Minimum Standards

For

Independent Foster Homes

January 2017
MINIMUM STANDARDS
For

INDEPENDENT FOSTER HOMES

TEXAS DEPARTMENT OF FAMILY AND PROTECTIVE SERVICES
LICENSING DIVISION
# Minimum Standards for Independent Foster Homes

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INTRODUCTION

Minimum Standards

These minimum standards are developed by the Texas Department of Family and Protective Services (DFPS) with the assistance of child-care operations, parents, lawyers, doctors, and other experts in a variety of fields. The child-care licensing law sets guidelines for what must be included in the standards and requires that minimum standards be reviewed and commented on by the State Advisory Committee on Child-Care Facilities. The licensing law requires that proposed standards be distributed to child-care operations for a 60-day review and comment period before adopting the proposed standards as rules. The Administrative Procedure and Texas Register Act requires that proposed standards be published for public comment before they are adopted as rules. The department considers recommendations from interested persons or groups in formulating the final draft, which is filed as rules with the Secretary of State. Standards are a product of contributions from many people and groups and thus reflect what the citizens of Texas consider reasonable and minimum.

The minimum standards are also weighted based on risk to children. The weights are: high, medium-high, medium, medium-low, and low. While weights reflect a common understanding of the risk to children presented if a rule is violated, the assigned weights do not change based on the scope or severity of an actual deficiency. Scope and severity are assessed by the Licensing Representative, documented, and considered in conjunction with the standard weights when making Licensing decisions. Weights are noted in green next to each standard or subsection. Only those standards which can be violated are weighted. For example, definitions are not weighted. Standards that reference Chapter 749 are not weighted, since these standards reference multiple requirements in Chapter 749. The weight of a violation cited under one of these standards is determined by the more specific standard in Chapter 749.

Maintaining Compliance

It is essential that operation employees and caregivers recognize four critical aspects of Licensing’s efforts to protect the children in care and to help operation employees and caregivers comply with the law, rules, and standards. The four aspects are:

• Inspection
• Technical assistance
• Investigations
• Caregiver’s rights and entitlements

The Inspection

Various aspects of regulated operations are evaluated for compliance with the minimum standards, rules, and law during regular inspections. The emphasis on these inspections is to prevent risk to children in care. All operations are assigned a monitoring frequency based on their compliance history.

A deficiency is any failure to comply with a standard, rule, law, specific term of the permit or condition of evaluation, probation, or suspension. During any inspection, if licensing staff find that the operation does not meet minimum standards, rule, or law, the areas of deficiency are discussed with appropriate operation employees and caregivers. Technical assistance and consultation on the problem areas are provided. Operation employees and caregivers are given the opportunity to discuss disagreements and concerns with licensing staff. If the concerns are not resolved, the operation may request an administrative review.
Technical Assistance

Licensing staff are available to offer consultation to potential applicants, applicants, and permit holders regarding how to comply with minimum standards, rules, and laws. Licensing staff often provide technical assistance during inspections and investigations. However, technical assistance can be requested at any time.

The Child Care Licensing section of the DFPS web site also has a Technical Assistance Library. The Technical Assistance Library allows you to view or download articles and information about a variety of topics related to child care. The DFPS web site is www.dfps.state.tx.us.

Also, “Helpful Information” and “Best Practice Suggestions” following certain standards. This information is not a necessary component of meeting standards, but rather it is provided to help you meet the standards in a way best suited for your operation.

Investigations

When a report to Licensing alleges abuse or neglect, standards deficiency, or a violation of law or rule, licensing staff must investigate the report, notify the operation of the investigation, and provide a written report to the operation of the investigation results within prescribed time frames.

Your Rights and Entitlements

Waivers and Variances

If an operation is unable to comply with a standard for economic reasons, or wishes to meet the intent of a standard in a way that is different from what the standard specifies, a waiver or variance of the standard may be requested. The request is made in writing to the operation’s assigned Licensing Representative.

Administrative Review

If an operation disagrees with a Licensing decision or action, the operation may request an administrative review. The operation is given an opportunity to show compliance with applicable law, rule, minimum standards, license restrictions and/or license conditions.

Appeals

An operation may request an appeal hearing on a Licensing decision to deny an application or revoke or suspend a permit or a condition placed on the permit after initial issuance.

Appeal hearings are conducted by the State Office of Administrative Hearings (SOAH).

For Further Information

It is important that operation employees and caregivers clearly understand the purpose of minimum standards and the reasons for Licensing’s inspections. Do not hesitate to ask questions of licensing staff that will help you understand any aspect of Licensing. You may obtain information about licensing standards or procedures by calling your local Licensing office or by visiting the DFPS web site at www.dfps.state.tx.us.
Subchapter A, Purpose and Scope

§750.1. What is the purpose of this chapter?  
The purpose of this chapter is to set forth the rules that apply to independent foster family homes and independent group homes.

§750.3. Who is responsible for complying with the rules of this chapter?  
You, the permit holder, must ensure compliance with all rules of this chapter at all times, with the exception of those rules identified for specific types of child-care services or activities that your operation does not offer. For example, if we license you to offer only core child-care services, you are not required to comply with rules that apply only to treatment services or transitional living services; however, you must comply with all other applicable rules as stated in this chapter.

§750.5. How must I interpret the different terminology used in the requirements of Chapter 749 of this title (relating to Child-Placing Agencies)?  
(a) The rules of this chapter require you to comply with certain requirements of Chapter 749 of this title. The language of Chapter 749:

<table>
<thead>
<tr>
<th>Chapter 749 Terminology</th>
<th>Chapter 750 Terminology</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Child-placing agency, agency, or foster home</td>
<td>“Foster home” as defined in this chapter.</td>
</tr>
<tr>
<td>(2) Foster family home</td>
<td>“Foster family home” as defined in this chapter.</td>
</tr>
<tr>
<td>(3) Foster group home</td>
<td>“Foster group home” as defined in this chapter.</td>
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</tbody>
</table>

(continued)
(2) In some instances, Chapter 749 rules require action, review, or approval by child placement staff or child placement management staff. For the purposes of this chapter, those actions, reviews, or approvals must be completed by the service planning team. In other words, you must substitute “service planning team” for “child placement staff” or “child placement management staff”.

(b) If you must comply with a requirement in Chapter 749 of this title that has an exemption, this exemption applies to you. If, as written in Chapter 749, an applicable exemption is contingent on the date that a child-placing agency verified the home, this exemption applies to you contingent on whether we licensed you by that date. Any other condition of the exemption would apply to you as written.

