

Foster Parent Training: Understanding and Reporting Serious Incidents in Texas

Introduction: Foster parents in Texas play a critical role in ensuring the safety and well-being of children in their care. One of the most important responsibilities is recognizing and properly **reporting serious incidents**. A *serious incident* refers to any non-routine event that poses or may pose significant harm to a child's health, safety, or wellbeing law.cornell.edu. Timely reporting of such incidents isn't just good practice – it's a legal requirement. Failing to report can lead to serious consequences, while reporting in good faith provides immunity from liability dfps.texas.gov. This training manual will guide you through what Texas defines as serious incidents, the laws and regulations governing them, the types of incidents you must report, how and when to report them, and best practices for documentation and compliance. It is designed for both general and therapeutic foster homes in Texas, with **Texas-specific guidance** drawn from the Department of Family and Protective Services (DFPS) and Health and Human Services Commission (HHSC) rules.

Each section below is clearly labeled and includes key definitions (with **important terms in bold**), examples, and checklists of best practices. By the end of this manual, you should feel confident in **identifying** serious incidents, **reporting** them within required timelines, and **documenting** them properly to protect the children in your care and yourself. Use this manual as a reference and do not hesitate to consult your agency case manager or DFPS resources whenever you face an uncertain situation. The safety of the children is the top priority, and proper reporting is a vital part of keeping children safe while maintaining your compliance with Texas regulations.

1. Definition of Serious Incidents in Texas

What is a "Serious Incident"? In Texas, a **serious incident** is defined as "*a non-routine occurrence that has or may have dangerous or significant consequences for the care, supervision, or treatment of a child.*" law.cornell.edu In simpler terms, it's any unexpected event that *jeopardizes a child's safety or well-being in a significant way*. This definition comes from the Texas Administrative Code (TAC) and is echoed in DFPS policy. For foster parents, this means anything out of the ordinary that could seriously affect a child's physical or emotional health, behavior, or level of supervision.

Examples of Serious Incidents: To clarify, DFPS provides examples of incidents that would be considered serious. These include, but are not limited to dfps.texas.gov dfps.texas.gov:

- **Child's Death:** The death of a child in your care, under any circumstances, is the most serious incident and must be reported immediately dfps.texas.gov.
- **Critical Injury or Medical Emergency:** Any serious injury or illness requiring treatment by a medical professional or hospitalization. Examples are broken bones, concussions, lacerations needing stitches, second or third-degree burns, or any

injury that requires emergency medical treatment dfps.texas.gov. (Everyday minor illnesses or scrapes are *not* “serious incidents.”)

- **Allegations of Abuse or Neglect:** If a child reports or shows signs that they have been abused or neglected – whether by a foster parent, family member, teacher, another child, or anyone – it is a serious incident. This includes **any indication** that a child in care *may* have been abused, neglected, or exploited arrow.org. For example, if your foster child tells you about past abuse, or you observe unexplained injuries or alarming behavior, it must be reported.
- **Child-on-Child Abuse:** Incidents where one child in the home physically or sexually abuses another child. For instance, a child’s sexual acting out toward another or a violent assault between children in your care would count as serious incidents dfps.texas.gov. These situations have “dangerous or significant consequences” for the children involved.
- **Runaway or Missing Child:** Any time a child or youth in foster care is *absent without permission* (often called **unauthorized absence** or AWOL) and cannot be located, it is considered a serious incident law.cornell.edu. This includes a child running away from the foster home or an unauthorized person (such as an unapproved family member) taking the child from the home. We will cover specific procedures for runaways in a later section, but note that missing-child incidents are taken very seriously in Texas.
- **Criminal Behavior or Arrest:** If a child in your care is **arrested, charged, or indicted** for any crime (other than a minor traffic ticket), this is a reportable incident dfps.texas.gov. Examples might be a teenager in care shoplifting, getting into a serious fight at school resulting in police involvement, or any delinquent behavior leading to law enforcement action.
- **Psychiatric Crisis (Suicidal Behavior or Hospitalization):** A child’s attempted suicide or any serious self-harm behavior is a serious incident that must be reported arrow.org. Also, if a child is admitted to a psychiatric hospital due to a mental health crisis, it may need to be reported – **with an important caveat:** Texas guidance says a psychiatric hospital admission is reportable *only if* it was precipitated by another reportable incident (such as a suicide attempt or violent behavior) arrow.org. Planned or routine psychiatric admissions (for example, a scheduled placement in a treatment center) are not automatically considered “serious incidents” unless they stem from an emergency. We’ll discuss this nuance further in Section 3.
- **Unauthorized Restraints or Disciplinary Actions:** Foster parents in Texas are **extremely limited** in what behavior interventions they can use. **Unauthorized restraint** – meaning any physical hold or mechanism used to restrain a child that is not permitted by regulations or not administered by a trained caregiver – is a

serious matter. Even permitted emergency restraints (like a short personal hold to prevent immediate harm) become reportable if they result in any injury or last beyond what is allowed [arrow.org](#). Additionally, any use of seclusion, mechanical restraints, or chemical restraints by a foster parent would be considered a serious incident (and likely abuse) since these are generally prohibited in foster homes. In short, if a situation escalates to where a child had to be physically held to prevent harm, or if a caregiver improperly disciplines a child (e.g. using physical force), it must be reported.

- **Communicable Diseases:** If a child in your care contracts a communicable disease that by law must be reported to health authorities (for example, tuberculosis or COVID-19 under certain conditions), that is also considered a type of serious incident in the regulatory sense [arrow.org](#). You would need to report it both to the health department (as required by health laws) and to your agency/DFPS as an incident, usually within 24 hours of learning of the diagnosis.

These examples illustrate the kinds of **major events** that qualify as serious incidents. In general, if you find yourself thinking “this is a big deal” or “someone could have been seriously hurt,” it’s likely a serious incident. The guiding principle is the incident’s impact on the child’s safety and care. Texas regulations explicitly note it’s an occurrence “*that is not routine*” and that *does* or *could* have serious consequences for the child [law.cornell.edu](#).

Non-Examples (What’s Not a Serious Incident): It can also be helpful to know what is *not* usually considered a serious incident, to avoid over-reporting trivial matters. For instance, a routine illness (like a common cold or a mild fever) or a planned medical procedure (like a scheduled tonsillectomy) is not a “serious incident” in this context. A minor disciplinary issue at school or a typical teenage misbehavior that does not involve police, injury, or significant risk would generally not rise to the level of a serious incident that must be formally reported. Texas guidelines clarify that not every emergency room visit is reportable – **only those involving a critical injury or illness**. For example, taking a child to an urgent care or ER for a common illness like the flu, or for a chronic condition (such as an asthma flare-up that responds to treatment), would *not* necessarily warrant a serious incident report [arrow.org](#). It is the **nature and severity** of the issue, not just the location of treatment, that determines if it’s reportable [arrow.org](#). (However, even if something is not an official “serious incident,” you should still inform the child’s caseworker about significant medical or behavioral issues as part of good practice – more on communication later.)

Section Summary – Definition: A *serious incident* is any non-routine event with potentially dangerous or significant impact on a child’s well-being. Texas regulations and DFPS policy define this broadly to include things like a child’s death, major injuries or medical emergencies, any abuse/neglect allegations, serious behavioral incidents (runaways, violent acts, etc.), criminal arrests, and certain critical health events. Always consider the *severity and non-routine nature* of an event to judge if it’s a serious incident. If in doubt, err on the

side of caution and treat it as serious. The next sections will explain the legal requirements for reporting these incidents and exactly how to do so.

2. Legal and Regulatory Basis for Serious Incident Reporting

Understanding *why* you must report serious incidents – and what laws or rules mandate it – can help underline the importance of following through every time. In Texas, both state law and agency regulations form the basis of serious incident reporting requirements for foster caregivers. This section covers the key statutes and regulations (with citations) and DFPS policies that govern serious incident reports (SIRs).

Texas Law – Mandatory Reporting: First and foremost, Texas Family Code §261.101 requires that *any person* who suspects a child is being abused or neglected **must report it** to authorities. Foster parents are *mandatory reporters* under this law. This means if a serious incident involves suspected abuse or neglect, you are legally obligated to report it. Failing to report suspected abuse or neglect is a crime in Texas – it can result in misdemeanor or even felony charges for the person who knowingly failed to report dfps.texas.gov. On the other hand, anyone who reports in good faith is protected from civil or criminal liability dfps.texas.gov. This “failure to report” penalty underscores how seriously Texas takes the reporting of child abuse. So, if your foster child tells you something that sounds like abuse, or you witness signs of neglect or inappropriate discipline, the law says you *must* report it, period. It’s not just a recommendation; it’s the law.

