resources and support came from across DCYF. We are always grateful that people are turning to CaRES to support caregivers on their caseloads. We take the continued invitations to present along with the number of caregiver referrals and partnership contacts as an indication of our ability to be a resource for caregivers directly and indirectly.

The following are excerpts from an ongoing email exchange between a DCYF supervisor who referred a family for mentorship and the Mentor:

- *"Wonderful, they mentioned to me today that they have been working with you consistently…I really appreciate your support for this family."*
- The Mentor followed up with the supervisor after additional resources and support were given to the caregivers.
- *"This is all so appreciated, thank you Lisa!"*

6) SUPPORT DURING INVESTIGATIONS

FIRST PROGRAM

There were 6 FIRST call made during the second quarter.

Event Date	Number of Calls	Reason for Call
10/7/2023	1	FIRST Line Call
10/18/2023	1	FIRST Line Call
10/19/2023	1	FIRST Line Call
12/1/2023	1	FIRST Line Phone Call
12/22/2023	1	FIRST Line Call

TRENDS, CHALLENGES, AND RECOMMENDATIONS

Under Utilization of FIRST Line

The CaRES team received 6 FIRST program calls this quarter. This is a substantial increase from prior quarters. Despite the increase this quarter, the FIRST Program has not been a well-utilized element of the program, despite requiring intensive staffing coverage. Even when caregivers initially contact the FIRST line, it is common for caregivers to prefer ongoing contact with a Mentor or a CaRES staff member. Some callers are looking for advocacy help for disputing with DCYF. CaRES does not provide this service and we direct caregivers to Constituent Relations. We also hear frequently from caregivers that they would be interested in direct contact with DCYF to discuss their questions rather than speaking to CaRES staff.

LOOKING AHEAD

In the second quarter of our third year, the Alliance CaRES program continued to expand and refine. Elements we look forward to introducing in the next quarter include:

- Growing our local connections through intentional partnerships, additional contracted staff, and creative engagement strategies.
- Expanding on the success of our individual supportive contacts by engaging caregivers through text messages, personalized invitations to community groups, and post-topic support group mentoring contacts.
- New special events topics, in-person special events, and additional Specialists to meet the unique and growing needs of the caregiver community.

Vision Statement

We believe caregivers thrive when **connected** to each other, practical resources, and the broader community.

APPENDIX A: CARES PROGRAM ELEMENTS

The CaRES Program is made up of six elements

1) **Support through the licensure process:**
Prospective caregivers can find the licensure process confusing and intimidating. We send clarifying information to all those who inquire about licensure. CaRES staff call all prospective kinship caregivers for individual support. CaRES staff also call all those who inquire about foster care who live within the top 25 highest removal ZIP codes. We also offer weekly virtual lunchtime sessions to answer frequent questions around paperwork and the licensing process, as well as "While You Wait" support groups for those who are preparing to welcome their first placed child.

2) **Support at key points:**
CaRES Mentors reach out to all caregivers at those moments when we know support is most needed, including at the time of licensure, at the time of first placement of a child into a home, kinship placements, and six months after licensure. These calls provide community resources, advice, and emotional support. We work to ensure that caregivers will build an ongoing connection with their local Mentor so they have someone to call as issues arise.

3) **Different kinds of support group**s:
CaRES now offers 26 online topic-based support groups for facilitated discussion and problem solving with other caregivers. These confer training credit. Community-based groups offer the opportunity for local in-person supportive connections with other caregivers. Some of these include trainings for credit, depending on the interest of the group. Our community-based groups include "walk and talks", coffee meet-ups, park playdates, a craft circle, and more. Our drop-In groups are online informal groups that give caregivers the chance to connect as the need arises.

4) **Special events**:
CaRES aims to reach caregivers at every level of need and interest. Beyond our standard offerings, we also offer special events around unique areas of interest. Special events are sometimes statewide, like our PRIDE event, Single Parent Drop-in Discussion, and Storytime with crafts or our Gntle Yoga for caregivers. Other times, special events are in-person like our partnership on the TBRI Hope for the Journey Conference and DCYF We Are Family Day. Special events give caregivers the opportunity to connect with CaRES and fellow caregivers outside of traditional or formal program elements. They are a unique way CaRES is caring for the caregivers.

5) **Anytime support, including resources and training**:
We offer a wealth of resources through emails, Facebook, Instagram, and the CaRES website. We also connect caregivers to free and extensive training and coaching opportunities through the Alliance. While caregivers are doing the important work of supporting children and families, we are here to support the caregivers. Workers can refer caregivers who need mentorship and caregivers can reach out directly to Mentors for ongoing support, to get additional questions answered, and for advice. We are seeing these calls increase!