Subchapter B, Definitions and Services

Division 1, Definitions

§750.41. What do certain pronouns mean in this chapter?

The following words have the following meanings when used in this chapter:

(1) I, my, you, and your – An applicant or permit holder, unless otherwise stated.

(2) We, us, our, and Licensing – The Licensing Division of the Department of Family and Protective Services (DFPS).

§750.43. What do certain words and terms mean in this chapter?

The words and terms used in this chapter have the meanings assigned to them under §745.21 of this title (relating to What do the following words and terms mean when used in this chapter?) and §749.43 of this title (relating to What do certain words and terms mean in this chapter?), unless another meaning is assigned in this section or unless the context clearly indicates otherwise. The following words and terms have the following meanings unless the context clearly indicates otherwise:

(1) Foster family home – A single independent home that is the primary residence of the foster parents and provides care for six or fewer children or young adults.
(2) Foster group home – A single independent home licensed:
   (A) After January 1, 2007, that is the primary residence of the foster parent(s) and provides care for seven to 12 children or young adults; or
   (B) Prior to January 1, 2007, that provides care for seven to 12 children or young adults.
(3) Foster home – As referred to in this subchapter means both types of homes, foster family homes and foster group homes.
(4) Foster parent – A person who provides foster care services in the foster home.
(5) Primary residence - A place that a foster parent lives on a routine basis and:
   (A) It is listed as the place of residence on their most recent tax return; or
   (B) It is the address listed on their motor vehicle registration, driver's license, voter's registration, or other document filed with a public agency.
(6) Vaccine-preventable disease – A disease that is included in the most current recommendations of the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention.

Division 2, Services

§750.61. What are the requirements regarding services?

You must comply with Division 2, Subchapter B of Chapter 749 of this title (relating to Services).

Subchapter C, Organization and Administration

Division 1, Permit Holder Responsibilities

§750.101. What are my responsibilities as the permit holder before I begin operating?

Before you begin operating, you are responsible for:

1. Ensuring that your home is legally established to operate within Texas and complying with all applicable statutes;
2. Establishing the governing body of your home;
3. Having a governing body that is responsible for, and has authority over, your home's policies and activities;
4. Having policies that clearly state the responsibilities of the governing body;

(continued)
Minimum Standards for Independent Foster Homes

4

Texas Department of Family and Protective Services

Medium-High (5) Developing operational policies and procedures that comply with or exceed the rules specified in this chapter, Chapter 42 of the Human Resources Code, Chapter 745 of this title (relating to Licensing), and other applicable laws;

(6) Developing and providing us your plan for ensuring that:

Medium (A) We are continually informed of any changes in the location of all records, and any changes in your personnel and professional employees; and

Medium-High (B) You and your employees contact Statewide Intake (SWI) to report serious incidents and allegations of abuse and neglect.

§750.103. What are my operational responsibilities as permit holder?

Subchapter C, Organization and Administration
Division 1, Permit Holder Responsibilities
March 2013

When you begin operating, you must:

Medium (1) Operate according to the written policies and procedures adopted by the governing body as directed by this chapter;

Medium (2) Maintain accurate and current records for us to review;

Medium (3) Maintain a current roster of all children in care, including the type of treatment services being received by each child (as applicable), and have this roster available to us for review at any time;

Medium (4) Allow us to inspect your home at any time;

Medium-High (5) Display your permit at your home;

High (6) Observe the conditions and restrictions of your permit;

Medium-High (7) Not offer unrelated types of services that conflict or interfere with the best interests of a child in care, a caregiver's responsibilities, or space in the homes. If you offer more than one type of service, you must determine and document that no conflict exists;

Medium-Low (8) Maintain liability insurance as required by the Human Resources Code, §42.049;

Medium (9) Comply with Chapter 42 of the Human Resources Code, all other applicable laws and rules of the Texas Administrative Code;

Medium (10) Ensure that no member of the governing body, member of the executive committee, management staff, or employee is listed as a prohibited controlling person; and

(11) Notify us as soon as possible, but no later than two days after:

Medium-High (A) A new individual becomes a controlling person at your independent foster home; or

Medium-High (B) An individual ceases to be a controlling person at your independent foster home.

Helpful Information

Regarding subsection (1), Licensing only enforces this requirement for policies required by the minimum standards. For example, Licensing does not enforce an operation’s policies on purchase approvals. In addition, Licensing will not cite this minimum standard when an operation meets a specific standard but does not meet their policy which requires more than the minimum standard. For example, if an operation’s policy requires caregivers to complete 12 hours of general pre-service training, and inspection results indicate that employees only completed 10 hours of training, no citation would be documented. However, if employees only completed six hours of training, a citation may be documented, since the minimum standards require eight hours of general pre-service training.

Regarding subsection (10), see Chapter 745 of the Texas Administrative Code, Subchapter G, rules §745.901 to §745.909, for more information on controlling persons.
§750.105. What responsibilities do I have for personnel policies and procedures?

You must:

Medium (1) Develop a written organizational chart showing the administrative, professional, and staffing structures and lines of authority;

Medium (2) Develop written job descriptions, including minimum qualifications and job responsibilities for each position;

Medium (3) Develop written policies on the training requirements for caregivers and employees;

High (4) Ensure that personnel policies comply with personnel requirements outlined in Subchapter F of Chapter 745 of this title (relating to Background Checks);

High (5) Ensure your employees and caregivers report serious incidents and suspected abuse, neglect, or exploitation as required in §750.201(1) of this title (relating to What are the requirements for reports and record keeping?). An employee who suspects abuse, neglect, or exploitation must report their suspicion directly to us and may not delegate this responsibility, as directed by Texas Family Code §261.101(b);

Medium (6) Ensure that all employees and consulting, contracting, and volunteer professionals who work with a child and others with access to information about a child are informed in writing of their responsibility to maintain child confidentiality;

Medium-High (7) Either adopt the model drug testing policy or have a written drug testing policy that meets or exceeds the criteria in the model policy provided in §745.4151 of this title (relating to What drug testing policy must my residential child-care operation have?); and

Medium (8) Develop and implement written policy for vaccine-preventable diseases if you are a foster group home that is not located in your primary residence. The policy must address the requirements outlined in §750.111 of this title (relating to What must a policy for protecting children from vaccine-preventable diseases include?).

§750.107. What must my conflict of interest policies include?

You must have conflict of interest policies that address a code of conduct on the relationship between employees, professional service providers, children in placement, foster parents, and children’s families.
§750.109. What are the rights and responsibilities of the foster home and Licensing?

