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GUIDELINES – REIMBURSABLE FOSTER CARE EXPENSES <u>Central Alberta</u> **2024**

CATEGORY 1: No Prior Authorization Required

SCHOOL SUPPLIES as required from school supply list

(Keep and submit school supply list with expense claim)

(Reep und submit school supply list with expense claim

• Kindergarten \$50.00/year **CLAI**

Grades 1-6 \$100.00/yearGrades 7-12 \$175.00/year

CLAIM: School supplies, graphing calculators, gym clothes, indoor shoes.

NOT COVERED: Outdoor shoes

SCHOOL

- Photos
 Special Projects
 School Bus Pass (not City bus pass)
- Lunchroom Fees Discuss with CI Practitioner
- Field Trips School receipt or cancelled cheque required to claim

CHRISTMAS GIFTS for child placed AFTER Oct 31st of the current year

0-2 = \$20.50 10-12 = \$32.50 3-5 = \$24.50 13-15 = \$36.506-9 = \$28.50 16-17 = \$40.50

NOT COVERED: Gifts for children placed prior to Nov 1st must be paid for out of the daily stipend.

INFANT CARE ALLOWANCE

For children 0 – 36 months **CLAIM:**

- Formula
- Diapers
- Basic baby care supplies
 Submit receipts for up to \$150
 per month per child.

AUTOMATIC RELIEF/RESPITE ★

Two nights / month / child will be reimbursed @ \$65/night without requiring CI Practitioner permission. Must submit signed caregiver invoice. See details below

REIMBURSEMENT PROCEDURE

Original Receipts

- + Expense Claim Form
 - = Reimbursement

TIMELINE: Submit receipts by 3rd day of the month to be reimbursed on the 15th.

NOTE: must include signed caregiver invoice with Automatic Respite expense claim.

★ AUTOMATIC RELIEF/RESPITE DAYS Details

BANKING AUTOMATIC RESPITE DAYS: Bank to a maximum of 6 days (3 months). *e.g.: Foster parent does not use their automatic respite for May and June, and then takes 6 days in a row in July.*

PROCEDURE: Provide FCSW with contact info for any respite caregivers to be used. FCSW will collect required documentation from caregivers prior to planned respite dates. Inform FCSW each time respite is planned – FCSW will notify the CI Practitioner ahead of time. **NOT COVERED:** A child who has a respite Support Plan.

CATEGORY 2: Authorization Required FROM CI Practitioner

RECREATION & VACATION FUNDS Recreation Fund Sports, Clubs, Extracurricular School Activities, Hobbies, Reimbursement cannot be completed until Crossroads etc.: (Per Fiscal Year = Apr 1st - Mar 31st) Accounting receives WRITTEN CI Practitioner approval. Infant to 11 yrs - \$675.00 per child per year Original Receipts are required for: 12 to 17 years - \$775.00 per child per year Recreation programs & equipment Vacation & Camp Fund Camp Fees Itinerary is required for vacation plans. (Per Fiscal Year = Apr 1^{st} – Mar 31^{st}) No receipts are required unless otherwise requested. Foster parent must present a specific vacation plan before 2016 - Vacation receipts are always required for funds are released. Kasohkowew placements. All ages: \$500.00 per child per year **INFANT INITIAL PLACEMENT FUND ★ AGENCY GRADUATION** Grad funds are meant to cover gifts, attire, photos, and dinner. Caregiver and CI Practitioner should discuss **★** Authorized by the Agency for placements, after plans for spending to avoid exceeding maximum documented discussion with CI Practitioner. amounts. **0 – 36 Months:** Up to \$500 per infant for initial or **Grade 9 Grad**: \$200 additional equipment to accept an infant placement.

Grade 12 Grad: \$500, including \$200 for a gift.

ALLOWANCE & CLOTHING	Monthly Clot	hing Allowance
Funds for Allowance and Clothing are included in the Basic Maintenance part of the	0-1	\$27.97
Foster Parent Stipend. The Monthly Clothing Allowance Form [include receipts] can be handed in or kept at home. Additional funds can be requested from the CI Practitioner to bring a child's wardrobe up to standard. i.e., Growth spurt.	2-5	\$39.11
	6 – 11	\$51.00
	12 – 15	\$71.17
Allowance amount is the minimum required, Caregivers may round up allowance	16 - 17	\$72.84
amounts to allow for easier accounting; however, this is not required. It is required	Weekly Spending Allowance	
that caregivers submit monthly allowance logs. This is proof that the funds were spent appropriately. Caregivers must be able to produce detailed records, with receipts, when asked to prove that the minimum monthly amounts were spent. Failure to provide proof could result in the caregiver paying that amount to the foster child, even after the child has been discharged from the program.	6-8	\$2.65
	9 – 11	\$6.66
	12 – 15	\$10.57
	16 - 17	\$14.53

CHILDCARE & MILEAGE		Regional Childcare Claims	
REGIONAL In-Service TRAINING: Caregivers may claim childcare expenses for bio and foster children while parents are		Up to \$6.50 / hour / child	
at In-Service training. Mileage and meals for a full day course may also be claimed for		Up to \$65.00 / day / child	
In-Service Training. See the Training Expense Claim form for details.		Up to \$195.00 / day / home	
AGENCY ACTIVITIES: For most activities, Crossroads will either provide 'in-house' babysitting at the activity or will reimburse for babysitting at foster family homes. Check with your Support Worker to see if babysitting will be provided or reimbursed.	support meetin	proved rate (see Mileage Reimbursement	

TRANSPORTATION EXPENSES (might need to go on a support plan)			
* REIMBURSEMENT PROCEDURE	CI PRACTITIONER WRITTEN AUTHORIZATION:		
ONE CHILD: Mileage is claimed at \$0.550 / km (* Dec. 2023) Parking Receipts (original) + Mileage Claim Form (one per child) = Reimbursement TIMELINE: Submit receipts by 3 rd day of the month following the expense to be reimbursed on the 15 th .	All child-related transportation costs are reimbursed according to the rate in the current Caregiver Rate Schedule. <i>Get CIP written approval</i> for child or youth-related transportation including medical appointments, recreation, cultural events, family visits and any other transportation required pursuant to the child or youth's government care plan (e.g., One Plan). (Enhancement Policy Manual, Practice supports, 2.4 Financial Compensation, October 2023)		
SHARED RIDE:	WHAT TRIPS SHOULD I CLAIM?		
If two or more children share a ride, separate forms must be filled out for each child. On each child's form note 'SPLIT' and state the same thing, including why the ride was shared. EXAMPLE: Mileage Claim for Child: Bubba Doe Total Cost: \$15 SPLIT by 3 children = \$5 each Reason: Ride shared to speech therapist and pediatrician on the same day and located in same office building.	Discuss mileage reimbursement re: Specialist & Therapist appointments Bio family and sibling visits Child's cultural activities Parking (specialists, court, and hospital). Drives to & from school might be covered, especially if the school is out of your district. Driving children to summer camps Driving to sporting activities and practices Normal medical, dental & optical appointments		