The Importance of Vitamin D

Years ago many people thought Vitamin D was only important for maintaining healthy bones and teeth. However, recent research has shown that Vitamin D plays several important roles in the body. Vitamin D is crucial for your child’s development, and is also necessary for overall good health because of its ability to lower the risk of illnesses.

Despite recent evidence about the benefits of Vitamin D, many children and adults are not getting enough Vitamin D. Though the exact number of people who are Vitamin D deficient is hard to estimate, up to 50 percent of people may have Vitamin D levels that are too low. In addition, people with a darker skin complexion may be at higher risk of being Vitamin D deficient.

Children and adults are more likely to have Vitamin D deficiency due to a lack of sun exposure. The current lifestyle of working and playing indoors has contributed to the growing number of Vitamin D deficiency cases worldwide. Not to mention, many people may not be aware that they are not getting enough Vitamin D.

What is Vitamin D?

Vitamin D is a nutrient that helps the body take in calcium from the foods that we eat. Without Vitamin D, our bodies cannot effectively absorb calcium. Together, calcium and Vitamin D build bones and keep them strong. Promoting better bone health in childhood will help ensure optimal bone health in adulthood, which is why Vitamin D deficiency should be on every parent’s radar.

Vitamin D is important to the body in many other ways. Muscles need Vitamin D to move. For example, nerves need it to carry messages between the brain and every body part. Vitamin D also plays a part in heart health and fighting infection. The immune system needs Vitamin D to fight off invading bacteria and viruses. Studies have shown that Vitamin D helps reduce children’s likelihood of developing the flu. Vitamin D might also play an important role in regulating mood and warding off depression. In one study, researchers found that people with depression who received Vitamin D supplements noticed an improvement in their symptoms.

Vitamin D Deficiency

Many people who have a mild Vitamin D deficiency have no symptoms, or may complain

Continued on page 2
of only common symptoms such as tiredness or general aches. Severe Vitamin D deficiency in children can cause a disease called rickets, a disorder that softens and weakens the bones and can occasionally lead to skeletal deformities. Children who have rickets may look like they have curved legs, and complain of bone pain in their legs and muscle pains or muscle weakness.

In small children, very low Vitamin D levels can cause low calcium levels, which can give rise to muscle spasms and even seizures. In older children and adults, Vitamin D deficiency leads to a condition associated with soft bones called osteomalacia.

Other symptoms associated with Vitamin D deficiency include tooth decay and increased risk for infections. Children with Vitamin D deficiency may be late teething because teeth development could be affected. Additionally, children with Vitamin D deficiency are more prone to infections. These symptoms can improve once calcium levels are corrected and Vitamin D levels are increased.

How Much Vitamin D Does My Child Need?
The amount of Vitamin D a child needs each day depends on his or her age. Infants who are younger than 1 year old need 400 IU of Vitamin D a day. Baby formula has 400 IU per liter, so infants who drink at least 32 ounces of formula each day most likely get enough Vitamin D. If your child gets less than 32 ounces of formula each day, ask your health care provider about giving your baby a Vitamin D supplement.

Children older than 1 year need 600 IU or more of Vitamin D a day. Healthcare providers often want healthy kids to take 600 to 1,000 IU daily.

Some children might need more Vitamin D, such as those who have certain medical problems (for instance, obesity, celiac disease, cystic fibrosis, multiple fractures, or bone pain), are healing from bone surgery, or are taking medicines such as anti-seizure medicines that block the way the body uses Vitamin D. Your health care provider can talk to you about whether your child is getting enough Vitamin D.

Ways to Get Vitamin D
There are two natural ways children can receive Vitamin D: through sun exposure and eating certain foods. Sun exposure is the best way of ensuring your child receives an adequate amount of Vitamin D. The body makes Vitamin D when skin is directly exposed to the sun, and most people meet at least some of their Vitamin D needs this way. Just 5 to 30 minutes of sun exposure on the face, arms, legs and back at least twice a week may provide enough Vitamin D. Skin exposed to sunshine indoors through a window will not produce Vitamin D. However, the risk of skin cancer from UV rays in sunlight has to be carefully weighed and should be discussed with your child’s healthcare provider. If you and your children live in a sunny place, chances are your Vitamin D levels are pretty good, but many of us are not able to rely solely on the sun and need to rely on Vitamin D intake from food sources.