The rights and responsibilities of the foster home and Licensing include, but are not limited to, the following:

Medium (1) Foster parents have the right and responsibility to obtain training that will assist them in meeting the needs of children receiving care in the foster home;

Medium (2) Foster parents have the right and responsibility to obtain as much information as they need on a child before making a placement decision regarding that child;

Medium-High (3) Foster parents have the responsibility to comply with the rules in this chapter;

(no weight) (4) Foster parents have the right to technical assistance from Licensing regarding how to comply with the rules in this chapter; and

(no weight) (5) Foster parents have the right to request administrative review and/or appeal of Licensing actions and decisions that affect them and to know the procedures for doing so per Chapter 745 of this title (relating to Licensing).

§750.111. What must a policy for protecting children from vaccine-preventable diseases include?

A policy for protecting the children in your care from vaccine-preventable diseases must:

Medium (1) Specify any vaccines that you have determined an employee must have for vaccine-preventable diseases based on the level of risk the employee presents to children by the employee's routine and direct exposure to children;

Medium-High (2) Require each employee to receive each specified vaccine that the employee is not exempt from having;

Medium (3) Include procedures for verifying whether an employee has complied with your policy;

Medium (4) Include procedures for an employee to be exempt from having a required vaccine because of:

(A) Medical conditions identified as contraindications or precautions by the Centers for Disease Control and Prevention (CDC); or

(B) Reasons of conscience, including a religious belief;

Medium-High (5) Include procedures that an exempt employee must follow to protect children in your care from exposure to disease, such as the use of protective medical equipment, including gloves and masks, based on the level of risk the employee presents to children by the employee's routine and direct exposure to children;

Medium-Low (6) Prohibit discrimination or retaliatory action against an exempt employee, except that required use of protective medical equipment, including gloves and masks, may not be considered retaliatory action for purposes of this section;

Medium (7) Outline how you will maintain a written or electronic record of each employee's compliance with or exemption from your policy; and

Medium (8) State the disciplinary actions you may take against an employee who fails to comply with your policy.
### Helpful Information

You can find more information on the current immunizations recommended for adults on the Center for Disease Control (CDC) website at:


The specific immunizations needed as an adult vary on such factors including age, overall health as well as persons you are in close contact with. Some immunizations given during adulthood may include:

- **Influenza (Flu)** – this immunization helps protect against the flu. When determining if a flu shot is required some factors to consider are people at a higher risk of severe flu and persons with close contact with others who are at a higher risk of flu including persons who care for children younger than 12 months of age.

- **HepA (Hepatitis)** – this immunization helps protect against the hepatitis A disease. Factors to be considered when determining the need for the HepA immunization can include anyone who will be in close contact with a person or child from a country that has high rates of Hepatitis A.

- **Pertussis (Whooping Cough)** – two immunizations known as DTap and Tdap help protect against this disease. Whooping cough is very contagious and most severe for babies. Factors to consider when determining the need for this immunization include determining the level of risk associated with certain persons and caregivers who are in close contact with infants. It is important to understand that whooping cough is usually spread by coughing or sneezing and many babies who get whooping cough are infected by persons including caregivers who might not even know they have the disease.

For additional information regarding the development of your policy for protecting children from vaccine-preventable diseases please refer to Appendix A: Vaccine-Preventable Diseases.

### Division 2, Governing Body

**§750.121. What are the specific responsibilities of the governing body?**

*Subchapter C, Organization and Administration*

*Division 2, Governing Body*

*January 2007*

The governing body is responsible for:

1. Ensuring the home remains fiscally sound;
2. Overseeing and ensuring the management of the home’s services and programs in compliance with your policies;
3. Approving and having authority over the operational policies and activities which must comply with rules of this chapter;
4. Complying with the law, including Chapter 42 of the Human Resources Code, the applicable rules of this chapter, and other applicable rules in the Texas Administrative Code; and
5. Carrying out the governing body responsibilities assigned in the foster home’s policies and procedures.
§750.123. After a permit has been issued, what subsequent information regarding my governing body must I provide to Licensing, and when must I provide it?

You must provide to us in writing any change in:

<table>
<thead>
<tr>
<th>Weight</th>
<th>Change:</th>
<th>Deadline for notifying us:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>(1) The legal structure of your operation</td>
<td>At least seven working days before making the change</td>
</tr>
<tr>
<td>Low</td>
<td>(2) The composition of the governing body</td>
<td>Within two days of such a change</td>
</tr>
<tr>
<td>Low</td>
<td>(3) The information about governing body officers, executive committee, or members, such as name or location changes</td>
<td>Within 15 days of learning about a change</td>
</tr>
</tbody>
</table>

### Division 3, Fiscal Requirements

§750.131. What are my general fiscal requirements?

(a) You must establish and maintain your home on a sound fiscal basis.

(b) You must maintain complete financial records.

(c) You must have a fee policy that clearly describes what fees you charge and what services the fees cover, or you must have a written contract that clearly describes your charges for foster care services.

§750.133. What are my specific fiscal requirements?

You must:

(1) Submit documentation to us of a 12-month budget of income and expenses with the application for a new permit;

(2) Submit documentation to us of reserve funds or available credit at least equal to operating costs for the first three months of operation with the application for a new permit;

(3) Have predictable funds sufficient for the first year of operation;

(4) Demonstrate at all times that you have or will have sufficient funds to provide appropriate services for all children in your care; and

(5) Account for a child’s money separately from your foster home funds. No child’s personal earnings, allowances, or gifts may be used to pay for the child’s room and board, unless such a use is a part of the child’s service plan and the child’s parent approves it in writing. You must give or send the child’s money to the child, parent, or next placement within 30 days of the child’s discharge.
§750.151. What are the general requirements for my home’s policies?

(a) The requirements for policies only apply to the operation’s policies that are required or governed by this chapter.

(b) The policies that we require must be written and they must indicate the approval of the governing body, date of approval, and effective date.

(c) The policies must be clearly stated and comply with the rules of this chapter.

(d) All employees and caregivers must be made aware of and follow your home’s policies and procedures. A copy of your home’s policies and procedures must be maintained at the foster home and available for review by an employee or a caregiver.

(e) All policies must be available for review by our staff and your clients, upon request.

(f) You must report any significant changes to the policies to us at least seven days before implementing the change.

(g) You must maintain copies of all current and previous policies for at least two years.

§750.153. What are the requirements for my admission policies?