Texas Administrative Code – Minimum Standards: Beyond the general abuse reporting law, as a foster parent you operate under specific **licensing rules**. Foster homes (whether verified through a private Child-Placing Agency or directly by DFPS) must follow the **Minimum Standards** set out in the Texas Administrative Code (TAC), Title 26 (which covers Health and Human Services). These rules have an entire section on “Reporting Serious Incidents and Other Occurrences.” Key rules in this section include:

- **26 TAC §749.501 – Definition of Serious Incident:** This is where the TAC provides the definition we discussed earlier (non-routine occurrence with dangerous consequences) [law.cornell.edu](https://www.law.cornell.edu). It also references that the specific types of incidents that must be reported are listed in §749.503.
- **26 TAC §749.503 – When Must I Report and Document a Serious Incident?:** This is a *critical* rule to know. It spells out exactly which incidents must be reported, to whom, and within what time frames. For example, §749.503 requires that if a child dies in your care, you must report it “as soon as possible, but no later than 24 hours after the incident” [arrow.org](https://www.arrow.org). The same 24-hour rule generally applies to many other serious incidents (critical injuries, arrests, abuse allegations, etc.), as we’ll detail in the next section. The rule essentially creates a checklist of incidents and says: these **must** be reported to Licensing (HHSC’s Residential Child Care

Licensing) and other relevant parties within specified times. We will break down those reporting timelines in Section 4.

- **26 TAC §749.509 – How to Report to Licensing:** This rule states that *all serious incident reports must be made to the Texas Abuse Hotline* (Statewide Intake)arrow.org. In other words, calling the **DFPS Statewide Intake Hotline (1-800-252-5400)** is the required method for initial reporting of serious incidents. Additionally, any required written reports must be forwarded to your Licensing representative (usually via your agency) as directedarrow.org.
- **26 TAC §749.511 – How to Document a Serious Incident:** This outlines what information your **written incident report** should include. We will cover documentation in detail in Section 5, but know that the standards specify a written report must contain specific details (date, time, people involved, description of incident, actions taken, outcomes, etc.)arrow.org.
- **26 TAC §749.513 – Additional Documentation:** This part requires attaching certain extra documentation for specific kinds of incidents. For example, if a child was injured during a personal restraint, you must include documentation of that restraint and the events leading up to itarrow.org; if a child went missing, you must document your efforts to locate the child and notifications madearrow.org; if children abused each other, you document their age/size differences, etc.arrow.org. These are technical requirements the agency usually helps with, but as a foster parent you should be aware of them.
- **Other TAC references:** The TAC also addresses incidents like suicide attempts in §749.505 (defining what counts as a suicide attempt that must be reported)arrow.org. In short: any act a child takes intending to end their life (with plausible means) is reportable; mere verbal suicidal ideation or very superficial “gestures” are not classified as an attempt for reporting purposesarrow.org. This nuance can be important when deciding if something is a “serious incident” – for instance, a child saying “*I feel like I want to die*” is a mental health concern to take seriously (you should inform the caseworker/therapist immediately), but it might not trigger a formal serious incident report unless the child actually takes self-harm actions. However, in practice, agencies often err on the side of reporting even threats of suicide for safety, so always consult your case manager in such situations.

DFPS Policies and Handbook: In addition to the TAC rules (which have the force of law for licensed foster homes), DFPS’s own policies echo these requirements. The **Child Protective Services (CPS) Handbook** for foster and adoptive home development (FAD) has a section on Serious Incidents, reinforcing that “*Foster parents must report any serious incident directly to the Statewide Intake Hotline*”dfps.texas.gov. It also instructs agency or FAD workers to complete the Serious Incident Report form (Form 3005) and forward it to Licensing after they become aware of the incidentdfps.texas.gov. So, the internal policy aligns with the TAC: call it in to the hotline immediately, then do the paperwork.

Your foster home agreement or agency's foster parent handbook will likewise contain provisions about incident reporting. Most private Child-Placing Agencies in Texas have policies requiring you to notify them (the agency staff) **immediately** when certain serious events occur. For example, one Texas agency's handbook states: *"Arrow is responsible for completing a formal Incident Report whenever a serious incident involving a foster child occurs. These Incident Reports must be submitted to CPS within 24 hours of the incident. You must provide your Case Manager with a complete account of what occurred before, during and after the incident as soon as possible."* arrow.org. In practice, this means you call the agency's on-call number or case manager **right away**, and they will guide you through next steps (and often they will take your information to fill out the formal report that goes to Licensing/CPS). **Important:** This does *not* replace your duty to call the DFPS Abuse Hotline – many agencies will have you do both: call DFPS Statewide Intake to report it, and call your agency staff. The agency then ensures any additional written report is sent to the state within 24 hours.

Legal Consequences of Non-Compliance: Not reporting serious incidents can have multiple consequences. Aside from criminal liability for failing to report abuse, as mentioned above, it can affect your status as a foster parent. Repeated failure to report required incidents is a violation of Minimum Standards and could lead to corrective action or even closure of your home by the agency/DFPS dfps.texas.gov. Remember, one of the listed reasons DFPS may close a foster home is if a foster parent "repeatedly fails to comply with agency policy or Minimum Standards" dfps.texas.gov – and that would include reporting rules. It's also a serious breach of trust with your agency and the child's caseworker. The bottom line is: the law is clear that serious incidents must be reported, and you have both a legal and ethical duty to do so. The safety of children is at stake, and the oversight system can't work if those on the front lines (you, the caregiver) don't communicate what's happening.

Section Summary – Law & Policy: Texas requires foster parents to report serious incidents by law (Family Code for abuse/neglect) and by regulation (TAC for all serious incidents). The **Texas Administrative Code (26 TAC §749.503)** specifically lists reportable incidents and mandates reporting most within **24 hours** arrow.org. DFPS policies back this up, requiring a call to the **Texas Abuse Hotline** for any serious incident dfps.texas.gov. Agencies expect immediate notification as well arrow.org. Failing to report isn't just a policy slip – it's potentially a crime and can jeopardize your foster home license. Knowing the rules is the first step; next, we will discuss what types of incidents you need to report (with more detail) and how to do it correctly and on time.

3. Types of Reportable Incidents: What to Report

Now that we've defined "serious incidents" and reviewed the mandate to report them, let's delve into the **specific categories** of incidents that foster parents in Texas must report. Think of this as the "what" that triggers a Serious Incident Report (SIR). We touched on these in Section 1, but here we will organize them clearly and include any Texas-specific

notes for each type. It's helpful to be crystal clear on what falls under each category so you won't hesitate when something happens in real life.

Below are the major types of reportable incidents, with descriptions and examples:

1. Child Death: Any death of a child in your care, from any cause (illness, accident, SIDS, etc.), is reportable *immediately*. This is the gravest type of incident. Texas rules say you must report a child's death to Licensing within 24 hours at the latest [arrow.org](#), and **notify law enforcement and the child's parents immediately** [arrow.org](#) [arrow.org](#). In practice, one would call 911 right away, then the hotline and agency. (Thankfully, this is an exceedingly rare event. But if it ever occurred, authorities would investigate to determine cause, and your timely reporting and cooperation would be critical.)

2. Critical Injury or Medical Emergency: This refers to any injury or illness that is severe enough to require intervention by a medical professional or hospital. The TAC specifically lists things like "*dislocated, fractured, or broken bones; concussions; lacerations requiring stitches; second- or third-degree burns; damage to internal organs*" as examples of injuries that qualify [arrow.org](#) [arrow.org](#). It also uses the phrase "warrants treatment by a medical professional or hospitalization" [arrow.org](#). In plain terms, if the child's condition is serious enough that you had to rush to the ER or call paramedics, it's likely a reportable serious incident. For example:

- Child falls from a tree and breaks her arm.
- Child has a severe asthma attack and becomes unresponsive (requiring an ER visit).
- Child experiences a high fever seizure or acute allergic reaction needing emergency care.
- Child gets a deep cut on the head while playing sports, requiring stitches.

In all these cases, ensure the child gets immediate medical care, then report the incident.

Note: Not every doctor visit is reportable – only those that are for *critical or severe* issues. A good rule of thumb from Texas guidance: If it's an *emergency* or a *critical* health event (especially if the child is hospitalized or at serious risk), report it [arrow.org](#) [arrow.org](#). If it's a routine urgent care visit for a minor issue, it's usually not a "serious incident." When in doubt, consult your case manager.

3. Allegation or Suspicion of Abuse/Neglect: If any incident involves an allegation that a child was abused or neglected, or any situation where it *appears possible* that abuse/neglect occurred, you must report it. This holds true **even if the alleged abuse did not happen in your home** (for example, the child discloses past abuse by a relative, or you suspect something happened during a visit with their biological parent). As a foster parent, you report it to the Abuse Hotline just the same, and DFPS or law enforcement will investigate. Examples:

- Your foster child tells you that their teacher hit them at school last week.

- You notice bruises after the child returns from a weekend visit with a biological parent, and the child is fearful to talk about it.
- A teen in your home confides that another foster youth at their previous placement had sexually abused them.
- You witness your co-parent (or another caregiver) use excessive force or a prohibited punishment on the foster child (this is an allegation of abuse against a caregiver).

In all these scenarios: **ensure the child's immediate safety, then call the hotline right away.** Do *not* attempt to investigate yourself – the law tasks CPS/licensing investigators with that. According to Texas rules, *any incident where there are indications a child in care may have been abused, neglected, or exploited* is a reportable serious incident arrow.org. Err on the side of reporting; you don't need certainty or proof – just reasonable cause to believe it might have happened.