Drinking cow’s milk is the main way children get Vitamin D today. In a 2016 study, researchers found that children who drank alternative milks, such as soy or almond milk, had much lower Vitamin D levels than children who drank cow’s milk. Though many brands claim they are fortified with Vitamin D, they may not actually be adding as much as they say. (Goat’s milk, however, does seem to provide about the same amount of Vitamin D as cow’s milk, so that can be a suitable alternative.)

Unfortunately, there are very few other foods besides milk that provide as much Vitamin D. Fatty fish such as salmon, tuna, and mackerel are among the best sources of Vitamin D. Mushrooms,

Vitamin D continued on page 7
Champions for Children

Carley Flores-Adams

Our winter Champion for Children is Carley Flores-Adams. Carley always knew she wanted to be a foster parent since she was in high school. She also had family who benefited from child welfare and wanted to make a difference.

It was, as she says, the Perfect Storm when she met and married her husband, who is studying to become a Special Education teacher and shared her love of kids and passion to work in child development. They both aspired to become foster parents.

The Flores’ first placement was in August of 2017 after they spent three years preparing to be a resource family. Carley had been working with teens but has since cared for toddlers, gaining the full spectrum of experience caring for children.

Carley understands that her role as a foster parent is to best meet the needs of the children in her care through facilitating reunification, which is what most of the children desire. Advocating for foster children as they navigate through the system, Carley does all she can to support them through all the transitions and changes. As she finds challenges in fostering, she has been working diligently to voice her concerns for all involved. As she says, “There is a steep learning curve to meet the needs of all parties involved. I want to work toward making sure to advocate so that everyone is heard and all their needs are meet. Most importantly, making sure transitions for the children are smooth and understood.”

Carley feels that being a foster parent has given her the opportunity to help make a difference in her foster children’s lives and she feels accomplished when she helps them meet new developmental markers, and share successes and milestones. Carley also says it has given her and her husband the opportunity to be parents and develop an understanding and compassion that only a parent can have, which will help her continue to work for change for the children.

The San Francisco Human Services Agency and the Parenting for Permanency College salute Carley’s passion for advocating for families and her compassion for the children to make her our Winter Champion for Children.

BY CYNTHIA RAMSELL

Support the San Francisco Foster Youth Fund

The San Francisco Foster Youth Fund is registered as a charity with the Community Thrift Store at 623 Valencia Street, San Francisco. Donate your used items in the name of “SF Foster Youth Fund, Charity #160” to support the Foster Youth Fund. Learn more at www.communitythriftsf.org.

San Francisco Foster Parent Association Announcement

Join Us for Our Monthly Meetings!

Please join us at our meetings to meet other foster parents. We are a stand-alone and member-run nonprofit organization to empower ALL foster, adoptive, relative and non-relative care providers. Our goal is for all care providers to come together to achieve high-quality care for the well-being of our children and youth.

Call or text Lorraine Hanks, Foster Parent Association President, at (415) 756-5240 for date and location of upcoming meetings.

Light dinner served.
Greetings from the PPC Team

This past weekend we celebrated our Annual Holiday Event at the South San Francisco Conference Center. Our day included a wonderful Keynote presentation by Dr. Jorge Partida, beautiful vocals by Israel Gray and a surprise appearance from Mr. and Mrs. Claus. It was a joyful day filled with laughter and fun.

A special thanks to our volunteers and donors whose support help create a wonderful day:

- Family and Children Services Leadership and Staff
- Braid Mission—Sponsorship of the Teen Room
- Redemption Church—Sponsorship of the Teen Gift Cards and Volunteers
- Linda Hannawalt, QuiltWorks.com—Donation of bags, bedding and clothing items
- Binti—Volunteers
- Family Support Services Respite Program—On-Site Childcare
- PixCo Productions—Nonprofit Discount
- South San Francisco Conference Center—Nonprofit Discount
- San Francisco Families Making a Difference Mentors: Mary Jones, Michelle Tanskley and Ettie Rogers—Volunteers

The PPC team thanks you for all that you do and for your continued dedication. Happy Holiday Season!