Your admission policies must describe each program you offer, including but not limited to:

(1) The program’s goals and services provided, including whether the program accepts emergency admissions;

(2) The characteristics of the population served by the program, such as behaviors and diagnoses. If the program includes treatment services, you must describe the emotional disorders, mental retardation, pervasive developmental disorders, or primary medical needs that the program is designed to treat; and

(3) The gender(s) and age range of the population served by the program.

§750.155. With whom must I share my admission policies?

You must give copies of your admission policies to employees, contract staff, and caregivers.
Your must develop policies that describe:

1. Visitation rights between the child and family members and the child and friends;
2. The child’s rights to correspond by mail with family members and friends, including any policies regarding mail restrictions and receipt of electronic mail;
3. The child’s rights to correspond by telephone with family members and friends;
4. The child’s rights to receive and give gifts to family, friends, staff or caregivers, or other children in care, including any restrictions on gifts;
5. Personal possessions a child is or is not allowed to have;
6. Emergency behavior intervention techniques if the use of emergency behavior intervention is permitted in your operation. If its use is not permitted, you must have a policy disallowing its use;
7. Discipline policies including techniques and methods for ensuring the appropriateness of discipline techniques used with a child. These policies and procedures must:
   A. Guide employees and caregivers in methods used for discipline of a child in care;
   B. Include measures for positive responses to appropriate behavior;
   C. Make clear that discipline of any type is inappropriate and not permitted for infants; and
   D. Emphasize the importance of nurturing behavior, stimulation, and promptly meeting the child’s needs;
8. Any religious program or activity that you offer, including whether children are required to participate in religious activities with caregivers or staff;
9. The plans for meeting the educational needs of each child;
10. When trips with caregivers away from the home are allowed and what protocols will be used;
11. Program expectations and rules that apply to all children;
12. Child grievance procedures;
13. The types and frequency of reports to parents;
14. Procedures for routine and emergency diagnosis and treatment of medical and dental problems;
15. Routine health care relating to pregnancy and childbirth, if you admit and/or care for a pregnant child;
16. Your plan for providing health-care services to a child with primary medical needs;
17. Transitional living policies, if applicable; and
18. If applicable, the policy required by §749.2961(a)(2) of this title (relating to Are weapons, firearms, explosive materials, and projectiles permitted in a foster home?).
§750.159. What emergency behavior intervention policies must I develop if the use of emergency behavior intervention is permitted in my home?

At a minimum, you must develop emergency behavior intervention policies to implement the requirements in Subchapter L of this chapter (relating to Emergency Behavior Intervention). The policies must include the following:

1. A complete description of emergency behavior interventions that you permit caregivers to use;
2. The specific techniques that caregivers can use;
3. The qualifications for caregivers who assume the responsibility for emergency behavior intervention implementation, including required experience and training, and an evaluation component for determining when a specific caregiver meets the requirements of a caregiver qualified in emergency behavior intervention. You must have an on-going program to evaluate caregivers qualified in emergency behavior intervention and the use of emergency behavior interventions;
4. Your requirements for and restrictions on the use of permitted emergency behavior interventions;
5. How you will meet the following requirements during the child’s orientation:
   a. Explain and document the following to a child in a manner that the child can understand:
      i. Who can use an emergency behavior intervention;
      ii. The actions a caregiver must first attempt to defuse the situation and avoid the use of emergency behavior intervention;
      iii. The situations in which emergency behavior intervention may be used;
      iv. The types of emergency behavior intervention you authorize;
      v. When the use of an emergency behavior intervention must cease;
      vi. What action the child must exhibit to be released from the emergency behavior intervention;
      vii. The way to report an inappropriate emergency behavior intervention;
      viii. The way to provide voluntary comments on any emergency behavior intervention; and
   b. Obtain each child’s input on preferred de-escalation techniques that caregivers can use to assist the child in the de-escalation process;
6. Requirement that caregivers must attempt less restrictive and less intrusive emergency behavior interventions as preventive measures and de-escalating interventions to avoid the need for the use of emergency behavior intervention;

(continued)
Minimum Standards for Independent Foster Homes

Medium-High

(7) Training for emergency behavior intervention. The policy must include a description of the emergency behavior intervention training curriculum that meets the requirements in the rules of this chapter, the amount and type of training required for different levels of caregivers (if applicable), training content, and how the training will be delivered; and

(8) Prohibitions for discharging or otherwise retaliating against:

Medium

(A) An employee, client, resident, or other person for filing a complaint, presenting a grievance, or otherwise providing in good faith information relating to the misuse of emergency behavior intervention at the agency or foster home; or

Medium

(B) A client or resident because someone on behalf of the client or resident files a complaint, presents a grievance, or otherwise provides in good faith information relating to the misuse of emergency behavior intervention at the agency or foster home.

§750.161. What policies must I develop on the discipline of children in foster care?

Subchapter C, Organization and Administration
Division 4, Foster Home Policies
December 2014

Medium

You must develop policies that guide caregivers in methods used for discipline of children in foster care. Your discipline policies must integrate trauma informed care into the care, treatment, and management of each child, and include:

Medium

(1) Measures for positive responses to appropriate behavior;

Medium

(2) If you work with infants, a statement that discipline of any type is not appropriate or permitted for infants; and

Medium

(3) The importance of nurturing behavior, stimulation, and promptly meeting the child’s needs.

§750.163. What foster care policies must I develop?

Subchapter C, Organization and Administration
Division 4, Foster Home Policies
January 2007

Medium

You must develop foster care policies that include the following:

Medium

(1) Qualifications, screening, and selection procedures for caregivers who can meet the needs of children your home serves;

Medium

(2) Criteria for making decisions about the number, ages, gender, and needs of children who may be placed in your foster home;

Medium-Low

(3) Pre-service and annual training requirements for caregivers; and

Medium

(4) Policies on how I will provide services if the home provides more than one type of service.
§750.165. What additional policies must I develop if my home provides treatment services?

You must develop additional policies if your home provides treatment services. These policies must include:

Medium (1) Ongoing assessments of the caregiver’s abilities to deal with the needs of the children in care;

Medium-High (2) Safeguards for protecting the children and caregivers; and

Medium-High (3) Emergency back-up and support systems for the caregivers.

§750.167. What policies must I develop if I offer a transitional living program?

If you offer a transitional living program, you must develop policies that address the following:

Medium-Low (1) Criteria used to select participants for the program;

Medium (2) Supervision of participants;

Medium-Low (3) Expected behaviors of participants and consequences for failure to comply;

Medium (4) Training, education, and experiences to be achieved in the program; and

Medium-Low (5) Roles of participants and caregivers.