4. Child-on-Child Abuse (Physical or Sexual): Sometimes, the children in your home might harm each other. The TAC specifically addresses **physical abuse committed by a child** and **sexual abuse committed by a child** as reportable events (these correspond to TAC §749.503(a)(4) and (5)). For example:

- A 14-year-old foster youth in your home beats up a 10-year-old foster child, causing injury.
- You discover two children in your care engaged in inappropriate sexual contact, or one child coerced the other into sexual behavior.
- One child repeatedly bullies and emotionally torments another in a severe way (while “abuse” typically refers to physical/sexual harm, extreme harassment could be considered abuse/neglect as well).

These incidents must be reported because they significantly impact the care and safety of the children. You would separate the children to ensure safety, supervise closely, and notify your agency/DFPS immediately. Texas guidelines even ask you to document the differences in age, size, and developmental level between the children in such incidents arrow.org – this helps assess the seriousness (e.g., a much older/bigger child hurting a younger child is especially concerning). Keep in mind, child-on-child incidents will likely trigger CPS or licensing investigations just as if an adult harmed a child, because the agency will need to ensure the environment is safe for all children going forward (they may do a safety plan, extra supervision, etc., which your agency will coordinate).

5. Runaway or Missing Child (Unauthorized Absence): When a child in foster care goes missing, it's a serious incident that invokes specific protocols. The TAC uses the term “**unauthorized absence**”, defined as a child being absent from the home without permission and their whereabouts unknown law.cornell.edu. This includes classic

“runaway” situations as well as if an outside person abducts or removes the child without permission. Key points for runaways in Texas:

- **If a child (of any age) is discovered missing**, you must take immediate action. Search the home and area, contact neighbors or friends the child might be with [arrow.org](#). If it’s a young child or a child with disabilities, or if there’s any immediate danger, call law enforcement right away.
- For older youth (like teenagers who have a history of running), your agency might have guidance like “call us first, and if the child isn’t found within a short time, then call police.” However, **Texas law requires** that any child missing for more than 24 hours *must* be reported to law enforcement [arrow.org](#). The Minimum Standards are actually stricter: for children under 6, you should call police within **2 hours** of determining the child is missing [arrow.org](#); for ages 6–12, also within 2 hours [arrow.org](#); for 13 or older, no later than 24 hours [arrow.org](#). Many agencies will say to call police sooner than these maximums, especially if the child is believed to be in danger. Always follow the more urgent directive.
- You also must report the missing child to DFPS Hotline and your agency. The TAC requires reporting to Licensing usually within 2 hours for younger kids and certainly within 24 hours for any runaway [arrow.org](#). Practically, you or the agency will call Statewide Intake once initial search steps are done.
- **Unauthorized removal by others:** If an unauthorized person (say, a relative who didn’t have custody) takes the child from your home, that is both a kidnapping (call 911 **immediately**) and a serious incident to report to DFPS [arrow.org](#). Even if the person claims to be from CPS, always verify identity; an “unknown CPS worker” scenario is mentioned in agency guidance – you should confirm with your case manager if someone shows up unexpectedly to take the child [arrow.org](#).
- Runaway incidents will involve coordination with many parties (law enforcement, CPS, agency, the child’s family). Your role is to **act fast**, ensure all notifications are made, and then welcome the child back and address the behavior as part of their treatment plan (unless there are safety reasons not to). Texas practice often is to return a recovered runaway to the same foster home if at all safe to do so, and then work on why they ran [arrow.org](#).

We will cover reporting timelines for runaways in the next section, but the key is: a missing foster child is a serious incident – don’t delay reporting it.

6. Criminal Activity or Law Enforcement Involvement: If a child in your care has any significant interaction with law enforcement (beyond maybe a friendly school resource officer chat), you likely need to report it. Specifically, *any time a child is arrested, charged with an offense, or law enforcement is called out because of the child’s behavior*, it’s reportable. For example:

- The child is arrested for shoplifting, drug possession, assault, vandalism, etc.
- The child is questioned by police as a suspect in a crime.
- The child is taken to juvenile detention or given a citation that requires a court appearance.
- Police are called to your home because the child became violent or out of control (even if the child isn't ultimately arrested, the incident itself – violent behavior requiring police – is serious).

These scenarios overlap with others (violent behavior would also be a serious incident as a behavioral crisis; drug possession is both criminal and a health safety issue). Texas rules in §749.503 include if a child is *indicted, charged, or arrested for a crime* as a serious incident to report [arrow.org](#). One thing explicitly excluded is “being issued a ticket at school or any other citation that does not result in the child being detained” [arrow.org](#) – so a minor citation might not be considered serious if it's truly minor and no detention. But as a foster parent, even if a child just gets a ticket, you should let the caseworker know; it just might not trigger the formal 24-hour SIR requirement. If you're unsure, it's safest to report it anyway.

When police are involved, aside from calling the hotline, note down **the officer's name, badge number, and time of contact** [arrow.org](#). This information will need to go into your report.

7. Psychiatric Hospitalization or Mental Health Crisis: As mentioned, admissions to a psychiatric hospital or crisis stabilization unit are not automatically “serious incidents” unless they result from a reportable incident. However, since most psychiatric admissions for foster children are emergent (e.g., the child is a danger to self or others), they often do involve reportable elements. Key guidelines:

- **Suicide Attempts:** Always report a bona fide suicide attempt by a child [arrow.org](#). The rule of thumb: if the child took some action likely to cause self-harm (taking pills, cutting deeply, attempting to hang themselves, etc.), that's a serious incident [arrow.org](#). Call 911 for medical help, and report to DFPS immediately. If the child is then hospitalized in a psychiatric facility after the attempt, that hospitalization is part of the incident's fallout and should be documented, but the precipitating event (the attempt) is what triggered the report.
- **Psychiatric Admissions (non-attempt):** If a child is expressing suicidal ideation or severe psychiatric symptoms, you'll involve mental health professionals. Do not unilaterally take a foster child to a psychiatric hospital without speaking to your agency; per policy, you usually need the agency's consent for non-emergency admissions [arrow.org](#). If it's an immediate emergency (child is actively a danger *right now*), call emergency services or 911. Whether an admission itself is reported as a serious incident depends: According to Minimum Standards, “*admission to a*

psychiatric hospital only warrants a serious incident report if the admission is precipitated by a reportable incident, such as a suicide attempt. The admission itself is not reportable as a serious incident."[arrow.org](#)*arrow.org*. So if a child is proactively placed in a psych hospital for medication adjustments (a planned intervention), that might not trigger a formal SIR. But if the child's behavior became dangerous (threatening to stab someone, severe self-harm, etc.) – those behaviors are reportable, and the fact they ended up hospitalized is part of it. When in doubt, err on side of reporting the overall crisis.

- **Aggressive or Threatening Behavior:** If a child presents an imminent threat of harm to self or others and an intervention is needed (like police, mobile crisis unit, or restraint), this overlaps with other categories: it's a serious behavioral incident. It should be reported. For instance, a child violently attacking household members or destroying property to a dangerous extent (e.g., setting a fire) is clearly reportable. One agency instructs that even things like major property destruction or substance abuse by the child be reported as serious incidents[arrow.org](#), because they signal significant issues.

8. Other Significant Incidents: The list above covers the main categories explicitly mentioned in regulations and your question prompt. There are a few additional occurrences the TAC expects agencies to report, which you should be aware of:

- **Communicable Disease Outbreaks:** As noted, if the child gets a reportable illness (e.g., COVID-19 hospitalization, measles, etc.), report it[arrow.org](#). Also inform your agency promptly so they can guide infection control and notifications.
- **Disasters or Foster Home Emergencies:** If something like a fire, flood, or other disaster makes your home unsafe or forces you to evacuate, that is a reportable occurrence (the TAC lists any incident that renders all/part of the operation unsafe, such as a fire, under "other occurrences"). You'd notify your agency and possibly licensing, depending on the situation.
- **Household Member Criminal Issues:** If a member of your household (not the foster child, but you or someone in your home) is arrested or charged with certain crimes, that has to be reported as well. This is more of a licensing compliance issue (background checks), but it's important to note – for example, if your teenage biological son (living in the home) gets in trouble with the law, you must inform your agency because it could affect the home's status.
- **Serious Violation of Standards:** If something happened that is a serious violation (like forgetting a child in a car, using corporal punishment, etc.), even if no harm occurred, often agencies will treat it as a serious incident to be documented and addressed. While not "incidents" per se, they are serious events that need reporting up the chain.

In summary, Texas expects foster parents to report **any major event or crisis** involving a child in care that affects the child's safety, health, or well-being. When such an event happens, your mind should quickly go to: "Is this a serious incident I need to report?" The safest approach is: if it fits any category we've described – injury, abuse, runaway, arrest, etc. – **report it**. If it's something unusual that doesn't fit neatly but feels serious, **consult your agency** and likely report it anyway. It's better to over-report than under-report. The next section will explain *how* and *when* to report these incidents (the procedures and timelines), which is just as crucial.

4. Reporting Timelines and Procedures (Who to Notify, When, and How)

When a serious incident occurs, it's natural to feel a bit overwhelmed – your first concern is the child's immediate safety and needs. However, once immediate danger is addressed, *time is of the essence* in reporting the incident to the proper parties. Texas regulations provide clear **timelines** for reporting, and as a foster parent you should have a mental (or written) checklist of who to call and in what order. This section will guide you through the step-by-step procedure of reporting a serious incident, including **who** must be notified, **when (how quickly)** each notification should happen, and **how** to make these reports.