Warm regards,

AMABEL BAXLEY, MSW
WORK FORCE DEVELOPMENT SPECIALIST
Parenting for Permanency College News

Parenting for Permanency College Trainings  
January–March 2018

Register Today!
To register and confirm training locations, please contact Heather at (415) 938-6555 or by email at horiebe@csufresno.edu. Please note if we do not meet the minimum number of attendees for each training we may need to cancel that series.

| January 2018 | English RFA Pre-Service Training | January 6-20, 2018 9:00 am – 3:30 pm |
| English SA/HIV Infant Program Training | January 9 – February 8, 2018 5:30 pm – 8:30 pm Tuesdays/Thursdays 1 Saturday (February 3) 9:00 am – 5:00 pm |
| English CPR/First Aid E | January 6, 2018 9:00 am – 3:30 pm |
| English CPR/First Aid E | January 20, 2018 9:00 am – 3:30 pm |

| February 2018 | English RFA Pre-Service Training | February 6-15, 2018 5:30 pm – 8:30 pm |
| Spanish RFA Pre-Service Training | February 3-10, 2018 9:00 am – 3:30 pm |
| English RFA Pre-Service Advanced | February 20-22, 2018 5:30 pm – 8:30 pm |
| ABC’s of Baby Care | February 21, 2018 5:30 pm – 8:30 pm English |
| English CPR/First Aid E | February 3, 2018 9:00 am – 3:30 pm |
| Spanish CPR/First Aid E | February 24, 2018 9:00 am – 3:30 pm |

| March 2018 | English RFA Pre-Service Training | March 3-10, 2018 9:00 am – 3:30 pm |
| Spanish SA/HIV Infant Program Training | March 3 – April 7, 2018 9:00 am – 5:00 pm Saturdays 1 Wednesday (April 7) 9:00 am – 5:00 pm |
| English CPR/First Aid E | March 24, 2018 9:00 am – 3:30 pm |

Parenting for Permanency:  
A Journey of the Heart
Training: to enhance care providers’ knowledge base and skills, Support: to elevate care providers’ spirits and to create bonds of positive and healthy relationships.

Register for English and Spanish Support Groups with Sharon Walchak at (415) 401-4313 or sharon.walchak@sfgov.org. Location for all support group meetings is to be determined.

ENGLISH SUPPORT GROUPS
Held every 3rd Tuesday of the month 5:30 pm refreshments • 6 – 8 pm meeting

January 15, 2018  
Grief and Loss  
Presenter: Judith Lefler

February 27, 2018  
Topic TBA  
Courtney Thomas

March 20, 2018  
Topic TBA  
Presenter: Natalia Estasi

SPANISH SUPPORT GROUPS
Held every 3rd Thursday of the month 5:30 pm refreshments • 6 – 8 pm meeting

January 18, 2018  
Topic TBA  
Presenter: Rocio Rodriguez

February 8, 2018  
Topic TBA  
Presenter: Natalia Estasi

March 15, 2018  
Topic TBA  
Presenter: TBA
# Parenting for Permanency College News

## SPRING 2018 SCHEDULE

City College of San Francisco Child Development & Family Studies Department

**Foster & Kinship Care Education**

CCSF Evans Campus • 1400 Evans Avenue, Room 107, San Francisco

All classes meet the requirements for Continued Education for Licensed Foster Parents and Kinship Care Providers and specifically meet the mandated 8 hours of Continued Education. Certificates of Completion issued at the end of each session. Please register early by calling Brenda at (415) 452-5605.