§750.169. What policies must I develop for babysitters, overnight care providers, and respite care providers?

For both in-home and out-of-home care, you must develop policies specifically for babysitters, overnight care providers, and respite care providers that include:

Medium (1) Minimum age for each type of provider;

Medium (2) Minimum amount and type of prior child-care experience that each type of provider must have;

Medium (3) Amount and type of training each type of provider must have;

Medium (4) Reference and background information that you must obtain before using each type of provider;

Medium (5) Number of children that each type of provider can care for;

Medium (6) Information that you must share with a provider, including information about the children in care and emergency contact information;

Medium (7) Specific care instructions that you must share with a provider for children with treatment needs;

Medium (8) A method for contact between you and the provider during the time of the provider’s care; and

Medium (9) A requirement that documentation of the provider restrictions and arrangements will be in your records.
§750.171. What policies must I develop if I use volunteers?

Subchapter C, Organization and Administration
Division 4, Foster Home Policies
January 2007

If you use volunteers, you must develop policies that:

Medium-Low (1) Include volunteer job descriptions and/or responsibilities;
Medium-Low (2) Address volunteer qualifications, screening and selection procedures, and orientation and training programs;
Medium (3) Address supervision of volunteers; and
Medium-Low (4) Address visitation with children in care.

Division 5, Clients and Appeals

§750.181. Who are my clients?

Subchapter C, Organization and Administration
Division 5, Clients and Appeals
January 2007

(no weight) (a) Your child clients include children in foster care.
(no weight) (b) Your adult clients include birth parents, managing conservators, or person(s) with legal responsibility for the child.
(no weight) (c) Anyone can call you for information or attend a meeting open to all interested persons, but a person becomes your client when you establish a relationship beyond that available to someone who is merely an interested person.

§750.183. What rights do my adult clients have?

Subchapter C, Organization and Administration
Division 5, Clients and Appeals
January 2007

You must inform your adult clients:

Medium-Low (1) That the rules of this chapter, the compliance status reports, and your policies are available for review upon their request;
Medium-Low (2) Of their right to appeal foster home actions and decisions that affect them, and the procedures for making an appeal; and
Medium (3) Of procedures for making a complaint to us.
Minimum Standards for Independent Foster Homes

§750.185. What must my appeal process include?

Subchapter C, Organization and Administration
Division 5, Clients and Appeals
September 2010

(a) You must have a written appeal process for your adult clients in regard to your actions and decisions that affect those clients.

(b) The process must describe:

1. How you will inform clients of their right to appeal;
2. The procedures for making an appeal;
3. Who will hear an appeal and make the decision;
4. How the person who requests an appeal will find out about the decision;
5. Time frames for making a decision and communicating the decision to the complainant; and
6. The basis for an appeal decision.

(c) You must provide this information to each potential adult client.

(d) Your appeal process does not have to involve anyone from outside your foster home. An internal review procedure is sufficient.

Subchapter D, Reports and Record Keeping

Division 1, Reporting Serious Incidents and Other Occurrences; Operation Records; and Personnel Records

§750.201. What are the requirements for reports and record keeping?

Subchapter D, Reports and Record Keeping
Division 1, Reporting Serious Incidents and Other Occurrences; Operation Records; and Personnel Records
January 2007

You must comply with:

1. Division 1, Subchapter D of Chapter 749 of this title (relating to Reporting Serious Incidents and Other Occurrences);
2. Division 2, Subchapter D of Chapter 749 of this title (relating to Operation Records); and
3. Division 3, Subchapter D of Chapter 749 of this title (relating to Personnel Records).

Division 2, Client Records

§750.231. What client records must I maintain?

Subchapter D, Reports and Record Keeping
Division 2, Client Records
January 2007

You must maintain complete, current, individual client records for all children in care.
§750.233. Where must I maintain active records for clients?

You must maintain the active case record for a child at the foster home.

§750.235. What is an active record for a child?

An active child record consists of the child’s most recent 12 months of service.

§750.237. What information must an active child record include?

For each child, the active record must include:

1. The child’s full name and another method of identifying the child, such as a client number;
2. Documentation of known allergies and chronic health conditions on the exterior of the child’s record or in another location where the information is clearly visible to persons with access to the record, including a notation of "no known allergies" when applicable; and
3. The date of each data entry and the name of the person who makes the data entry.

§750.239. How must I maintain an active child record?

On an on-going basis, you must ensure that each child’s record is:

1. Kept accurate and current;
2. Locked and kept in a safe location or locations; and
3. Kept confidential as required by law.

§750.241. Where must I maintain archived client records?

You must maintain archived client records at the foster home and/or in a central administratively designated location. You may archive entire closed client records electronically. Your system for maintaining all client records must be uniform. You must maintain a master list of archived client records and their location in the foster home.
§750.243. Who must consent to the release of a child’s record?

Unless you are releasing information to a parent, to us, or as required by law, you may not release any portion of a child’s record to any agency, organization, or individual without the written consent of the person legally authorized to consent to the release.

§750.245. How long must I maintain client records?

(a) You must maintain complete child records for a child placed in foster care:

1. For at least two years after the child is discharged; and
2. Until the resolution of any investigation of a serious incident that occurred while the child was in care with your foster home.

(b) You must maintain records on your foster home for at least five years after the foster home is closed.

Subchapter E, Foster Home Staff and Caregivers

Division 1, General Requirements

§750.301. What are the general requirements for foster home staff and caregivers?

You must comply with Division 1, Subchapter E of Chapter 749 of this title (relating General Requirements).

Division 2, Executive Director

§750.331. What qualifications must an executive director meet?

Your foster home’s governing body must determine the qualifications for the executive director. The executive director must meet the qualifications established by your foster home.
§750.333. What are the responsibilities of the executive director?

Subchapter E, Foster Home Staff and Caregivers
Division 2, Executive Director
January 2007

Medium
(a) Your executive director has overall responsibility for your foster home.

(b) Your executive director must be responsible for or assign responsibility for:

Medium
(1) Administering and managing the foster home according to the policies adopted by the governing body;

Medium
(2) Ensuring that the foster home complies with applicable rules of this chapter, Chapter 42 of the Human Resources Code, Chapter 745 of this title (relating to Licensing), and other applicable laws;

Medium
(3) Personnel matters, including hiring, assigning duties, training, supervision, evaluation of employees, and terminations; and

Medium-High
(4) Ensuring persons whose behavior or health status presents a danger to children are not allowed at the foster home.

