



JOHN A. WAGNER  
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**  
744 P Street • Sacramento, CA 95814 • www.cdss.ca.gov



ARNOLD SCHWARZENEGGER  
GOVERNOR

November 5, 2009

ALL COUNTY INFORMATION NOTICE NO. I-76-09

REASON FOR THIS TRANSMITTAL

- State Law Change
- Federal Law or Regulation Change
- Court Order
- Clarification Requested by One or More Counties
- Initiated by CDSS

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: KINSHIP/FOSTER CARE EMERGENCY FUND

REFERENCE: SUPERSEDES ALL COUNTY INFORMATION NOTICE NO. I-68-08

This letter is to provide counties with information regarding the implementation of the Kinship/Foster Care Emergency Fund. The Kinship/Foster Care Emergency Fund was established in recognition of the number of foster children placed with relative caregivers in foster homes on an emergency basis.

**BACKGROUND**

The purpose of the Kinship/Foster Care Emergency Fund is to enable successful emergency placement of a child with a relative, nonrelative extended family member (NREFM), or foster parent by removing barriers to such a placement. The fund may also be used to retain a placement when extenuating circumstances may alter the stability of the placement. Additionally, funds may be used to assist a prospective relative, NREFM, or foster family home applicant in meeting the requirements to provide care to a child.

All expenditures of this funding are to be for one-time needs and not to pay for recurring expenses. (Note: Social services such as short-term counseling are not an allowable Title IV-E cost and as such, may not be claimed to this fund.) A county may serve a relative caregiver, NREFM, or prospective foster parent requiring one-time emergency assistance for expenses not covered by other funding sources, such as Specialized Care Incentives and Assistance Program (SCIAP) or clothing allowance.

Examples of the types of costs for which a county may use the Kinship/Foster Care Emergency Fund allocation are costs that:

- Remove barriers that prevent the safe placement of a child (e.g., fire or water safety hazards, medication storage, electrical repair, or inadequate living space).
- Defray relocation expenses when necessary to ensure the child's safety or to provide adequate living space.
- Meet a child's special needs when those needs cannot be met through other funding sources (e.g., SCIAP).
- Make emergency purchase of a major appliance or furniture when necessary to serve the placement of a child.
- Defray utility installation fees.
- Provide temporary childcare to permit adjustment of job and/or home schedules when an emergency placement is made.

#### ALLOCATION AMOUNT

Individual county allocations and claiming instructions for Fiscal Year (FY) 2009/10 have been issued in County Fiscal Letter 09/10-25, available at:  
[www.dss.cahwnet.gov/lettersnotices](http://www.dss.cahwnet.gov/lettersnotices).

Counties that currently receive an allocation will continue to receive an allocation each fiscal year. A county may elect to discontinue receiving an allocation. A letter from the county stating it does not want to continue receiving an allocation is required; please submit this letter to the address listed below by November 30, 2009.

California Department of Social Services  
Child & Youth Permanency Branch  
ATTN: Kinship Care Policy & Support Unit  
744 P Street, M.S. 8-13-66  
Sacramento, California 95814

All counties that receive Kinship/Foster Care Emergency Funds must submit a report of its FY 2009/10 fund activities (see Attachment A) by **September 1, 2010**. A reminder will be sent to all participating counties prior to the submission deadline.

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If you have any questions concerning the use of these funds, please contact me at (916) 657-2614 or the Kinship Care Policy and Support Unit at (916) 657-1858. Questions concerning the allocations or claiming should be directed to [fiscal.systems@dss.ca.gov](mailto:fiscal.systems@dss.ca.gov).

Sincerely,

***Original Document Signed By:***

KAREN B. GUNDERSON, Chief  
Child and Youth Permanency  
Children and Family Services Division

Enclosure

**KINSHIP/FOSTER CARE EMERGENCY FUND  
REPORT  
Fiscal Year 2009-2010**

Please provide the following information by September 1, 2010. Completed reports should be mailed, faxed or emailed to:

California Department of Social Services  
Child and Youth Permanency Branch  
ATTN: Kinship Care Policy and Support Unit  
744 P Street, M.S. 8-13-66  
Sacramento, California 95814  
Fax: (916) 657-3791  
Email: [kinship.care@dss.ca.gov](mailto:kinship.care@dss.ca.gov)

**REPORTING COUNTY:** \_\_\_\_\_ **COUNTY CONTACT:** \_\_\_\_\_

**TELEPHONE NUMBER** \_\_\_\_\_ **FAX NUMBER** \_\_\_\_\_ **EMAIL ADDRESS:** \_\_\_\_\_

**HOW** were the funds **SPENT**? List **ALL** the reasons for using these funds.

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**NUMBER** of children **PLACED** with a relative, NREFM or prospective foster parent with the assistance of these funds: \_\_\_\_\_

**NUMBER** of children in a relative or NREFM placement **MAINTAINED** with the assistance of these funds: \_\_\_\_\_