### TALK TIME TUESDAYS AT EVANS CAMPUS

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<thead>
<tr>
<th>January 16</th>
<th>January 23</th>
<th>January 30</th>
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<tbody>
<tr>
<td>How to Prevent Allegations</td>
<td>Child Abuse, Neglect &amp; Reporting</td>
<td>Grief &amp; Loss / Effects of Removal &amp; Placement</td>
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<td>Multiculturalism in the Foster Care System</td>
<td>Activities Promoting Positive Self Esteem</td>
<td>Helping Children Manage Disappointment</td>
<td>Child Development</td>
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<td>FLEX DAY—NO CLASS MEETING</td>
<td>Effective Communication</td>
<td>Collaborating w/ CWW</td>
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### ADOLESCENT WEDNESDAYS AT EVANS CAMPUS

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<td>Educational Support For Children In Placement</td>
<td>Working with Probation Kids and the Law</td>
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<td>Discharge and Emancipation</td>
<td>Understanding AB-12</td>
<td>Familial Effects of Drugs on Children</td>
<td>Sexually Abused &amp; Exploited Youth</td>
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<td>10 am - 1 pm</td>
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<tr>
<td>Tips On Behavioral Management</td>
<td>No Class Meeting—At State Conference</td>
<td>Effects of Domestic Violence On Youth</td>
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Parenting for Permanency College Training Graduations

- **October English PreService Training.**
- **November Spanish PreService Training.**
- **November English PreService Training.**

SA/HIV Graduation.
Holiday Fire Safety Tips

In the recent North Bay fires, one night of gusty winds grew into a string of destructive fires creating the worst wildland-urban cluster of fires in California’s history. The fires burned more than 280 square miles of land and destroyed more than 4,500 structures across eight counties.

While fires are generally unexpected and can occur at any time, families should take certain steps to ensure the whole family’s safety. Homeowners and residents can prevent fires by conducting periodic inspections that their properties are free of fire hazards and that smoke alarms are working properly.

Cal Fire suggests that families replace the batteries in their smoke alarms every year. For homes that use space heaters, keep them at least three feet away from other items. Plug in any major appliances into a wall outlet rather than into an extension cord. For lights or extension cords used outside, check to see that they are intended for outdoor use and are weather-resistant. Do not use outdoor lights inside of your house because they may be too hot and unsafe to use indoors. Lastly, do not smoke in a home where someone is using a supplemental oxygen tank. Although oxygen itself is not flammable, it creates an environment in which fires can easily ignite and burn quickly. You should never smoke inside a home where supplemental oxygen is in use.

In addition, during the winter season, families should take extra precautions to ensure a safe holiday. According to Cal Fire, the winter holiday is a time when fire departments across the nation see a significant increase in preventable home fires. Hundreds of people are injured or die unnecessarily each winter season as a result of fires involving Christmas trees, candles and unattended cooking. Cal Fire advises that by taking a few precautionary steps, everyone can enjoy the lights and festivities of the holiday season and remain safe while doing so.

When using natural cut Christmas trees, saw off at least 1/2 inch of the trunk above the original cut and mount the tree in a support device that holds water. Typically, Christmas tree lots take care of this step for you unless you cut down your own tree. The mount that holds the water should be able to cover the tree stem at least two inches when full. Check the water level daily to see if the tree has enough water.

Select the location for your tree carefully. Keep the tree away from fireplaces, heating vents, wall furnaces, and other heat producing appliances that may dry out the tree. Dispose of your tree when the needles or leaves easily fall off when a tree branch is shaken or if the needles are brittle and break when bent between the thumb and index finger.

Do not use candles or other flaming devices on your tree or near other holiday decorations. The San Francisco Fire Department recommends that no more than three sets of lights be used per extension cord. Do not place the cords under rugs or in paths of travel.

When the holiday is over and the tree is taken down, do not attempt to burn the tree in your fireplace, backyard, or front yard. Dry trees throw off tremendous amounts of heat and fire. Leave the tree in front of your house for your scavenger company on the day of your regular garbage pick-up.

Vitamin D continued from page 2

beef liver, cheese, and egg yolks provide some amounts of Vitamin D. Fortified foods, including breakfast cereals, low-fat spreads, and some brands of orange juice also provide Vitamin D.