Medium
(c) If the executive director is absent from the foster home on a frequent and/or extended basis, the executive director must designate an employee of the foster home who is responsible for the program and must administer the foster home in the executive director’s absence.

Division 3, Treatment Director

§750.351. Must I have a treatment director?

Subchapter E, Foster Home Staff and Caregivers
Division 3, Treatment Director
January 2007

Medium-High
(a) If you provide treatment services, you must employ or contract with someone that meets the qualifications of a treatment director that:

Medium-High
(1) Will be responsible for your overall treatment program, including clinical responsibility for the management of your therapeutic interventions; and

Medium-High
(2) Provide direction and overall management of your treatment program.

Medium-High
(b) When assigning responsibilities to your treatment director, you must ensure that the treatment director can oversee the treatment of all children receiving treatment services.
§750.353. What qualifications must a treatment director have?

Subchapter E, Foster Home Staff and Caregivers
Division 3, Treatment Director
January 2007

Medium-High  (a) A treatment director that provides or oversees treatment services for children with mental retardation or children with pervasive developmental disorders must be:

(1) Licensed as a psychiatrist, psychologist, professional counselor, clinical social worker, marriage and family therapist, or registered nurse; or

(2) Certified by the Texas Education Agency as an education diagnostician, have a master’s degree in special education or a human services field and have three years of experience working with children with mental retardation or a pervasive developmental disorder.

Medium-High  (b) A treatment director that provides or oversees treatment services for children with primary medical needs must be a physician or a licensed registered nurse.

Medium-High  (c) A treatment director that provides or oversees treatment services for children with emotional disorders must:

(1) Be a psychiatrist or psychologist;

(2) Have a master’s degree in a human services field from an accredited college or university and three years of experience providing treatment services for children with an emotional disorder, including one year in a residential setting; or

(3) Be a licensed master social worker, a licensed clinical social worker, a licensed professional counselor, or a licensed marriage and family therapist, and have three years of experience providing treatment services for children with an emotional disorder, including one year in a residential setting.

§750.355. If I provide more than one type of treatment service, can I have one treatment director?

Subchapter E, Foster Home Staff and Caregivers
Division 3, Treatment Director
January 2007

Medium  Yes, you can have one treatment director if he meets the required qualifications for all treatment services your foster home offers.

Division 4, Treatment Services Provided by Nursing Professionals; Contract Staff and Volunteers

§750.371. What are the requirements for treatment services provided by nursing professionals?

Subchapter E, Foster Home Staff and Caregivers
Division 4, Treatment Services Provided by Nursing Professionals; Contract Staff and Volunteers
January 2007

(no weight)  You must comply with Division 5, Subchapter E of Chapter 749 of this title (relating to Treatment Services Provided by Nursing Professionals).
§750.373. What are the requirements for contract staff, volunteers, and student interns?

Subchapter E, Foster Home Staff and Caregivers
Division 4, Treatment Services Provided by Nursing Professionals; Contract Staff and Volunteers
January 2007

(no weight) You must comply with Division 6, Subchapter E of Chapter 749 of this title (relating to Contract Staff and Volunteers).

Subchapter F, Training and Professional Development

§750.401. What are the requirements for training and professional development?

Subchapter F, Training and Professional Development
January 2007

You must comply with:

(no weight) (1) Subchapter F of Chapter 749 of this title (relating to Training and Professional Development), with the exception of §749.861 of this title (relating to What are the pre-service experience requirements for caregivers?); and

(no weight) (2) §750.403 of this title (relating to What are the pre-service experience requirements for caregivers?).

§750.403. What are the pre-service experience requirements for caregivers?

Subchapter F, Training and Professional Development
January 2007

(no weight) (a) If you do not care for children receiving treatment services, then there are no pre-service experience requirements.

Medium (b) If you care for children receiving treatment services, then a caregiver must have 40 hours of supervised child-care experience in an operation or foster home that provides the same treatment services. If the 40-hour experience requirement is not met, before you may assign the person as the only caregiver responsible for a group of children, the caregiver must have at least 40 total hours of supervised child-care experience from your foster home and/or another operation or foster home that provides the same treatment services. Until the caregiver completes the supervised experience, an experienced caregiver must be physically available to supervise the caregiver at all times. The supervised child-care experience must be documented in the appropriate personnel record.
§750.451. What are the requirements regarding children’s rights?

You must comply with:

(1) Subchapter G of Chapter 749 of this title (relating to Children’s Rights), with the exception of:

(A) §749.1009 of this title (relating to What right does a child have regarding contact with a parent?); and

(B) §749.1013 of this title (relating to What right to privacy does a child have with respect to his contact with others?); and

(2) §750.453 of this title (relating to What right does a child have regarding contact with a parent?), and §750.455 of this title (relating to What right to privacy does a child have with respect to his contact with others?).

§750.453. What right does a child have regarding contact with a parent?

(a) You must allow contact between a child and his parent whose parental rights have not been terminated according to:

(1) Your policies; and

(2) The provisions of a court order or any visitation agreement.

(b) You must document in the child’s record:

(1) Any plans for contact between the child and a parent; and

(2) Any decision to limit contact with a parent.

(c) Before you can temporarily restrict ongoing contacts or communication between the child and a parent, you must:

(1) Explain the reasons for the restrictions to the child and the child’s parent; and

(2) Document the reasons in the child’s record.

(d) Restrictions imposed by you that continue more than 30 days must be re-evaluated monthly by the child’s service planning team, who also must:

(1) Explain the reasons for the continued restrictions to the child and the child’s parents; and

(2) Document the reasons in the child’s record.

(e) If you limit communications or visits with a parent for practical reasons, such as geographical distance or expense, you must discuss the limits with the child and the child’s parents. You must document the limits in the child’s record.
§750.455. What right to privacy does a child have with respect to his contact with others?

Subchapter G, Children’s Rights
January 2007

(a) Except as determined by the child’s service planning team or the child’s parent, you may not:

Low (1) Open or read the child’s incoming or outgoing mail, including electronic mail, unless necessary to assist the child with reading or writing; or

Low (2) Monitor the child’s telephone calls unless the child needs assistance with using the telephone.

(b) You must document in the child’s record:

Low (1) Any reason for restricting the child’s mail or telephone calls; and

Medium-Low (2) A listing of the mail or telephone calls that you restrict.

(c) You must inform the child and parent about restrictions that you place on the child.