First, Ensure Safety: Before any phone calls, always handle any urgent medical or safety needs. **Call 911** immediately if the child needs emergency medical care or if there's a situation requiring police or ambulance on-site (for example, child not breathing, serious injury, a violent situation, a missing young child) dfps.texas.gov. Address immediate crises first – reporting comes next, not before. Your personal intervention (first aid, comforting the child, securing the scene, etc.) in the moment is priority one.

Once everyone is safe and the situation is under control enough to start notifications, follow these steps:

1. Call the DFPS Statewide Intake (Abuse Hotline): In Texas, *one call* can fulfill the requirement to notify DFPS, Licensing, and law enforcement referrals if needed. The number is **1-800-252-5400** (or you can report online via TxAbuseHotline.org for non-immediate situations, but by phone is preferred for serious incidents). The Statewide Intake Hotline is a 24/7 operation for reporting abuse, neglect, **and serious incidents**. As TAC §749.509 states: "All serious incident reports must be made to the Child Abuse Hotline." arrow.org When you call:

- Explain that you are a foster parent reporting a serious incident.
- Provide details of what happened, who was involved, and any immediate actions taken (this mirrors what you'll write in the report later).

- The hotline staff will ask you questions to get all necessary information. Be honest and thorough. Remember, their role is not to judge you, but to gather facts so the right people (investigators, licensing staff, caseworkers) are alerted.
- **Timeline:** Many incidents must be reported “as soon as you become aware” or at least within **24 hours**. As a rule, *always call within 24 hours*. For some critical incidents, much sooner:
 - **Immediately** or within 2 hours for the most urgent cases (fatality, missing young child, etc.).
 - “No later than 24 hours” for most others [arrow.org](#).
In practice, you should aim to call **the same day** of the incident, ideally as soon as things are stable. If an incident happens at 2 AM (e.g., a child runs away at night or an overnight medical emergency), you do *not* need to wait until morning – Statewide Intake is available at 2 AM. Prompt reporting is important because it allows DFPS/Licensing to respond or give guidance timely (and it clearly documents your responsiveness).
- **Law Enforcement Notification via Hotline:** If the incident involves alleged abuse/neglect or a crime, the hotline will automatically route the report to the appropriate investigation division (CPS or Residential Child Care Investigations) and/or inform law enforcement as required. So calling the hotline is your way to ensure CPS and licensing know – it does *not* directly call the local police though. If you haven’t already called police in a scenario that needs it (like a crime in progress or missing child), you still must call 911/local law enforcement separately – see next point.

2. Notify Law Enforcement (if applicable): Some incidents require notifying law enforcement *in addition to* DFPS:

- If a **crime** has been committed against or by a child (assault, abuse, kidnapping, etc.), or the child is missing or in immediate danger, call 911 or the local police **immediately** (not just the hotline). For example, child death, a physical or sexual abuse incident that just occurred, an unauthorized person takes the child, or a serious assault by the child – all warrant police involvement on the spot. Texas rules indicate law enforcement should be called right away in such scenarios (e.g., child death: call police immediately [arrow.org](#); missing young child: within 2 hours at most [arrow.org](#), though realistically ASAP).
- If law enforcement was already on scene (like they responded to the incident), then your duty is to document their involvement and ensure the hotline knows that too. As mentioned, write down officers’ names and badge numbers [arrow.org](#) for your report.

- Note: **The DFPS hotline is not a substitute for emergency services.** If you call the hotline about a missing child but haven't informed the police yet, they will likely tell you to call the police as well. Similarly, for an abuse allegation, DFPS may notify law enforcement if it meets certain criteria, but you should call 911 first if a child is currently in danger or needs rescue.

3. Notify Your Agency (Child-Placing Agency) or DFPS Caseworker: Depending on how your home is verified:

- If you are with a **private CPA (agency)**, you must inform your **agency case manager or on-call supervisor immediately** after the incident. Most agencies have a 24-hour emergency number. For example, an agency might direct: "Notify us as soon as you determine a child is missing" arrow.org or any other serious situation. The agency wants to know ASAP so they can support you, guide you, and make their own internal notifications (to licensing, to the child's CPS caseworker, etc.). They also typically take the lead in completing the official written incident report that goes to Licensing within 24 hours arrow.org – but they need your input to do that.
- If you are directly verified by **DFPS (CPS) itself** (some kinship or long-term foster homes), then your point of contact is your DFPS home development worker (FAD worker) *and* the child's CPS caseworker. You should call them as soon as possible. DFPS policy expects foster parents to report to the statewide hotline *and* then the DFPS worker will complete the Form 3005 and send to Licensing dfps.texas.gov dfps.texas.gov. So practically, you call SWI, then call your worker next.
- **When to notify the child's CPS Caseworker:** If you've notified the hotline and your agency, you might wonder if you also need to personally call the child's state caseworker. Usually, once you tell your agency, they will inform the CPS caseworker (especially for major incidents). However, it's never a bad idea for you to directly call or email the CPS caseworker, too – particularly for things affecting the child's well-being (injury, hospitalization, runaway, etc.). The **Minimum Standards** expect that the child's **parents** or guardian be notified of many incidents within 24 hours as well arrow.org. Since most foster children still have legal parents (unless rights are terminated), CPS is responsible for telling the parents. By informing the CPS caseworker quickly, you help ensure the child's family is kept in the loop as required. For example, if a foster child is hospitalized for surgery after an accident, the bio parents have a right to know promptly – and CPS must notify them arrow.org. Providing CPS the info early helps them do that.
- **Documenting Notifications:** Whomever you call, note the date/time and name of the person you spoke with. For runaways, the rules specifically say to document the date/time you notified law enforcement and the names of persons you spoke to, as well as efforts to reach the parents arrow.org. It's good practice to do this for all

serious incidents: e.g., “2/15/25, 11:30 PM – Called Statewide Intake, spoke with John (call ID#123456); 11:50 PM – Informed agency on-call supervisor, Ms. Smith.”

4. Follow Agency Instructions for Further Reporting: After the initial emergency calls, your agency may have you do additional steps:

- **Written Report/Form:** They might ask you to fill out a form or provide a written account via email. DFPS has Form 3005 (Serious Incident Report) which agencies often use or have their own equivalent. This written report usually must be completed within 24 hours or the next business day. (We will cover what goes into that report in Section 5.)
- **Additional Notifications:** The agency might coordinate with you on notifying the child’s therapist, attorney ad litem, or others if relevant. For instance, if the child was injured, the therapist might need to help with trauma; if the child is missing, the whole team will be alerted.
- **Internal Safety Measures:** The agency may give you immediate instructions, like “suspend contact with an alleged perpetrator,” “ensure no other children are alone with Johnny until we assess what happened,” or “take the other foster children for a medical check if needed.” These are case-specific, but be prepared to follow any interim safety plan.
- **Media/Communications:** If something really high-profile happened (e.g., child death or a crime that might attract media), the agency/DFPS will likely handle external communications. As a foster parent, you should refer any media or external inquiries to DFPS – and *never* post details on social media. Confidentiality rules still apply.

Reporting Timeframe Highlights: The golden rule is 24 hours for most incidents, but here’s a quick cheat-sheet of Texas time requirements, drawn from TAC and practice:

- **Immediately (or within 2 hours):** Child death (after calling 911)[arrow.org](#); missing child under 13[arrow.org](#)[arrow.org](#); unauthorized removal/kidnapping[arrow.org](#); any life-threatening injury or situation in progress.
- **As soon as possible, but ≤ 24 hours:** Serious injuries/illnesses[arrow.org](#), hospitalizations, suicide attempts, arrests, abuse allegations (really should be immediate)[arrow.org](#), older youth runaways (definitely <24h)[arrow.org](#), communicable disease diagnosis[arrow.org](#), etc.
- **Within 7 days:** (This is more for minor occurrences, like a change in administration of the agency – not typically the foster parent’s responsibility. Virtually everything you as a foster parent need to report will be in the immediate or 24-hour category.)

After Reporting – What Happens Next: Once you’ve made the calls and sent any required written report, your duty to report is fulfilled, but your involvement isn’t necessarily over:

- **Cooperate with Investigations:** If the incident triggers an investigation (like an abuse/neglect investigation by CPS or a licensing investigation), you will likely be contacted by an investigator. Always be honest and forthcoming. Remember, the goal is child safety, not to blame foster parents who followed the rules. DFPS policy explicitly requires thorough investigations for serious cases tfifamily.org – so don't be surprised by the level of scrutiny; it's standard procedure.
- **Follow Through on Child's Needs:** Ensure the child gets any follow-up care (medical appointments, counseling, etc.) after the incident. Document these as well.
- **Agency Follow-up:** Your agency might do a debrief with you, update the child's service plan (for example, adding strategies to prevent future runaways or additional training for you), or in some cases, if the situation was very serious, discuss if the placement can continue. In most cases, if you handled everything appropriately, the agency will continue to support you and simply work on preventing recurrence.
- **Reflect and Learn:** It can be helpful, after the dust settles, to review: Did I notify everyone I should have? Did I do so on time? Are there things I could do differently if, heaven forbid, a similar incident happened again? This is part of growing as a foster parent. We have a "Tips" section later that will cover proactive steps (like having emergency numbers posted, etc.).