Making Sure Your Child Gets Enough Vitamin D

Because Vitamin D is so important, parents should make sure children get enough Vitamin D. Doctors can diagnose a Vitamin D deficiency by performing a simple blood test. If your child is diagnosed with a Vitamin D deficiency, your child’s doctor will likely recommend that he or she take a daily Vitamin D supplement. If your child’s health care provider recommends a Vitamin D supplement, ask him or her for a written prescription.

But, the best way to maintain healthy levels of Vitamin D is simply to spend some time in the sun. Take a walk in the sun, and encourage your child to go outside and play.
Transitioning to Adulthood

Get to Know the SF-ILSP Program

In 2010, California passed a major state law that offers foster care benefits until age 21. The California Fostering Connections to Success Act, better known as AB 12, allows youth who would have aged out of the foster system at age 18 to remain under state care as non-minor dependents until they are 21 years old. Prior to AB 12, foster youth who were emancipated at age 18 struggled. As many as 50% of former foster youth became homeless during the first two years after exiting foster care and many became incarcerated. Overwhelming evidence showed that youth who left foster care needed further support into adulthood.

San Francisco County has taken a proactive approach to provide services for former foster youth. These services are offered under the San Francisco Independent Living Skills Program (SF-ILSP). SF-ILSP is open to current and former foster youth, Kin-GAP youth, and probation youth from ages 16 to 20 who are currently in an out-of-home placement or were in an out-of-home placement on or after their 16th birthday.

SF-ILSP offers a full range of services designed to assist and support emancipating foster care and probation-involved youth in their transition to independent living. Their services include education assistance, career development, daily living skills building, health and wellness training, housing assistance, and permanence support. The program also offers a variety of workshops as well as fun events and activities. These events include:

- **Life Skills workshops** on Tuesdays from 4–6 p.m. at ILSP. Topics range from cooking lessons, resume building, career exploration, healthy relationships, financial aid, and financial literacy. All youth receive a $10 gift card and dinner for attending.
- **YES! Internship program**, a 12-week program where youth are paid minimum wage to work in internships in San Francisco. Participants are paid for time spent in the mandatory training workshops on Thursdays at ILSP as well. Some of these internships become full-time jobs.
- **Community events** each month that allow youth to connect with each other and other providers.

For more detailed information, visit the SF-ILSP website at www.sfilsp.org.

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**Licensing Regulation**

**Relatives/Friends as Alternate Caregivers**

All parents, including resource parents, may need an occasional break from caring for their children or have an event that will require them to be away from home. At times, parents may wish to leave their children with relatives or friends for the time that they are away from home. As a resource parent, it is your responsibility to ensure that children receive adequate care and appropriate supervision while living in your home.

According to the Resource Family Approval Written Directives Section 11-13, if an RFA caregiver wants a relative or friend to serve as an alternate caregiver for a period longer than 24 hours, that relative or friend must have completed a background clearance that includes fingerprinting and a Child Abuse Central Index check. In addition, the alternate caregiver will need to be approved by the child’s social worker. If a relative or friend provides care and supervision in his or her home, a resource parent should use the reasonable and prudent parent standard to determine that the alternative caregiver’s home is safe and appropriate for the child.

While clearing a relative or friend as an alternate caregiver may require a few extra steps, resource parents are encouraged to complete these steps early on. It saves children from having to be moved abruptly when a resource parent has an emergency that requires them to go out of town or they fall ill and have to be hospitalized.
Resource parents are encouraged to attend conferences related to caring for children. If you are interested in attending an approved conference by San Francisco Family & Children Services (FCS), FCS may sponsor a resource family to attend. To be considered, please fill out and return the enclosed conference form. If you do attend a conference, we invite you to submit an article about your experience and share with other resource parents what you learned. This article was submitted by Jackie Decierdo.

As I reflect after the conclusion of the 41st Foster Parent Training Conference, I want to first thank the San Francisco County Human Services Agency for sending my husband and me to this event. We’ve learned so much that will help us care for my 5-year-old nephew, Rei. I wanted to share my experience so here’s my story.