Medium-Low (d) Restrictions that continue for more than 30 days must be re-evaluated monthly by the child’s service planning team, who also must:

Low (1) Explain the reasons for the continued restrictions to the child; and

Medium-Low (2) Document the reasons in the child’s record.

Subchapter H, Admission

Division 1, All Foster Homes

§750.501. What are the requirements for admission?

Subchapter H, Admission
Division 1, All Foster Homes
September 2010

You must comply with:

(no weight) (1) Division 1, Subchapter H of Chapter 749 of this title (relating to Admissions);

(no weight) (2) Division 2, Subchapter H of Chapter 749 of this title (relating to Admission Assessment);

(no weight) (3) Division 3, Subchapter H of Chapter 749 of this title (relating to Required Admission Information); and

(no weight) (4) Division 4, Subchapter H of Chapter 749 of this title (relating to Emergency Admission).
§750.503. Who must develop the admission assessment?

The person who develops a child's admission assessment must meet one of the following qualifications:

1. A master's degree in social work or other human services field from an accredited college or university and a minimum of one year of experience in children's or family services;

2. A master's degree from an accredited college or university and two years of experience in children's or family services;

3. A bachelor's degree in social work or other human services field from an accredited college or university and two years of experience in children's or family services; or

4. A bachelor's degree from an accredited college or university and three years of experience in children's or family services.

Subchapter I, Service Planning and Discharge

§750.601. What are the requirements for service planning and discharge?

You must comply with Subchapter I of Chapter 749 of this title (relating to Foster Care Services: Service Planning, Discharge).

Subchapter J, Medical and Dental

§750.701. What are the requirements for medical and dental care?

You must comply with Subchapter J of Chapter 749 of this title (relating to Foster Care Services: Medical and Dental).

Subchapter K, Daily Care, Problem Management

§750.801. What are the requirements for daily care and problem management?

You must comply with Subchapter K of Chapter 749 of this title (relating to Foster Care Services: Daily Care, Problem Management).

Subchapter L, Emergency Behavior Intervention

§750.901. What are the requirements regarding emergency behavior intervention?

You must comply with Subchapter L of Chapter 749 of this title (relating to Foster Care
Subchapter M, Capacity and Child/Caregiver Ratio; Supervision; Respite Child-Care Services; and Foster Family Relationships

§750.1001. What are the requirements for capacity and child/caregiver ratios?

You must comply with Division 5, Subchapter M of Chapter 749 of this title (relating to Capacity and Child/Caregiver Ratio).

§750.1003. What are the requirements for supervision?

You must comply with Division 6, Subchapter M of Chapter 749 of this title (relating to Supervision).

§750.1004. What are the requirements for normalcy?

You must comply with Division 7, Subchapter M of Chapter 749 of this title (relating to Normalcy).

§750.1005. What are the requirements for respite child-care services?

(a) You must comply with Division 8, Subchapter M of Chapter 749 of this title (relating to Respite Child-Care Services), with the exception of §749.2627 of this title (relating to What must occur before one of my foster homes accepts a child for respite services?).

(b) You must ensure that providing respite child-care services is not a conflict of care for any other children placed in your foster home.

§750.1007. What are the requirements for foster family relationships?

You must comply with:

1. Division 9, Subchapter M of Chapter 749 of this title (relating to Agency-Foster Family Relationship), with the exception of §749.2655 of this title (relating to When must a foster home notify you of changes that affect the foster home?); and

2. §750.1009 of this title (When must you notify Licensing of changes that affect the foster home?).
§750.1009. When must you notify Licensing of changes that affect the foster home?

Subchapter M, Capacity and Child/Caregiver Ratio; Supervision; Respite Child-Care Services; and Foster Family Relationships
January 2007

You must notify Licensing of any of the following changes as follows:

<table>
<thead>
<tr>
<th>Change:</th>
<th>Time for notification:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) (High) In the location of the foster home.</td>
<td>Before moving.</td>
</tr>
<tr>
<td>(2) Major life changes in household composition:</td>
<td></td>
</tr>
<tr>
<td>(A) (Medium) Marriage, divorce, separation, death, birth, or any other change in household composition;</td>
<td></td>
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<tr>
<td>(B) (High) A serious health problem that affects the ability of the foster parent to care for children; or</td>
<td></td>
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<tr>
<td>(C) (Medium) Extended absences by one parent, such as military services or job assignments.</td>
<td>Before the change occurs, if possible; otherwise, immediately upon discovery.</td>
</tr>
<tr>
<td>(3) (Medium-High) A change affecting a condition of the license.</td>
<td>Before the change occurs, if possible; otherwise, immediately upon discovery.</td>
</tr>
</tbody>
</table>

Subchapter N, Health and Safety Requirements, Environment, Space and Equipment

§750.1101. What are the requirements for health and safety, environment, space, and equipment?

You must comply with Subchapter O of Chapter 749 of this title (relating to Foster Homes: Health and Safety Requirements, Environment, Space and Equipment), with the exception of §749.2965 of this title (relating to How must I determine whether weapons, firearms, explosive materials, or projectiles are present in a foster home?).

Subchapter O, Assessment Services

§750.1201. What are the requirements to provide an assessment services program?

You must comply with Subchapter T of Chapter 749 of this title (relating to Additional Requirements for Child-Placing Agencies That Provide an Assessment Services Program).
Appendix A, Vaccine-Preventable Diseases

This guide is intended to provide you with more information to assist in the development and implementation of a vaccine-preventable disease policy for your program.

What must the policy for protecting children from vaccine-preventable diseases include?

Your operation is responsible for developing a policy that includes all areas addressed in §750.111.

How will Licensing evaluate for compliance?

Licensing will review your program’s policy to ensure that it covers each of the eight required areas. Licensing staff will ensure that your operation outlines how you will maintain either written or electronic records for each employee’s compliance with your policy as well as any exemptions. We will not evaluate based on the content of each policy item.

What would be an example of how licensing will evaluate my operation’s compliance with the new rule?

The new rule requires you to specify any vaccines that you have determined an employee must have based on the level of risk the employee presents. Licensing staff will review your policy to ensure you have specified any vaccines an employee must have. For example, if your policy outlines that all employees must only obtain a flu vaccine once every 12 months then we would only review compliance with the employee’s requirement to obtain a flu vaccine.

What immunizations are recommended for adults?

The Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention (CDC) develops the recommendations and they are listed on the CDC website at http://www.cdc.gov/vaccines/schedules/downloads/adult/adult-schedule.pdf

Do I have to require employees to obtain all immunizations recommended by the CDC?