6) **Support during investigations**:
Through the FIRST program, CaRES offers neutral, confidential support for caregivers with an allegation or licensing violation. We offer information about what to expect during the investigation process, and a listening ear during a challenging time.

APPENDIX B: TOPIC SUPPORT GROUP OFFERINGS

SELF-CARE

Self Care for Caregivers: This group will engage in conversations around how to make sure you see how valuable your contribution is, as well as also how demanding it can be. You can talk about challenges you're facing when thinking about self-care, because real life does sometimes make it hard to prioritize. You'll work toward developing an action plan that takes into account your unique circumstances and proactively addresses things that might derail your self-supporting activities. (Formerly "Who Is Taking Care of the Caregiver?")

Boundaries As Self-Care: This group is an extension of the supportive facilitated discussion group "Who Is Taking Care of the Caregiver?" In this group, you will engage in conversations around how to make sure you see how setting and keeping healthy boundaries allows you to continue doing the valuable work you do while protecting your important relationships. You can talk about challenges you're facing when thinking about boundaries, because real life sometimes makes it hard to say no or hold to your priorities. You'll work toward developing an action plan that proactively addresses things that might make it hard to maintain your identified healthy boundaries.

Grief and Loss in Your Foster Care Journey: As a caregiver for a child in the foster care system, grief and loss are an inherent part of your journey. You may be grieving a placement that isn't going as expected or hoped. Even as you celebrate a child's return home or to an adoptive placement, your family may be experiencing the loss of the child. We will talk about the realities of grief and loss, and share strategies for walking through the grieving process. You will engage in discussions about how to experience loss and yet continue to provide a loving environment for children placed with you in the future.

CONSIDERING ADOPTION AND GUARDIANSHIP

Foster-to-Adopt Journey: As a prospective adoptive foster parent, your journey from placement to adoptions is different from other adoption experiences. The goal of concurrent planning leads to unique challenges and beautiful opportunities. During the three sessions, you will consider some of the challenges of the foster-to-adopt process and develop strategies to help you fulfil your role in the adoption triad.

*During the second quarter Foster-to-Adopt Journey was sunset and replaced by an updated topic support group.

TOPIC SUPPORT GROUP OFFERINGS
CONTINUED

CONSIDERING ADOPTION AND GUARDIANSHIP, Continued

Approaching Permanency: A Guardianship & Adoption Conversation: This topic support group is your chance to discuss adoption and guardianship with others and think through what kind of permanency would work best for everyone involved. As a caregiver whose child is not able to return home, you may be trying to sort through the other permanency options. You are possibly wondering about the concurrent planning process and what questions to ask about guardianship or adoption. You may also be thinking about how to make plans for yourself and the child in your care

BOOK CLUBS

The Connected Child: The CaRES team will be leading a group through reading and discussion of “The Connected Child,” by Karyn Purvis. “The Connected Child” lays out the foundational principles for Trust Based Relational Intervention (TBRI), a therapeutic model that trains caregivers to provide effective support and treatment for at-risk children. Discussion at the five weekly book club meetings will dive into what TBRI is, and discussion will include a look at new strategies for building connection and managing behaviors.

The Connected Parent: “The Connected Parent” by Karyn Purvis and Lisa Qualls is the focus of this book club. Discussion will review TBRI principles and dive into practical parenting applications and real life strategies for understanding attachment, teaching respect, understanding sensory needs, adapting strategies for teens, and taking care of yourself.

The Connected Therapist: Connecting through the senses: "This 3-week book club is an extension of the Trust Based Relational Intervention (TBRI) modules or the TBRI book clubs: The Connected Child and The Connected Parent. Based on selections from “The Connected Therapist” by Marti Smith, discussions during the three sessions will focus on understanding sensory processing challenges, developing sensory processing strategies, and the practical application of those strategies in everyday caregiving."

TOPIC SUPPORT GROUP OFFERINGS
CONTINUED

BOOK CLUBS, Continued

Trying Differently Rather Than Harder: Fetal Alcohol Spectrum Disorders: The CaRES team leads you through a reading and discussion of "Trying Differently Rather Than Harder: Fetal Alcohol Spectrum Disorders" by Diane Malbin. This book is a readable, narrative discussion of the neurobehavioral approach to working with children and youth with FASD. The book focuses on understanding behaviors differently through case studies and examples of how FASD impacts everyday life. During four sessions, you will be discussing themes including: adaptions, common challenges, cognitive changes and strategies to address them, working with memory disruptions, and talking about FASD in a supportive informative manner.

