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| LOCAL COMMISSIONERS MEMORANDUM |
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Transmittal No: 90 LCM-52

Date: April 18, 1990

Division: Family and Children
Services

TO: Local District Commissioners

SUBJECT: Foster Parent Month

ATTACHMENTS: Attachment A: Agency Nominees for 1990 Foster Parents
who care for Sibling Groups Certificate of Recognition
Program (Attachment available on-line)

In May, Governor Cuomo will proclaim Foster Parent Month. In addition to his proclamation, the Department of Social Services, as part of the Governor's Decade of the Child Program, is requesting your assistance in honoring foster parents who care for sibling groups. Specifically, we would like you to identify foster families whom you would like to receive special recognition.

This initiative is in keeping with our on-going joint support for the recruitment and retention of foster families. We hope that publicity during the month will create a public awareness of the need for more foster parents, especially for families willing to care for siblings, and focus attention on the need to keep siblings together when they are in foster care. Agencies are encouraged to hold award or recognition dinners for foster parents during foster parent month as part of this initiative.

Please list the names of foster parents nominated by your agency on the attached form. Please make certain that those who are nominated are receptive to receiving a certificate. Their names will be printed on the certificates which will be sent to you for presentation.

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Please let us know if you have any questions about this request. The contact person for the Department is Kevin Leyden. He may be reached at (518)-474-9447. It is requested that the nominations be sent to Kevin by C.O.B., Friday April 20, 1990. If there is no response from your agency, it will be assumed you have decided not to participate in this project.

Additionally, I want to take this opportunity to tell you about two other initiatives related to the Department's efforts to support recruitment and retention of foster parents:

- o This summer we will release a new Foster Family recruitment video. It depicts three foster families in their daily living situations and describes the rewards of foster parenting. The video will be sent to you as soon as it is released.
- o We are compiling responses to the SURVEY OF FOSTER FAMILY RECRUITMENT AND RETENTION INITIATIVES which was mailed to you on February 8, 1990. Our plan is to develop an overview report of the initiatives undertaken by districts and agencies during 1988 and 1989 which were innovative and resulted in an increase in the number of foster families available to care for children in your area. This survey will then be published and made available to you in an effort to share ideas among local communities. If you have not already done so, please return the survey to Linda Kurtz at 259 Monroe Avenue, Rochester, New York 14607, by April 15, 1990.

It is our hope that Foster Parent Month is both a time for all of us to recognize the incredible contributions that foster parents make to the children of our State and give us the opportunity to encourage others to join their ranks. Please feel free to contact your regional office if you would like assistance in any foster parent month activities.

Joseph Semidei
Deputy Commissioner
Family and Children Services

Attachment A

Agency Nominations for 1990 Foster Parents who care for
Sibling Groups
Certificate of Recognition Program

Instructions: Type the names of the couples or individuals who are being nominated. Persons eligible for certificates must have cared for special need children as a certified foster parent. There is no limit to the number of foster parents the agency may nominate for the award. Return to Kevin Leyden, NYS Department of Social Services, 40 North Pearl Street, Albany, New York 12243. For further information about the award program call (518)-474-9447.

1. Name: _____

Reason for Nomination:

2. Name: _____

Reason for Nomination:

3. Name: _____

Reason for Nomination:

4. Name: _____

Reason for Nomination:

(Use other side for listing additional nominees)

Number of Proclamations Requested: _____

Reporting Agency: _____

Address: _____

Prepared by: _____

Telephone number: _____