No, employees at your program will only need to obtain immunizations that are required in your policy. It is up to you to determine what immunizations will be required and which employees are required to obtain them based on their level of risk as determined by their routine and direct exposure with children.

How do I determine an employee’s level of risk?

An employee’s level of risk is determined by the policy you develop. The basis for determining an employee’s level of risk must be outlined in your policy and must be based on the employee’s routine and direct exposure to children. Items to consider when you develop policy include:

- What are the employee’s primary duties?
- How closely does the employee work with children? (For example, does the employee change diapers, assist with toileting, prepare or serve food)
- How often does the employee work with children? (Regular contact vs. substitute basis)
- What are the ages of children the employee works with?
Can an employee be exempt from immunizations that my program’s policy requires?

Yes, an employee may be exempt from one or more of your program’s required immunizations for:

- Medical conditions identified as contraindications or precautions by the CDC; or
- Reasons of conscience, including a religious belief.

What procedures must an employee follow to be exempt from having a required vaccine?

Your policy must address exemption procedures an employee must follow in order for you to determine the employee’s qualification of an exemption.

What are some examples of acceptable documentation for exemptions?

- For medical conditions, acceptable documentation may include a note from the employee’s health care professional providing a statement that the required vaccine is medically contraindicated or poses a significant risk to the health and well-being of the individual.
- For reasons of conscience, acceptable documentation may include a signed and dated statement from the employee that states the employee is exempt for reasons of conscience, including the person’s religious beliefs.

What are some examples of procedures that an exempt employee must follow to protect children in care from exposure to disease?

It is up to your operation to determine what and when protective procedures will be required.

Examples of protective procedures include:

- Wearing gloves when handling or cleaning body fluids, such as after wiping noses, mouths, or bottoms, and tending sores;
- Specifying that an employee with open wounds and/or any injury that inhibits hand washing, such as casts, bandages, or braces, must not prepare food or have close contact with children in care;
- Wearing masks when the employee has respiratory symptoms to reduce the spread of droplets to surrounding areas;
- Wearing masks when taking care of children with respiratory symptoms;
- Removing gloves and washing hands immediately after each task to prevent cross-contamination to other children;
- Excluding the employee from direct care when the employee has signs of illness.
How can I determine that an employee has complied with my operation’s policy?

You must specify in your policy how you will verify that an employee has complied with your policy. This must include what written and/or electronic documentation you will accept. Examples of documentation may include:

- Copy of the employee’s current immunization record;
- Receipt that includes date a required immunization was received;
- Letter signed by a health care professional that lists the date an immunization was received;
- Documentation of exemption for medical reasons from a health care professional;
- Signed and dated statement from the employee for exemption based on a reason of conscience.

Where can my employees get the recommended immunizations?

Individuals should start with their health care provider. Other resources in your area include pharmacies, the health department, and public or community health clinics. For a list of local health departments in Texas visit the Texas Department of State Health Services (DHS) website at: [http://www.dshs.state.tx.us/regions/lhds.shtm](http://www.dshs.state.tx.us/regions/lhds.shtm)

Are there any other resources available for employees to receive the recommended immunizations?

Yes, the Adult Safety Net program created by The Texas Department of State Health Services (DHS) to increase access to vaccination services in Texas for uninsured adults.

What is the Adult Safety Net program?

The Adult Safety Net (ASN) program provides vaccine purchased with public funds to participating clinics to be used for immunizing uninsured adults.

How do I find an Adult Safety Net provider in my area?

Visit the ASN website at [www.dshs.state.tx.us/ASN](http://www.dshs.state.tx.us/ASN) and click on the search page to locate an ASN clinic near you. (Please check with the clinic before visiting to make sure they can see you.)

Who is eligible to receive vaccinations from the ASN program?

Adults ages 19 years and older that do not have health insurance are eligible to receive ASN vaccines.

Who is not eligible to receive ASN vaccines?

Individuals who do not qualify for ASN vaccines include:

- Adults who have Medicare, Medicaid, or any other insurance, including private insurance.
- Adults who are underinsured for adult vaccines (e.g., those who have healthcare insurance that does not cover adult vaccines).
- Individuals younger than 19 years of age.
What vaccines are offered through the ASN program?

The following is a list of vaccines currently offered through the ASN program and a description of the diseases they prevent.

- Hepatitis B Vaccine — prevents infection of the liver by the hepatitis B virus, which can lead to liver cancer, cirrhosis of the liver, liver failure, and death.
- Hepatitis A Vaccine — prevents infection of the liver by the hepatitis A virus. Symptoms of hepatitis A include lack of energy, diarrhea, fever, nausea and jaundice (yellow color to the whites of the eyes or skin).
- Hepatitis A and Hepatitis B Combination Vaccine—see above.
- Human Papillomavirus (HPV) Vaccine — prevents infection from several strains of HPV, including those that cause genital warts and several types of cancer, such as cervical, anal, penile, and throat cancer.
- Measles/Mumps/Rubella (MMR) Vaccine — prevents infection from the measles virus, which can lead to rash, ear infection, brain damage, and death. Prevents infection from the mumps virus, which can cause fever, swollen glands, headache, and can lead to deafness and meningitis. Prevents infection from rubella virus, which can cause rash, arthritis, and miscarriage in pregnant women.
- Pneumococcal Polysaccharide (PPSV23) Vaccine — prevents infection by the Streptococcus pneumoniae bacterium, which is one of the most common causes of severe pneumonia and can lead to other types of infections, such as ear infections, sinus infections, meningitis (infection of the lining of the brain and spinal cord), and blood stream infections (bacteremia).
- Tetanus, Diphtheria, and Pertussis (Tdap) Vaccine — prevents tetanus, which can cause muscle spasms, lockjaw, paralysis, and death. Prevents diphtheria, which can cause suffocation and heart failure. Prevents pertussis (known as "whooping cough"), which can cause severe coughing that can lead to rib fractures, pneumonia, and death. The CDC recommends* one dose for all pregnant women during every pregnancy and all other adults who have not yet received Tdap vaccination, especially those who come in contact with infants.
- Tetanus and Diphtheria (Td) Vaccine — similar to Tdap vaccine (see above), but protects against tetanus and diphtheria only, without the pertussis component.

If I qualify for ASN vaccine, do I have to pay anything?

ASN vaccines are supplied to participating medical providers at no cost. This means that ASN providers cannot charge a fee for the vaccine itself. However, providers are allowed to charge an administration fee of up to $25 for each vaccine that is administered. Although ASN providers may charge this administration fee, they cannot deny the vaccine because of an inability to pay it.