Dancing with a Porcupine: The CaRES team leads you through a reading and discussion of "Dancing with a Porcupine" by Jennie Owens. This book shares the compelling story of the author's struggle to save her own life while caring for three children she and her husband adopted from foster care. In three sessions across six weeks, you will discuss themes including: self-care; trauma-informed care; expectations and hurt feelings; compassion fatigue; and balancing real life with the outside pressure to look like you are doing it all well.

PARENTING

Caring for Drug Impacted Infants and Children: In this group, we will share experiences, resources, and best practices for caring for infants and children who have been exposed to chemicals in utero. We will discuss signs of withdrawal; what works best in caring for an impacted infant including therapeutic handling techniques and share parenting experiences. We will also discuss issues, behaviors, interventions, effective parenting techniques, and resources for the children in your care.

Littlest Lives and Their Big Needs – Parenting 0 to 2: The earliest years are among the most critical to a child's long-term development. Children under 2 who are in foster care often require supports and approaches that are not so typical for their peers. You will talk through their needs, develop strategies to address those needs, and identify the resources available to help you support the littlest lives in care. You will also be able to build community with other caregivers of kids under 2 to share resources, experiences and problem-solving strategies.

TOPIC SUPPORT GROUP OFFERINGS
CONTINUED

PARENTING, Continued

Parenting Teens: This facilitated discussion group is a continuation of the seven-part "Parenting Teens" webinar. This group will continue to explore strategies for parenting teens with a history of trauma, developing healthy and supportive relationships with your teen, nurturing their identity, and understanding their challenging behaviors. You'll work with other parents of teens to develop an action plan that takes into account your and your teen's unique circumstances and proactively addresses the challenges you face.

Parenting in the Digital Age: Ready access to smart phones, tables, and computers has created a whole new world of challenges for caregivers. Youth do not need to leave their bedrooms be introduced to risky situations. During this supportive discussion group, you will talk with fellow caregivers about the challenges of parenting in the digital age, learn some warning signs of when a child's internet usage has become unsafe, and practice having a conversation about internet safety with your pre-teen or teen. We will also discuss basic internet programs, apps, geo tracking data, dangers in sharing pictures, videos, and personal information online.

Practical Parenting Skills for Caregivers: It isn't always easy to meet the complex needs of a child while navigating a new parental role. Foster parenting calls for a trauma-informed, mindful, and positive response to a wide variety of behaviors. You will work with fellow caregivers to develop practical parenting strategies that are trauma-informed, appropriate for the child, and suited to your home.

TOPIC SUPPORT GROUP OFFERINGS
CONTINUED

BUILDING CONNECTIONS WITH CHILDREN & YOUTH

Caregiver Strategies for Holidays and Celebrations: Holidays and celebrations can be a time of family togetherness, but they can also be a time of stress and heightened expectations. It takes intentional planning to give the children in your care a wonderful experience that includes the things that make the holiday or celebration special for everyone. In this 2-hour supportive facilitated discussion, kinship and foster caregivers will talk with each other about ways to manage the expectations of the child, their family, and your family. You will also talk about how to plan ahead to minimize the emotional challenges that sometimes come with family celebrations. Lastly, you will have an opportunity to create a celebration action-plan that is specific to your family and the child in your home

Fostering While Parenting, Supporting Our Biological and Adopted Children: When you have children who live at home with you, becoming a foster parent also means becoming a foster family. Growing up with foster siblings comes with unique challenges but there are strategies you can use to help your bio and adopted kids adapt and thrive!
During both sessions of this supportive facilitated discussion, you will collaborate with fellow caregivers to identify some of the unique challenges bio and adopted kids face, consider the impact fostering may have on your children, and share strategies you can use to nurture strength and resilience as a family unit.

Using Storytime for Connection and Support: Reading with your children can do much more than support their academic growth! During this supportive facilitated discussion caregivers will discuss strategies they can use before, during, and after reading to build social-emotional learning with the children in their care. Caregivers will also collaborate to identify techniques they can use to increase attachment with their child through reading and story time. Whether it is picture books, a chapter book or a series, reading with the children in your home can lead to deeper attachment and improved social-emotional skills!

