



**CARING FOR OUR CHILDREN**

*(Quarterly Foster Parent Newsletter)*

**LICENSING UNIT**

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Dr. Oren Wunderman, Executive Director



**YANILA LLOMPART, Editor**

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Licensing Unit at

Family Resource Center

155 South Miami Avenue,

Suite 400

Miami, Florida

**TELEPHONE No.:**

**(305) 374-6006**

**OUR MISSION  
STATEMENT AND  
VISION**

*The Family Resource Center is driven by the principle that nothing is more fundamental to a community than the safety and well being of its children. Its goal is to prevent and change dysfunctional parent/child interaction patterns, promote positive self-concepts, and build healthy relationships to prevent child abuse and neglect through family support, crisis intervention, housing location, family preservation, parent education and counseling.*

**IMPORTANT CHANGE  
AFFECTING YOUR YEARLY  
IN-SERVICE TRAINING  
HOURS**



Prior to the renewal of your license each year, as a foster parent you are required to successfully complete at least eight hours of approved in-service training. Up and until last year, these eight hours of training could all be done using online resources. Additionally, FRC offers in-service training opportunities throughout the year, e.g., the Foster Parent Quarterly Meetings.

During last year's re-licensing visit, your Licensing Counselor informed you that starting with your next re-licensure, you would no longer be able to complete all eight hours of training online. In order to renew your license, you will only be able to complete half of the required eight hours of training online and the other four hours will need to be taken in a classroom setting.

While FRC will continue to offer training opportunities, as advocates for our

children, we encourage you to also utilize other available community resources: For example, when you attend one of the Foster Parent Association meetings (see this newsletter for contact information) you will receive two hours of training.

If you have any questions regarding this change, please do not hesitate to contact your Licensing Counselor.



**USING THE POWER OF CHOICE**

Believe it or not children will willingly cooperate if they have the privilege of being given a choice. By providing our children with choices, it takes the pressure out of your request and allows the child to feel in control and thus be more willing to comply. This is a powerful tool that is effective with toddlers and even adolescents.

Below are some tips that will get children to cooperate while learning self-discipline and developing good decision-making skills:

- a) *How many choices?* Younger children can handle two choices at a time, e.g., milk or juice? Adolescents can be given general guidelines and rules.
- b) *Be Specific.* If you ask, "What do you want for breakfast?" and your child answers, "Pizza", you have set yourself up for a battle. Instead offer choices or options that are all good for him/her, "Do you want toast and fruit, cereal or waffles?"
- c) *Use Time as a Choice.* Often there really is only ONE acceptable choice. You would not say, "Do you want to go to bed tonight or tomorrow?" Instead you can say "Do you want to watch five more minutes of television or ten?" or "What do you want to do first, brush your teeth or put on your pajamas?"
- d) *What If Your Child Won't Choose?* ALWAYS offer a choice as it STILL works! Even if you say, "Do you want to choose or shall I choose for you?" The child is still being given a choice. If your child gets stubborn, you can say, "I see you want me to choose." Then follow through!  
For example, what if you ask your child if she wants to do her homework before dinner, after dinner or in the morning and he/she "decides" to go to bed without doing his/her homework. Just wake him/her up (cheerfully) at 6:00A with a gentle reminder that it was his/her choice to do it this way.

Offering choices is a peaceful way to encourage cooperation while avoiding the power struggle that so often erupts when a parent gives an order. When a child chooses his/her own plan of action he/she is more likely to follow through with a pleasant attitude and learn decision-making skills that he/she will carry with him/her to adulthood. So, "Do you want to start offering him/her choices today or tomorrow?"

## OVERMEDICATION OF PSYCHOTROPIC MEDICATION TO CHILDREN IN FOSTER CARE



Recently there was a special on the show "20/20" regarding the overmedication of psychotropic medication for children in foster care in several US states. While psychotropic medications are intended to combat or ease the symptoms of behavioral and mental health problems, a study conducted last year in the United States by the Government Accountability Office found that foster children in Florida, Massachusetts, Michigan, Oregon and Texas were being prescribed psychotropic medications at rates 2.7 – 4.5 times higher and often for inappropriate reasons versus those children not in foster care but receiving Medicaid.