Section Summary – Reporting Procedures: When a serious incident occurs: **1) Secure immediate safety (call 911 if needed); 2) Call the DFPS Abuse Hotline** to officially report the incident (aim for within 24 hours or sooner) arrow.org; **3) Notify your agency or DFPS contacts** right away as well arrow.org; **4) Call law enforcement directly if the situation calls for it** (especially for crimes, missing child, imminent danger) arrow.org. Always make the **required notifications within the mandated timeframes** – many incidents are required in "as soon as aware" or 24 hours max arrow.org, with some as quick as 2 hours. Use the phone for urgent reports (the hotline is 24/7), and be prepared to provide detailed information. Document the who/when of every call you make. Timely and proper reporting ensures that all necessary parties (CPS, licensing, law enforcement, parents) can respond appropriately, and it keeps you in compliance with the law. In the next section, we'll cover how to document these incidents in writing, which goes hand-in-hand with reporting.

5. Documentation Standards and Confidentiality

Reporting a serious incident is not complete until the **paperwork** (or electronic documentation) is done. While calling the hotline is step one, Texas requires that serious incidents also be documented in writing. Proper documentation serves several purposes: it provides a clear record of what happened, helps all parties understand the incident, and protects both the child and the foster family by objectively recording the facts. In this

section, we discuss **how to write an objective and complete report**, what content to include, and how to maintain **confidentiality** while doing so.

The Written Serious Incident Report: After you've made initial verbal reports, you (and/or your agency worker) will need to prepare a written report of the incident. Often, your agency will have a form for this (like Form 3005, the DFPS Serious Incident Report form dfps.texas.gov). Regardless of format, the **Minimum Standards (26 TAC §749.511)** specify what must be included. A well-documented incident report should answer the basic questions: Who, What, When, Where, and How/Why, in an objective manner. Specifically, **a serious incident must be documented in a written report that includes** the following information arrow.org:

1. **Foster Home Details:** The name of your foster or adoptive home, your physical address, and phone number arrow.org. (This identifies which home the incident occurred in.)
2. **Date and Time:** Exactly when the incident happened (or when you first discovered it) arrow.org. Be as precise as possible – e.g., “April 5, 2025, approximately 7:30 PM.”
3. **Child(ren) Involved:** The name, age, gender, and date of placement/admission of each child involved in the incident arrow.org. For example, “J.D., female, age 10, in DFPS conservatorship placed in my home on March 1, 2025.”
4. **Adults Involved and Roles:** The names of all adults involved in the incident and their relationship to the child(ren) arrow.org. This could include you (foster parent), your spouse or another caregiver present, a teacher or coach if the incident happened in the community, etc. List anyone directly part of the incident (for instance, if a child was injured at school, you'd name the teacher who was supervising, if known).
5. **Witnesses:** The names or identifying information of any witnesses to the incident arrow.org. *Witnesses* here means people who personally saw or heard the incident happen. Texas guidance clarifies that a witness must have been present and able to give a first-hand account arrow.org. For example, if a neighbor saw the child fall off a bike, they are a witness; if someone only heard about it later, they are not a “witness” for the report. If other children in the home were present but didn't directly see it, note that accordingly. Also, witnesses could include persons not in the home – e.g., another student in class, a bystander, etc.
6. **Nature of the Incident:** A brief description of what type of incident it was arrow.org. E.g., “serious injury,” “allegation of abuse,” “runaway,” “medical emergency,” etc. This is basically labeling the category of the incident.
7. **Circumstances Surrounding the Incident:** This is the narrative of **what happened before and during the incident** arrow.org. Describe the sequence of events factually. Include relevant context: “Child was playing on the trampoline in the

backyard under my supervision. The child jumped off the side and landed on her arm,” or “During bedtime routine, the child disclosed to me that ...,” or “I found the child was not in his room at 10 PM bed check...” Provide a clear, chronological account.

8. **Interventions and Actions Taken:** Document **what you did during and after the incident**[arrow.org](#). This includes immediate actions (e.g., “administered first aid, called 911”), as well as any follow-up actions, contacts, and notifications. For example, “I applied an ice pack and bandage, called the on-call nurse and followed her instructions, then transported the child to the ER. I notified the CPS hotline at 9:15 PM and informed my agency.” Also mention any other follow-up: “Removed the other child from the room,” “Ensured all medications were locked away after incident,” etc. This section shows that you responded appropriately.
9. **Medical Treatment and Findings:** If a **licensed health-care professional** treated the child, include their name, the diagnosis or findings, and treatment given[arrow.org](#). For instance, “Dr. Smith at Memorial Hospital ER examined J.D. and X-rays showed a fractured wrist. A cast was applied.” Or “Paramedics arrived and assessed the child, determining blood sugar was low; child was stabilized on scene.” If no medical professional was involved, you can state “N/A” or “No medical treatment required on scene.”
10. **Resolution/Outcome:** Finally, note the **resolution of the incident**[arrow.org](#). Essentially, what was the end result? Did the child return home from the hospital? Is the child safe and back in placement? Was any change made (child moved to respite, or safety plan implemented)? For example, “The child returned home the same night with her arm in a cast. She is scheduled for a follow-up with orthopedic doctor. We have put extra safety rules in place for trampoline use.” Or for a runaway: “The child was located by police at a friend’s house at 11 PM and returned home without incident.”

By covering all these points, your report will be **objective, comprehensive, and factual**. Stick to observable facts and statements made, rather than opinions or blame. For instance, instead of “Tom was being careless and hurt Jacob,” write “Tom, age 12, pushed Jacob, age 10, during an argument over a toy. Jacob fell and hit his head on the coffee table, resulting in a laceration.” Avoid judgement words like “careless” or “malicious” – just describe behaviors. If you include what a child said, use quotes: e.g., *the child stated, “My dad used to hit me with a belt”*. This ensures accuracy.

Objectivity and Tone: Writing objectively means:

- Use neutral language (e.g., “X occurred” not “X happened because Y was angry” unless you’re quoting someone saying they were angry).
- Don’t insert your personal conclusions about motives or causes – just report what you **saw, heard, and did**.

- If you need to include your feelings or interpretations (maybe you felt the child was in shock, etc.), label them as such (“the child appeared very withdrawn – not speaking or making eye contact – which I interpreted as shock, and I comforted her...”). Factual behavior + your action is fine; just avoid unverified assumptions.

Confidentiality in Documentation: Confidentiality is *crucial* when documenting incidents. Foster children’s identities and information are protected by law. Your report will become part of the child’s record and possibly others’ records, so follow these guidelines:

- **Only include information relevant to the incident.** Don’t divulge unrelated personal info about the child or family.
- **When multiple children are involved:** This is tricky – you have to document the involvement of each child, but be careful not to violate one child’s privacy in another’s records. Texas guidance explicitly addresses this: *“Identifying information for one child should not be placed in the record of another child.”* arrow.org. You have a few options:
 - Write a single combined incident report but use **initials or first names only** for children other than the one whose file the report goes into. For example, if you file the report in Child A’s folder, refer to Child B as “another child in the home (B., age 8)” rather than full name. The combined report can be centrally filed with identities, but each child’s file gets a redacted copy arrow.org.
 - Or, write separate reports for each child involved, focusing on that child’s experience and using minimal identifying info about the others (just initials) arrow.org. Some agencies prefer separate reports per child, especially if the incident involves conflict between them.
 - Your agency will guide this, but the key is: one child’s full name shouldn’t appear in another child’s case file document. Usually, reports are written in a way that they can be shared with each child’s records without revealing the other’s identity fully.
- **Avoid using last names** of children in narratives if possible, especially if foster siblings. Use first name and last initial if needed.
- **No PII of others:** Don’t include sensitive personal information of people not necessary in the report. For example, if a neighbor witnessed it, you can name them as a witness (since that’s relevant), but you wouldn’t include that neighbor’s own life story or address – just their name and role.
- **Storage of Reports:** The agency will keep the official reports. As a foster parent, you might keep a copy in your own records, but ensure it’s stored securely (these are confidential records).

- **No External Sharing:** Never share the incident report or details with unauthorized individuals. That means you should not discuss the incident with other foster parents (except in a professional training context if appropriate), neighbors, or on social media. It's natural to seek support if an incident was stressful, but do so without revealing identifying details of the child. (Your agency can help you debrief, which is the appropriate channel.)

Completing the Incident Documentation: Under TAC §749.513, depending on the type of incident, you may need to attach additional documents:

- If an **emergency behavior intervention** (restraint, etc.) was used within 48 hours before a critical incident (like a death, critical injury, or suicide attempt), include documentation of that intervention [arrow.org](#). This might mean the restraint log or a description of what restraint was used.
- If the incident is a **critical injury resulting from a restraint**, you must document the restraint itself in detail (what led to it, behaviors, etc.) [arrow.org](#).
- For a **child absent without permission (runaway)**, include documentation of your efforts to locate the child and the notifications made (parents, law enforcement) with dates/times [arrow.org](#).
- For **abusive behavior among children**, include the comparative ages/sizes of the children [arrow.org](#).
- These attachments basically ensure context is provided. Your agency likely has a checklist so nothing is missed. Just be aware that these specifics exist so you can gather the needed info (e.g., make sure you log every attempt to call the bio parent when a child was missing, because you'll need to list those calls in the report).