TOPIC SUPPORT GROUP OFFERINGS
CONTINUED

NAVIGATING THE SYSTEM

Wellness Resource Wednesday: Dive into health topics with local experts to best support children in care. We're excited to announce an amazing new group focused on building your awareness of wellness resources that can support you and the children in your care. Wellness Resource Wednesdays is a free drop-in group meeting 6:30-8 p.m. on the third Wednesday of the month. In partnership with UW Harborview and Coordinated Care, these sessions will offer opportunities to learn directly from expert doctors and connect with caregivers sharing your experiences. The meetings start with a 45-minute presentation by Harborview doctors and conclude with 45 minutes of Q&A around services of CaRES, Coordinated Care and Harborview. The medical topics were selected based on common areas foster parents would like more support around, and training credit will be available. On alternating months, sessions will be a chance to simply share perspectives and resources around navigating health systems as a caregiver.

Education Resource Wednesday: Dive into education topics with local experts as they provide tools, resources, and support to help foster parents and kinship caregivers guide their youth to academic success. In partnership with Treehouse, the Department of Children, Youth and Families (DCYF), and the Office of Superintendent of Public Instruction (OSPI), these sessions will provide you with the opportunity to learn directly from educational experts and connect with foster parents and kinship caregivers by sharing your experiences. The meetings will start with a 45-minute presentation by Treehouse and OSPI and conclude with a 45-minute Q&A around services of CaRES, Treehouse and OSPI. The educational topics were selected based on common areas foster parents and kinship caregivers would like more support around, and training credit will be provided.

TOPIC SUPPORT GROUP OFFERINGS
CONTINUED

NAVIGATING THE SYSTEM, Continued

While You Wait: You've thought long and hard about what it means for you to be a foster parent. While you wait for your license or first placement to arrive, this facilitated discussion will help you consider some of the needs in the fostering community and how you are suited to meet them. You'll work toward developing parameters for accepting your first placements to promote a good fit for both you and child(ren) in your care.

Fostering as Part of a Team: As a caregiver for a child in the foster care system, you are part of a parenting team. The courts, the social worker, CASA, GAL, medical team, therapists and the child's biological family all have a role to play. Knowing what your role is and how to partner with the other members of the child's team improves the child's care, your experience as a foster parent, and the long-term outcomes of the placement. During this group, we will talk about who the members of the team are and their roles, and identify ways to promote positive relationships with them. This will include a look at how to support family time and partnership with the biological/first family, and understanding the role of DCYF staff and how to positively partner for success.

Navigating Fostering as an LGBTQIA+ Caregiver: As an LGBTQIA+ caregiver have you felt that your Sexual Orientation, Gender Identity and Expression (SOGIE) impacts your fostering journey? In this supportive facilitated discussion group, you will get a chance to talk with other LGBTQIA+ kinship and foster caregivers about their experiences and share your own. As a group, you will talk about useful tools and techniques for navigating common issues and use these to develop strategies specifically for your family. This single session facilitated discussion is specifically for kinship and foster caregivers who identify as LGBTQIA+ caring for children with any SOGIE.

TOPIC SUPPORT GROUP OFFERINGS
CONTINUED

NAVIGATING THE SYSTEM, Continued

Navegando el cuidado de Crianza Como un Cuidador de Habla Hispana: ¿Alguna vez ha sentido que su cultura latino/a/x e idioma impacta su experiencia como padre de crianza? En este grupo de discusión facilitada de apoyo solo para hispanohablantes, tendrá la oportunidad de hablar con otros padres de crianza y parientes como proveedores de cuidados sobre sus experiencias y compartir las suyas. Como grupo, hablarán sobre herramientas y técnicas útiles para navegar por los problemas comunes que enfrentan los cuidadores de habla hispana y utilizarlas para desarrollar estrategias específicamente para su familia.

SUPPORTING YOUTH & CHILDREN'S IDENTITIES

Supporting LGBTQIA+ Youth in Foster Care: Understanding your child's identity is critical to providing them the care and support they need to navigate the development years. Children with an LGBTQIA+ identity may need additional support as they navigate social and cultural factors. In this supportive facilitated discussion group, you will have an opportunity to talk through LGBTQIA+ terminology and identify concrete tools you can use to support a child's LGBTQIA+ identity. During the sessions, you can ask questions about support resources, share ways you have supported a child in your care, and hear how other caregivers have navigated situations related to a child's LGBTQIA+ identity.

Fostering Across Race, Ethnicity and Culture: Welcoming a child into your home, even temporarily, means accepting and affirming their whole selves. When a child has a different racial, ethnic, or cultural background than yours, it can be challenging to know the best ways to properly care for their unique physical, spiritual, and cultural needs. During this facilitated discussion, caregivers will share their racial, ethnic, or cultural perspective and develop strategies for meeting the needs of a child who has a different background or perspective. Facilitated by caregivers with lived experience in transracial and multi-cultural caregiving, this group aims to discuss the full scope of multi-racial, ethnic, and cultural foster families.