Given the lack of child psychiatrists, pediatricians are left to navigate the tricky waters of children's mental health issues many times by themselves. It therefore seems likely that many of these inappropriate prescriptions are being written for the sake of convenience. Many children are also being prescribed several prescriptions at one time. Combining so many drugs at once can have dangerous unintentional consequences including diabetes and suicidal behavior. Some of these medications cause long-term effects on our children some of which are not yet fully known.

While medication can be a valuable tool in managing serious mental health disorders, prescriptions – especially for children – it should be carefully monitored and adjusted and should be used in conjunction with other psychotherapeutic treatments applied only by trained and licensed professionals. While children in the general population often receive this individual attention, children in foster care frequently subject to indiscriminate treatment plans with weak or limited follow-up. For this reason, the courts stay closely involved in the foster care process so to ensure that the individual child's best interests are always being served.

As a caregiver for our children you will be the first to see the child's reactions to any psychotropic medication that has been prescribed. Consequently, if you notice any erratic change in your child's behaviors, eating or sleeping habits, etc. you must immediately report it to your child's doctor as well as inform your child's Case Manager.

## DISPOSAL METHODS FOR UNWANTED MEDICATIONS



The Florida Department of Environmental Protection and the Florida Dept. of Health wants to remind us that we should properly dispose of any unwanted medication at all times. By disposing unwanted medications with your household trash rather than flushing it down the toilet or a drain reduces the amount of pharmaceutical traces in Florida's water bodies and drinking water.

The proper disposal of unwanted medications helps protect Florida's residents and visitors as well as our natural resources. Our drinking water utilities have an exemplary track record in delivering safe, affordable, high-quality, drinking water. We will continue to work with the U.S. Environmental Protection Agency and the U.S. Geological Survey to study emerging chemicals and develop new criteria so that we can continue to ensure safe water for generations to come.

Many of our medications contain compounds, also known as micro-constituents that are used to enhance our quality of life by protecting our health, enhancing consumer goods, and optimizing agricultural production. Micro-constituents may be found in very low concentrations in surface

water, ground water, domestic wastewater, industrial wastewater, agricultural runoff, reclaimed water, and other waters.

While the issue of pharmaceuticals and personal care products in water is not new, current media coverage on the topic prompts concern among consumers. So far, these chemicals have been found at extremely low concentrations and current research has not demonstrated an impact on human health at the trace levels at which they have been found.

The amount of micro-constituents can be reduced by properly disposing of any unwanted medications. While flushing them down the toilet or a drain will prevent immediate accidental ingestion, it can have an impact on our environment because many wastewater treatment systems, including septic tanks, are not designed to remove many of these medications. Below is a guide to assist you in properly disposing any unwanted household medications:

1. Keep all medicines in the original container. This will help identify the contents if they are accidentally ingested.
2. Mark out your name and prescription number for safety.
3. For pills, add water or soda to start dissolving them. For liquids, add something inedible like cat litter, dirt or cayenne pepper.

4. Close the lid and secure with duct or packing tape.
5. Place the bottle(s) inside an opaque container like a coffee can or plastic laundry bottle.
6. Tape that container closed.
7. Hide the container in the trash. Do not put in the recycle bin.

For more information on the proper disposal of unwanted medications, please feel free to visit <http://www.dep.state.fl.us/waste/categories/medications/default.html>.

## AVOIDING POWER STRUGGLES WITH YOUR TEEN



It is not a secret that teens are experts at engaging parents in power struggles. They appear to enjoy the game and they turn it into a competition. They are hoping that if they are able to 'out shout' they will win. They believe they can argue till you accept defeat. The problem is that there really is never a winner.

During a conversation with your teen, it is fine to explain your feelings about their behavior. It is great to be able to give them all the details concerning rules and consequences; however, you also need to be able to listen to their

ideas and concerns on the topic. However, that is where it should end. If you continue to argue back and forth, the power struggle takes over and nobody wins. This is where you make your exit.