Accuracy and Timeliness: Complete the written report as soon as possible, while details are fresh. Texas rules require agencies to submit written incident reports to Licensing typically by the next business day or within 24-72 hours depending on the incident. So, you might be writing it the same day or next day. If you're unsure how to phrase something, your case manager can help – but *do not falsify or omit key facts*. Accuracy is paramount. If you realize later that you forgot something or got a detail wrong, inform your agency so the report can be amended or an addendum added. It's much better to correct the record than to leave a significant mistake.

Real-World Tip: Keeping a daily log or journal of important events for each foster child can be a lifesaver when it comes to documentation. Many foster parents jot down notes on behaviors, appointments, incidents (big or small). In a serious incident, you can refer back to these notes to ensure you have the timeline and facts straight. Just remember those notes are also confidential.

Section Summary – Documentation: A strong Serious Incident Report is **objective, factual, and complete**. It should clearly detail **when, where, and what happened, who was involved, what actions were taken, and the outcome**arrow.org. Texas regulations list 10 key pieces of info to include, from names and dates to interventions and resolution. Write in a professional, neutral tone – imagine a third party reading it to understand exactly what occurred without guessing. Always maintain **confidentiality**: use initials for other children, don't mix one child's private info into another's record, and protect the reports from unauthorized accessarrow.org. Timely completion of the written report (usually within 24 hours) is as important as the timely phone call. Good documentation protects you and ensures the child's case record accurately reflects critical events. Next, we will discuss common pitfalls and challenges foster parents face in reporting – and how to avoid them.

6. Common Challenges and Errors in Reporting

Even experienced foster parents can find serious incident reporting challenging. In the heat of a crisis, it's easy to overlook a step or make a mistake. This section addresses some **common challenges and errors** in reporting, so you can be aware of them and avoid them. By anticipating these pitfalls, you'll be better prepared to handle incidents correctly.

Challenge 1: Recognizing What to Report. One common issue is not realizing that something is a "reportable" serious incident. Some situations are obviously severe (e.g., a broken bone, a runaway) but others might be borderline. **Error to avoid:** Failing to report an incident because you thought it was minor when it actually met criteria. For example, not reporting a child's suicide threat because they didn't actually hurt themselves – that could be a mistake if the threat was serious. *Solution:* When in doubt, err on the side of caution and consult your agency or just report it. It's better to make a report that turns out not to be needed than to miss one that was required. Remember, *any indication of abuse or significant risk must be reported*arrow.org – even if you're not 100% sure it happened.

Challenge 2: Timing – Delayed Reporting. Another pitfall is waiting too long to report. You might think, "I should gather more information first" or "Maybe the problem will resolve by tomorrow." **Error to avoid:** Missing the 24-hour window (or other deadline) for reporting. Texas mandates are clear – many notifications must happen *within 24 hours or sooner*arrow.org. Delaying can put you out of compliance and, more importantly, delay help to the child. *Solution:* Make reporting calls as soon as the immediate crisis is handled. If you're busy dealing with the child's needs and can't call right that minute, do it at the earliest possible moment (and always within 24 hours). If you suspect abuse or a crime, report **immediately** – there's no benefit to "wait and see." Prompt reporting is both safer for the child and protects you.

A frequent scenario: a foster parent might be afraid or unsure, so they wait to call their agency the next day and let the agency handle it. But if that means more than 24 hours passed since the incident (say the incident happened Friday night and you report to agency Monday morning), it's a violation. DFPS could cite the agency for late reporting, and it

comes back to your delay. Don't put yourself or your agency in that position. If something happens at an inconvenient time (weekend, 2 AM, holiday), the rules don't pause – use the 24/7 hotline and your agency's on-call number.

Challenge 3: Emotional Hurdles – Fear and Self-Doubt. Serious incidents can be emotionally charged. You might worry: “Will they blame me for this? Will I get in trouble or have the child removed?” This fear can tempt some to under-report or omit details. **Error to avoid:** Not reporting the full truth or minimizing what happened due to fear of consequences. *Solution:* Understand that the regulations exist to protect children, not to punish foster parents who responsibly handle situations. You are protected when you report in good faith dfps.texas.gov. Yes, if an incident reveals a lapse in supervision or a mistake, there might be an investigation – but coming forward promptly and honestly is far better than hiding it. Agencies and DFPS typically recognize that accidents and incidents happen; they mainly want to see that you responded correctly and learn how to prevent future issues. If you cover it up and it comes out later (for example, the child tells a therapist next week about an injury you didn't report), that *will* be a serious problem. Transparency is always the best policy. Overcome fear by reminding yourself: Reporting shows you are *doing your duty*. Many foster parents have had incidents and continued fostering successfully because they followed the protocols and worked with the system openly.

Challenge 4: Incomplete or Biased Documentation. Writing the report can be tricky. Common errors include leaving out key information, writing in a biased way (either too defensive or accusatory), or using lots of jargon or subjective language. *Errors to avoid:* Forgetting to include the timeline or certain participants, or inserting your opinions (like “I just know he did it on purpose” or “I think this wouldn't have happened if the previous caregiver had...”) in the narrative. *Solution:* Follow the checklist of what to include arrow.org and stick to facts. After writing, reread your report and ask: Does this objectively describe what happened? Are all the Who/What/When/Where/How answered? If an outside person read this, would they understand the incident clearly? Also, ensure **neutral language** – avoid blaming or emotive words. If you're upset (understandably) when writing, take a breath and focus on the factual sequence. You can always attach a brief statement with your thoughts separately if needed (e.g., to your agency), but the incident report itself should be professional in tone.

Challenge 5: Confidentiality Breaches. Amidst the stress, one might vent or accidentally share info inappropriately. **Error to avoid:** Discussing the incident with unauthorized people or including identifying info of one child in another's report, etc. For example, telling another foster parent friend “Oh my gosh, my foster teen was arrested yesterday” might feel like getting support, but it's a confidentiality breach. *Solution:* Confine detailed discussions to your support team: agency staff, therapist (if bound by confidentiality), or personal counselor. If you need emotional support, talk in generalities without identifying the child (“We had a tough incident at home, the child is okay now but it was scary”). In documentation, use the techniques from Section 5 to avoid naming other children in the same report arrow.org. Double-check your report for any unnecessary personal

info. Agencies often review your report draft – heed their feedback on removing or altering things to maintain privacy.

Challenge 6: Not Keeping Track of Notifications. In a chaotic moment, you might make all the calls but then later forget who you spoke to or whether you called X or Y. **Error to avoid:** Failing to document whom you notified and when, which can lead to confusion or duplicate reporting. *Solution:* As soon as you finish a call, jot down a quick note (time, person's name). Use a notebook or note app specifically for foster record-keeping. This way, when writing the report, you can accurately include “Notified Jane Doe, Agency Supervisor, at 5:30 PM on 5/10/25” and so on. This also protects you; if someone questions “Why didn’t you tell the caseworker?” you have the log that you did, at this time and person. Keeping a communication log is a best practice beyond incidents, but especially important during one.

Challenge 7: Assuming the Agency Will Handle Everything. Some foster parents think that by informing the agency, their job is done and the agency will then call SWI or licensing. However, as we covered, **the foster parent is required by rule to call Statewide Intake personally if the incident involves the child in your care**[arrow.org](https://www.dfps.org). **Error to avoid:** Not making the DFPS report yourself because you expected the agency to do it. While agencies do often follow up with written reports to licensing, the rule (26 TAC 749.503(b)) explicitly says *you* must report serious incidents to the hotline if it involves a child under your care[arrow.org](https://www.dfps.org). *Solution:* Always confirm whether you should call the hotline or whether your agency will. Generally, if it’s abuse/neglect or something urgent, you call immediately. Some agencies might say, “Call us first, and we will make the report together or have you call in.” But never assume it’s been done – double-check. It’s a team effort: you call it in, and your agency files the formal report to licensing. If you’re ever unsure if something was reported, don’t hesitate to call it in yourself – multiple reports are better than none.

Challenge 8: Overwhelming Emotions and Stress Management. Serious incidents can be traumatic for you too. A highly distressed foster parent might have trouble thinking clearly to follow all these steps. **Error to avoid:** Letting panic or stress lead to disorganized response (e.g., forgetting to call an important party, or saying something out of anger or panic on the record). *Solution:* Try to stay calm and use checklists. Many agencies provide an “Emergency Numbers and Steps” sheet – keep it on your fridge or saved in your phone. After you ensure safety, take a deep breath and start the notification process step by step. It can help to have a printed **checklist** of whom to call: 1) 911 (if needed), 2) Hotline, 3) Agency, 4) Caseworker/others. Mark them off as you do them. This prevents mistakes under pressure. Also, utilize respite resources after an incident if needed – for example, if one child seriously harmed another, you might need some respite or help while things are addressed. Communicate your needs to the agency.

Challenge 9: Language Barriers or Communication Issues. If English is not your first language or if you have hearing/speaking difficulties, reporting via phone might be challenging. *Solution:* Know that the Texas Abuse Hotline has resources like Relay Texas for hearing impaired reportersdfps.texas.gov and can get interpreters if needed. Don’t let communication issues stop you from reporting; there are accommodations (including an

online reporting system for non-urgent reports). Reach out to your agency if you need help making a report due to language – they can assist or ensure an interpreter is on the line.