Two years ago I received a call from a social worker asking me to take in my then 3-year-old nephew since his parents were abusing drugs. There was no hesitation since he was family and I had faith that my sister would clean up her act. So, while he was with me I raised him like I did my own grown children making sure he had all of the necessities living in a safe and loving environment. After a year and a half he was reunited with his parents. It was bittersweet but I had done my part and so it was time to move on. I had no clue that after eight months I would get that same call but from a different social worker. Again, I did not hesitate even though I noticed a change in my nephew. It didn’t appear that this was the same child. He had gone back to his old bad habits of hitting, throwing tantrums and even soil his underwear. The trainings I received during the Foster Parent Training Conference gave me some insight as to what he may be going through.

Here’s what I learned in the trainings:

- **Resource/Foster and Birth Parent Panel:** I was very pleased to hear that birth and foster parents are able to co-parent and maintain a positive relationship after reunification. It gave me hope that my sister and I could somehow do the same.
- **Trauma Toolbox:** The development of the brain is greatly affected by the state of trauma one experiences. I liked the two new approaches they taught to facilitate processing traumatic memories: the butterfly hugs and one liners. I will make sure to try these with my nephew.
- **Human Sex Trafficking:** I didn’t know that I could pick and choose what trainings to take and thought I had to go straight down the list. Even though the topic did not exactly fit my situation, it was informative and makes me more aware of my surroundings.
- **Developing Permanency Connection:** This showed me how important it is to keep people in your foster child’s life even if you may not get along with them because it may be the connection or support the child is looking for.

- **Making it Work for Kinship Families:** I enjoyed hearing Bob Ruble’s story of how he took in his niece and learning the difference from obtaining a child through the foster care system and family court.
- **Supporting Your LGBTQ Youth:** I enjoyed another real life story from Shea Freedom that opened my eyes and heart to the LGBTQ community.
- **Significant Effects of Early Trauma:** This session was very informative, in which facilitators described a lot of the behaviors I see in my nephew. It has helped me to find better ways to communicate with him and his school.

As much as I’m grateful for all I’ve learned I do wish that these trainings were also given to the birth parents. It may help them to understand what their children go through due to their actions and potentially motivate them to get better. At least that’s what I would hope for regarding my sister.
QPI Corner

Powerful Partners: Birth and Foster Parents

In late 2016, Youth Law Center/Quality Parenting Initiative joined forces with the National Alliance of Children’s Trust and Prevention Funds and Casey Family Programs and began the Birth and Foster Parent Partnership.

The Birth and Foster Parent Partnership was designed to further Casey Family Program’s 2020 goals focused on the safe reduction of the number of youth in foster care. The purpose of the birth and foster parent partnership is to increase coordination between birth parents and foster parent caregivers for improved permanency outcomes for children and youth.

The project is focusing on the development of mutual recommendations, resources, and tools that will have maximum impact on policy and practice across states and nationally.

The anticipated long and short-term impacts include:

- Increase involvement of birth parents and foster parents in advocacy for improved policies and practices that benefit families and youth.
- Identify strategies to help birth parents and foster parents work together to facilitate reunification and prevent re-entry.
- Increase capacity of child welfare systems to recruit and retain foster parents willing and able to partner with birth parents.

After working with a core planning group of birth and foster parents and kinship care providers, the three organizations convened a groundbreaking meeting in June of 2017 in Seattle. The convening engaged birth parents who have navigated through the child welfare system with foster parents and caregivers who have opened their homes to be a resource for children.

The 32 participants represented 30 diverse communities in 13 states. They shared experiences, identified promising practices and recommended policy changes to help children thrive. Collectively, the birth and foster parents identified dozens of practices and policies that can be implemented to transform our current child welfare system to better serve children and their families.

In the upcoming months, the Birth and Foster Parent Partnership will continue working together to develop short and long term policy priorities, joint policy statements, and propose recommendations for consideration by policy makers at local, state and federal levels.

For more information about this partnership and how to convene your own local partnership planning group, contact your QPI staff consultant.