As you leave 'the arena', you take with you any chance of keeping the 'fight' going. The issue is closed; the discussion finished. Conversation has come to an end without a further chance of 'bloodshed.' The teen usually looks bewildered the first few times you use this approach, especially if 'staying in the fight' has been your previous style. Remember the old adage about it takes two to fight. This really is true in this case. It takes the 'wind out of their sails' when no one is listening to their whining or shouting. They may feel there is no use and give up. However, some other teens will follow you into another room or outside and continue to argue. Repeat the mantra, "Discussion is closed, end of conversation."

Use this technique anytime you see the conversation is getting unreasonable or out of control.



### **NEW DOSING INSTRUCTIONS FOR EXTRA STRENGTH TYLENOL PRODUCTS**

There are over 600 over-the-counter and prescription medications that contain acetaminophen. Unfortunately, some patients will accidentally exceed the recommended dose when taking multiple acetaminophen-containing products at the same time, often without realizing they

contain acetaminophen or by not reading and following the dosing instructions.

McNeil Consumer Healthcare, the makers of TYLENOL is leading the industry in implementing new steps designed to lessen the possibility of accidental acetaminophen overdose and help ensure that people who use TYLENOL, and other products containing acetaminophen, use them appropriately. Consequently, McNeil has voluntarily introduced new dosing instructions for single-ingredient Extra Strength TYLENOL that is sold in the United States. The revised dosing instructions on the label for Extra Strength TYLENOL reflect the following changes:

Take 2 caplets (1,000 mg) every 6 hours while symptoms last  
(Revised from 2 caplets every 4 to 6 hours)

Not to take more than 6 caplets (3,000 mg) in 24 hours, unless directed by a doctor  
(Revised from 8 caplets in 24 hours)

The Warnings section will be modified to reflect the new daily dose. The liver warning on the label will continue to state that severe liver damage may occur if more than 4,000 mg of acetaminophen is taken. For patients whose pain or fever recurs despite the administration of a total daily dose of 3,000 mg, the new dosing instructions allow for healthcare professionals to exercise their discretion.

If you have any additional questions please visit them at [Tylenolprofessional.com](http://Tylenolprofessional.com). You can also contact their Medical Affairs Department at 1-866-948-6883, Monday through Friday, 9:00 am to 4:30 pm ET.

### **A QPI (QUALITY PARENTING INITIATIVE) MESSAGE...**

*QPI focuses on improving the recruitment of our foster parents as well as ensuring that only the most qualified individuals care for our children.*

## **WE KEEP ON GROWING!**

We want to welcome the following families who joined Family Resource Center last month:

*Annette Thomas  
Veronica & John Accorero*

FRC wants to take this opportunity to thank you for your commitment and dedication to those who need it the most...our children. Together we continue to make a difference!



### **ADDITIONAL SUPPORT FOR OUR FOSTER PARENTS...**

If you haven't already done so, we encourage all foster parents to become involved in the Foster and Adoptive Parent Association (FAPA):

North Dade: Shamele Jenkins  
(305) 469-1157  
[Shabeni@aol.com](mailto:Shabeni@aol.com)

South Dade: Martha Pedroso\*  
(\*South FAPA President)  
(954) 531-7640  
[marthapedroso@rocketmail.com](mailto:marthapedroso@rocketmail.com)

South Dade: Maritza Moreno  
(NEW Hispanic FAPA)  
(305) 775-4814  
[mcmoreno@me.com](mailto:mcmoreno@me.com)



## **FOSTER PARENTS NEEDED**

FAMILY RESOURCE CENTER is looking for families that are interested in working in partnership and making a difference in the lives of our children and in our future by becoming a **FOSTER PARENT**. At this time, our greatest need is for homes for large sibling groups, adolescents, and teen mom and babies.

If you know of someone that wants to make a difference in a child's life by becoming a **FOSTER PARENT**, please have them contact our Foster Parent Liaison, Fred Villeta at (305) 374-6006 (Ext. 5546) or via e-mail at [fvilleta@frcflorida.org](mailto:fvilleta@frcflorida.org).