Challenge 10: Follow-up Oversights. Sometimes after the initial report, people forget the follow-up requirements – like sending in the written report or following new safety directives. **Error to avoid:** Neglecting to complete the documentation or not adhering to a safety plan set after the incident. **Solution:** Treat the written report with as much importance as the call. Mark your calendar or set a reminder to finish it within the required timeframe (often immediately or within 24 hours). If licensing or your agency gave you instructions (e.g., “provide daily updates on the child’s condition for the next 3 days” or “don’t allow child and alleged perpetrator in same room”), be diligent in following those.

Section Summary – Pitfalls: Be aware of these common pitfalls: *not recognizing a reportable incident, delaying or avoiding reports due to fear, providing incomplete or subjective information, breaching confidentiality, and assuming others will report for you.* The solutions include: when in doubt, report; do it on time (within 24 hours or sooner); stick to the facts; keep information private except to those who need to know; and personally ensure the hotline is notified. Use checklists and logs to stay organized in a crisis. Remember, the systems in place are there to support you and the child, not catch you out – if you follow them, you are doing your job correctly. By avoiding these errors, you protect the child and yourself, and you build trust with your agency and DFPS that you can handle emergencies appropriately. Next, let’s outline the respective roles you and agency staff play during these incidents (who does what), so you know what’s expected of you versus your agency.

7. Roles of the Foster Parent vs. Agency Staff

When a serious incident occurs, both **you (the foster parent)** and your **agency/DFPS staff** have important roles to play. It’s a partnership: each has specific responsibilities to ensure the situation is handled properly and in compliance with regulations. Understanding the division of duties will help you know what is expected of you and what support you can count on from your agency.

Role of the Foster Parent (You): As the caregiver on the scene, your role is **immediate and hands-on**. Key responsibilities include:

- **Ensuring Immediate Child Safety:** You are the first responder. Provide first aid, de-escalate conflict, separate children if needed, and call emergency services (911) for any life-threatening or urgent needs. For example, if two kids are fighting, you intervene and separate; if a child is unconscious, you administer CPR if trained and call an ambulance.
- **Notifying Authorities (Initial Reporting):** As discussed, you must personally report the incident to the DFPS Abuse Hotline in most cases arrow.org. You also notify law enforcement immediately when required (for example, your role is to call

the police if a child is missing or a crime just occurred – don't wait for a caseworker to do that).

- **Notifying the Agency and Caseworker:** You inform your agency case manager or on-call supervisor as soon as possible (often immediately after calling 911/Hotline). You provide them with all the details you have. Likewise, if you have a direct DFPS caseworker (in DFPS-managed home), you call them too. Essentially, you **raise the flag** that an incident has happened.
- **Providing Detailed Information:** You are the eyewitness to what happened, so you must provide a complete account to the agency staff who will be writing reports and coordinating response arrow.org. As the Arrow handbook excerpt says, *"You must provide your Case Manager with a complete account of what occurred before, during and after the incident as soon as possible."* arrow.org They rely on you for accurate info. This might happen via a phone call summary and then in writing for the formal report.
- **Documenting the Incident (from your perspective):** You will likely fill out or contribute to the written incident report (Form 3005 or agency form). Sometimes the foster parent fills it and the case manager reviews; other times the case manager writes it based on your input and then you review for accuracy. Either way, you are responsible for ensuring the info is correct and nothing critical is omitted.
- **Implementing Interim Safety Measures:** If the incident involves an ongoing risk (say, an abuse allegation against someone in the home, or a dangerous situation that could recur), your role is to immediately implement any obvious safety step. For instance, if one foster youth sexually harmed another, you would ensure they are kept apart and supervised one-on-one until further direction. If a foster child is very aggressive, you might remove other kids from immediate vicinity. Your agency will advise, but you often must make quick judgment calls to maintain safety until you get that guidance.
- **Supporting the Child's Needs:** Post-incident, the foster parent continues caring for the child (unless removal or hospital, etc.). That means comforting the child, arranging medical follow-ups, observing them for any changes, and just being there emotionally. For example, after a hospital visit, you ensure the child rests and takes prescribed meds; after a traumatic disclosure, you offer comfort and normalcy while professional help is arranged.
- **Following the Care Plan Changes:** Your role extends to any changes made to the child's service plan or your home's plan as a result. If they add a safety plan (like extra supervision, alarms for doors for a runaway-risk youth, etc.), it's your job to implement those daily. If training is required (maybe you need a refresher on emergency behavior intervention), you agree and complete it. Essentially, you cooperate with all remedial steps.

- **Advocacy and Communication:** You are also the child's advocate. So, if after an incident the child needs something (counseling, tutoring if they missed school, etc.), communicate that to the team. Also, keep communicating with your agency about any emerging concerns following the incident (for example, "Since the fight, Child A has been having nightmares – can we get her in to see the therapist sooner?").

In summary, the foster parent's role is **immediate action, thorough reporting, and ongoing care**. You are the eyes, ears, and hands on the ground ensuring the child is safe and that the incident is brought to light.

Role of the Agency Staff (Case Manager, Supervisor) / DFPS Staff: The agency (or DFPS, if directly managed home) takes on the **administrative, investigative coordination, and support** roles. Their responsibilities include:

- **Guidance and Support During the Incident:** When you notify your agency, the case manager or on-call worker should guide you on what to do next. They might say, "Okay, you called 911, good. I'm on my way to the hospital to meet you," or "I will come to the home" if needed. They are there to support you and the child. If law enforcement is involved, they often act as an agency representative on site or at least stay in contact.
- **Completing Formal Reports to Licensing/DFPS:** The agency is typically responsible for submitting the official written report to Residential Child Care Licensing (RCCL) and the child's CPS team. As Arrow's policy notes, *"Arrow is responsible for completing a formal Incident Report...and submitting it to CPS within 24 hours."* arrow.org In practice, the case manager writes up the report using the info you provided, ensuring it meets all requirements, and sends it to the appropriate DFPS portal or licensing worker. They may also attach any additional documentation (hospital records, etc.). They handle the bureaucratic side so you can focus on the kids.
- **Notifying Other Stakeholders:** Agency staff will inform other relevant parties: the child's CPS caseworker (if DFPS was not already directly involved), the child's attorney or guardian ad litem (if required for major incidents), the biological parents through CPS if appropriate, and their own agency leadership. If an incident is serious, agency management may need to know (especially if media or legal issues could arise). They take care of those communications. For example, if a child is seriously injured, the case manager will call the CPS caseworker immediately and likely follow up with an email detailing the incident for the record. They may also coordinate with CPS to notify the child's parents within 24 hours as required by rule arrow.org.
- **Coordinating the Investigation:** If CPS or Licensing opens an investigation (which often happens for abuse/neglect allegations or serious injuries), the agency's role is to cooperate fully and facilitate the investigator's access. They might arrange for the

investigator to interview you, the child, or others. They also have to provide records and any prior information. Agency staff do *not* conduct the abuse/neglect investigation themselves (that must be independent), but they often do an internal review to see if any policy was violated or what can be improved.

- **Implementing Safety Plans or Remedial Actions:** If the incident reveals a safety concern, the agency will likely create a **safety plan** or corrective action plan. For instance, if two children fought, a safety plan might require line-of-sight supervision for those children at all times, or adjusting placements. If a child went AWOL, a plan might include alarm systems or more frequent check-ins. The agency staff will develop this plan (often in writing) and have you and possibly the child sign it. They then monitor compliance. If the plan says “weekly therapy for child” or “fence will be repaired by X date,” they follow up. They are essentially managing risk to prevent recurrence.
- **Providing Resources and Support:** Agencies should support you after an incident. That could be emotional support (debriefing with you, offering counseling or peer support), logistical support (maybe sending an aide or offering respite if you’re overwhelmed), or training (if, say, a medication error happened, they might retrain you on med administration). Their role is not to punish but to ensure you have what you need to continue providing care safely. For example, after a severe incident, a supervisor might visit your home to check on everyone and see what support you need.
- **Liaison with DFPS:** The agency serves as the go-between for you and DFPS. They will keep DFPS informed, and likewise inform you of any DFPS directives. For instance, if DFPS (Licensing) imposes a “corrective action” on the home, the agency will communicate that to you and help you complete it. Or if DFPS decides to remove a child (maybe in an abuse investigation scenario), the agency will coordinate that transition. Ideally, agency staff advocate for you if appropriate (e.g., explaining to investigators context that supports your actions) while still prioritizing child safety.
- **Documentation and Record-Keeping:** The agency ensures that all documentation (your report, their internal forms, correspondence) goes into the child’s and home’s files. They have retention rules (like TAC §749.515 requires keeping incident reports on file for a certain time). They handle those administrative tasks.
- **Ongoing Monitoring:** If an incident indicated any non-compliance or area for improvement in the foster home, the agency may increase monitoring for a while. For example, extra visits or phone calls to see how things are going. This is to help, not to harass – their goal is to make sure the home remains safe and in compliance. They might do this until the issue is fully resolved.