This article was previously published in September 2017 issue of the Youth Law Center/Quality Parenting Initiative newsletter and was reprinted with permission.

Champions for Children

In Memory of Randy Roebuck

We are sad to report that Randolph “Randy” Roebuck passed away peacefully at his home on October 12, 2017, at age 66, after a courageous three-year battle with cancer. Randy’s interest in helping children and youth began when he attended a White House Conference on Children and Youth in 1970 as the Cumberland County Co-Chair and attended a luncheon with President Nixon. In 1976, Randy moved to San Francisco and began working with children and youth as a Group Home Counselor. He worked in various nonprofit and city-sponsored organizations, attended San Francisco State University, and completed his Masters in Social Work in 1986.

Randy had a distinguished 30-year career working for the City and County of San Francisco Human Services Agency as a social worker, social work supervisor, and section manager, and received many awards, commendations and honors for his dedicated service. He was actively involved in foster parent training, and was particularly proud of finding appropriate placements for children whose families were in crisis.

Randy retired in 2010 and spent many days fishing and camping throughout Northern California with his sons and friends.

Randy was a loving, outgoing, generous person. He leaves behind a large number of family, friends and acquaintances who will miss his boisterous exuberance, friendliness and love of life.
Ask K.I.D.S!

Common Questions from Resource Families

Whether you’re a seasoned pro or just starting out, resource families have questions. Here is your opportunity to get them answered. Send us your questions and we’ll provide you with our best advice.

When a biological parent misses his or her visit with a child in my care, the child gets very disappointed. How can I handle the tears?

Visits can be difficult for children, biological parents, and resource parents. Biological parents, for example, may not understand the importance of these visits, and that could affect their willingness to visit and their attitude during the visits. A child can suffer for a number of reasons before, during, and after visits with his or her biological parents. Unfortunately, resource parents often are the ones to must cope with a child’s feelings and behavior when these visits do not go well.

There is no foolproof way to guarantee that visits between children and their biological parents will be successful. But taking a few extra steps to prepare your child can help reduce some of his or her anxiety about the visit. When appropriate, work with biological parents to plan visits. Also, tap into the social worker’s knowledge about how to ensure that the visit time and location works for everyone involved.

Inform your child about the plans, and be realistic about who will be coming and who may not come. Encourage your child to ask questions about the visit and answer them as honestly as possible without using blaming language. Have a special before-visit ritual to comfort your child.

If a visit is cancelled, provide additional comforting for your child. Assure your child that he or she is not the reason the visit was canceled, that he or she did nothing wrong, and that he or she is still loved.

I want to learn more about what sort of over-the-counter medication I can give to a child in my care. Can I give a child cough drops? Ricola? What about teas, like throat coat or kids cold tea? Sleepy time tea? Mint? Chamomile?

This is a great question with a complicated answer.

In general, knowing which over-the-counter medication or herbal remedy a child can have depends on the ingredients in each of the products. It means looking up every ingredient on the product to determine if any of these components can cause a potential allergy or negatively interact with medication a child may already be taking.

However, some medication and herbal remedies may not display the full list of ingredients. In other cases, it is hard to know what sort of reactions a child may have to a particular ingredient. Therefore, it is best to consult your child’s doctor before giving him or her over-the-counter medication.

Caregivers are advised to talk to their child’s doctor and to get a written note about the over-the-counter medication permissible to take. This doctor’s note should be documented in the child’s chart stating that the doctor gave permission for the use of a particular over-the-counter medication or herbal remedy.

If your child’s doctor gave you verbal permission on an advice call, ask the doctor to also provide written documentation that can be placed in the child’s chart. This may sound overly cautious, but just as caregivers need to get permission to give Tylenol for fever, the same is true for other treatments.

Thank you!

HSA would like to extend our deepest gratitude to Sterling Talent Solutions and Little Giant Lighting and Grip for their generosity in providing many of our children with personalized gifts during the holiday season. We hope this is the first of many years of working together to bring cheer to San Francisco children in care!

We want to hear from you, so send us your questions! Write us your questions on the lines provided on the survey form in this newsletter—we’ve even provided an envelope.
Cooking with Love

Make Mealtime Family Time

It’s worth it to make mealtime a family time. Eating a meal with family can make a child feel safe and secure. When families eat together, they eat better. Make mealtime a priority at least a few times each week. It’s a lesson your kids will use for life. Sometimes breakfast or after school snacks are a great time to sit together.

Tortilla Soup
Serves: 4

It’s the season for soup! This delicious and hearty soup tastes just as good or better the next day. If you can’t get chayote, use zucchini. And if you’re in a hurry, use shredded rotisserie chicken. Be sure to have your kids add their own toppings!

- 1½ cups onion chopped
- 3½ cups canned reduced sodium chicken broth
- 1¼ pounds bone-in chicken breasts, skin removed
- 1 cup chayote squash diced, peeled
- ¾ cup canned low sodium pinto beans rinsed, drained
- 1 tablespoon chili powder
- ½ teaspoon garlic powder
- 4 (6-inch) corn tortillas cut into strips, baked until crisp
- 1 avocado peeled, pitted, sliced

Spray a large saucepan with nonstick cooking spray. Add onion and cook over medium-high heat for 5 minutes to brown, stirring occasionally.

Add broth and cover saucepan; increase heat to high. When broth starts to boil, add chicken, squash, beans, chili powder, and garlic powder.

Bring to a boil again; lower heat and simmer for 20 minutes.

Remove chicken from soup and let cool slightly. Shred into small pieces. Add shredded chicken back to soup.

Pour soup into bowls and top with tortilla pieces and avocado. Serve immediately.

Nutrition Info
Serving size: 2 cups
Total calories: 390 Total fat: 12 g Saturated fat: 3 g Carbohydrates: 32 g Protein: 41 g Fiber: 9 g Sodium: 600 mg

From EatFresh.org, a project of Leab’s Pantry and SFHSA. Leab’s Pantry works with individuals and organizations to support cooking healthy, nourishing meals. Visit http://leahspantry.org/ to learn more or contact Leah’s Pantry at info@leahspantry.org.

Activities for All

Experience a Wintery Ice Skating Rink

Even though Bay Area residents may not wake up to fresh blankets of snow on the ground, that does not mean that they can’t dig out their mittens from the back of the closet and enjoy the chill in the air at one of the many ice skating rinks that pop up this time of year. So, rally the family and experience the Bay Area’s share of seasonal (and some year-round) rinks that can make you feel—at least for a little bit—like you are living in a winter wonderland.

Union Square Holiday Ice Rink, San Francisco
With the giant holiday tree aglow and the Macy’s window displays a’sparkling, this ice rink is a must-do this holiday season. While it is a magical experience for the whole family, keep in mind it can get busy, and that could be a little tricky for less experienced skaters. Open seasonally.

Yerba Buena Ice Skating Center, San Francisco
San Francisco’s only year-round ice skating center, this rink is open 7 days a week, so you can appease the kids after the holidays if they catch the skating bug! Good for all skill levels. Open year-round.

Oakland Ice Center, Oakland
Operated by the San Jose Sharks, this indoor rink accommodates everyone from hockey players to recreational skaters. The Center’s Tuesday Cheap Skate deal lets you skate for a bargain ($8.60 or $12.50 with skate rental). Open year-round.

Palo Alto’s Winter Lodge, Palo Alto
Beginners have no fear: safety is important here, with gloves and helmets recommended for all skaters, on-ice guards waiting nearby to help fallen children, and ice resurfaced every hour so the rink remains smooth all day long. A warm fireplace, a vending machine that sells hot chocolate, and a giant Christmas tree in the middle of the ice give this arena a festive feel. Open seasonally.

Snoopy’s Home Ice: Redwood Empire Ice Arena, Santa Rosa
A little farther afield but well worth the drive is this rink in Santa Rosa. Perfect for fans of all things Snoopy as well as for new ice skaters. They have a “Parent and Puppy Practice” skate where kids under 12 can use chairs to steady themselves as they learn their moves. Open year-round.