To put it succinctly: **Your role is to take care of the immediate situation and report it, and the agency's role is to take that information and run with the procedural follow-up, support, and compliance duties.**

Consider a scenario to illustrate roles:

- A foster child gets hurt on the playground and needs stitches. **You:** administer first aid, comfort child, call hotline and agency, take child to ER, and later write down what happened. **Agency:** advises you on any immediate next steps (maybe they meet you at ER), notifies CPS, fills out the official incident report form to send to Licensing, maybe arranges for the child's bio parent to be informed via CPS, and checks if supervision was appropriate. If all was fine, they simply document and close it. If they think maybe the yard wasn't safe, they might ask you to add padding or something and document that.
- A more severe example: A foster teen accuses your spouse of hitting them. **You:** ensure child is safe (e.g., separate from spouse), call hotline (this is an abuse allegation), notify agency immediately. **Agency:** likely instructs that the accused person have no contact with child pending investigation, perhaps moves the child or puts respite in place, contacts CPS investigators, and files the serious incident report. They support you through the investigation process, but also must remain neutral/focused on the child's safety. They handle communications with licensing and keep track of the investigation outcome. If the allegation is ruled out, they help things return to normal; if it's validated, they must take action (which could include closing your home if necessary). Throughout, they document every step.

Understanding this division helps you know where your responsibility ends and the agency's begins. **Do your part, and trust (and verify) that the agency does theirs.** If you ever feel the agency is not fulfilling their role – say you reported something but suspect they didn't forward it to DFPS – you can always follow up or even contact DFPS yourself to ensure it was received. But in general, agencies are very diligent in this area because they are also monitored by Licensing.

Special case – DFPS-verified homes: If you are directly under DFPS (no private agency), the “agency staff” is your **DFPS Home Development worker (FAD worker)** and the child's CPS caseworker. Their roles mirror the above:

- The CPS caseworker ensures the child's needs are met (possibly visits or calls the child post-incident, informs the parents' attorney or court if needed).
- The DFPS FAD worker completes the paperwork to Licensing [dfps.texas.gov](https://dfps.texas.gov/dfps.texas.gov) and works with you on any corrective actions. DFPS licensing reps (RCCL inspectors) might contact you directly too in this setup.

Teamwork and Communication: Ultimately, handling a serious incident is a team effort between you and your agency/DFPS. Keep lines of communication open. Always inform

your agency of any serious concerns – don't try to handle big issues entirely alone. Likewise, expect that they should inform you of outcomes (for instance, they should tell you the result of any investigation, what needs to happen next, etc.). The **foster parent's primary focus** is the child's immediate care and truthful reporting; the **agency's focus** is broader oversight, compliance, and support.

Section Summary – Roles: *Foster parents* are the frontline responders – you secure safety, call in reports, and care for the child throughout the incident. *Agency staff/DFPS workers* are the backend support – they complete formal reports arrow.org, notify all necessary officials, coordinate investigations, and implement any needed follow-up plans. You can think of it as: you handle the “here and now” of the incident, they handle the “who else needs to know and what do we do going forward.” Both roles are vital and complement each other. Knowing this, you can confidently do your part and also lean on your agency for their part, which can reduce stress. Next, we'll walk through some real-life **case examples** to illustrate how these roles and processes play out in practice and to solidify your understanding.

8. Case Examples and Scenarios

To bring all this information together, let's explore a few **sample scenarios** that a Texas foster parent might encounter. In each scenario, we'll identify the serious incident, walk through what the foster parent should do (or did), and highlight key points about reporting and documentation. These examples will help you apply the principles we've discussed to real-world situations.

Scenario 1: Medical Emergency – Broken Arm

Background: It's a Saturday afternoon. You're supervising your 7-year-old foster son, “Aiden,” and your own children as they play in the backyard. Aiden climbs onto the top of a play structure despite your warning, loses his balance, and falls to the ground. He lands awkwardly on his arm and immediately screams in pain.

Incident: Aiden's forearm looks swollen and possibly misaligned – you suspect it's broken (a **critical injury requiring medical treatment**). This is a serious incident.

Foster Parent Actions: You stay calm and act quickly. You comfort Aiden and perform basic first aid: immobilize his arm with a makeshift splint and apply an ice pack. You call 911 due to the severity of pain and the need for possible ambulance transport. While waiting for EMS, you call your agency's on-call number to inform them. EMS arrives within 15 minutes, and Aiden is taken to the hospital. You accompany him.

At the hospital, doctors confirm a fracture and put a cast on Aiden's arm. Aiden is frightened, but you console him throughout. Once Aiden is resting stable in the ER, you step aside and call the **Texas Abuse Hotline** (Statewide Intake) to report the incident (even though it was an accident, it's a reportable injury). You provide all details: time, what happened, the injury, and that he's receiving treatment arrow.org arrow.org. You also call

Aiden's CPS caseworker (or ensure the agency has done so) to inform them, and they in turn notify Aiden's biological mother of the injury within 24 hours as required [arrow.org](#).

Reporting & Documentation: You gather the hospital discharge paperwork (which notes the broken arm) to attach to your report. That evening, back home, you fill out the incident report form provided by your agency. You include all required elements: date/time (fell at ~3:30 PM on May 10, 2025), who was present (you and your two bio kids), exactly what happened ("Aiden climbed 6-foot play structure, fell approx. 6 feet onto grass/dirt"), the nature of incident (injury – broken arm), interventions (first aid, 911 call, ER treatment), notifications (911 at 3:32 PM, agency 3:40 PM spoke to Jane Doe, SWI call at 5:00 PM, spoke to John, intake #...), outcome (Aiden in cast, follow-up with orthopedic, pain meds prescribed). You avoid blaming wording – you note that you had cautioned him but state facts: "Aiden did not use the ladder but attempted to jump off." You submit this report to your agency within the day. The agency sends it to Licensing by the next business day, satisfying the 24-hour rule [arrow.org](#).

Aftermath: CPS does not investigate this as abuse since it was clearly accidental and supervision was appropriate. Licensing will review it as a matter of record. Your agency might discuss adding extra safety padding under the play structure to prevent future injuries (a preventive step). Aiden recovers over the next weeks. You documented everything properly, and the focus returns to caring for Aiden.

Key Takeaways: **Serious Incident = yes (critical injury)**. Actions: immediate first aid and medical care, **report to hotline within hours** (well under 24h) [arrow.org](#), inform agency and caseworker, fully document including witness (your own kids) and interventions. This scenario shows that even a true accident is reportable – you did everything right and had no adverse consequence for reporting, and Aiden got the care needed.

Scenario 2: Allegation of Abuse – Disclosure of Past Abuse

Background: Your 10-year-old foster daughter "Maria" has been in your home for 2 months. One evening at bedtime, Maria seems upset after a visit with her biological father earlier in the day. She hesitates, then tells you, "I have a secret... When I was little, my uncle used to touch me. He told me not to tell."

Incident: This is an **allegation of sexual abuse** (by a relative). Even though it happened in the past and not in your home, it is a *serious incident that must be reported immediately* as an abuse allegation [arrow.org](#).

Foster Parent Actions: You stay calm and thank Maria for telling you. You assure her she did the right thing and that you will help keep her safe. You do *not* press for a lot of details (to avoid compromising any future investigation) – you gather just basic info ("when did this happen, do you see that uncle now?" etc., if she's willing to share). After comforting her and ensuring she feels safe for the night, you promptly call the **Abuse Hotline** to report the abuse outcry. You provide Maria's information and exactly what she disclosed [arrow.org](#).

This call is made within an hour of her telling you – such allegations should be reported *immediately*, there's no waiting until the next day.

You also call your agency's on-call line to inform them of the situation. They advise you to document exactly what Maria said (verbatim, as much as possible) and not to discuss it further with anyone else, as CPS and possibly law enforcement will handle it. They also say they will notify Maria's CPS caseworker first thing in the morning (if not that night).

Because the alleged perpetrator is an uncle who is sometimes at her father's house, the agency and CPS arrange that Maria will have no contact with that uncle (CPS will likely issue a safety plan with the father). They might also put a hold on visits with the father until this is sorted, depending on who knew what.

Reporting & Documentation: In your written incident report, you include:

- The date/time of disclosure (e.g., June 2, 2025 at 8:30 PM, during bedtime routine).
- What led to it (she was upset after a visit).
- Maria's exact words as closely as you recall: e.g., "[Child] stated that her uncle (maternal uncle) sexually abused her when she was 6; specifically said 'used to touch me'." Include no more detail than what she gave – do not speculate or add commentary like "I believe her" (your belief is implicit, and investigation will determine facts).
- Who is involved: Maria (child), the alleged perpetrator (name or at least "maternal uncle" – though he's not in your home, he's part of the incident context), and you as the witness to the disclosure.
- Notifications: note that you called SWI immediately and the agency.
- Outcome: CPS intake accepted; CPS to investigate; you provided support to Maria and ensured her safety that night (for instance, mention if she wanted a night light or if you stayed with her until she slept, anything relevant to her well-being).

Because this is an abuse outcry, CPS and possibly police will investigate. The next day, a CPS investigator contacts you and schedules an interview with Maria. The investigator also interviews her father and uncle, etc. Your agency and you cooperate fully. The investigation might find that the abuse is "reason to believe" for the uncle, which then would be handled by law enforcement for possible charges.

Through it all, you did exactly what you should: *you reported without delay*. You did not confront the uncle or the father (that's CPS's job). You maintained confidentiality – you didn't gossip about it to anyone. You comforted Maria and provided therapy resources after informing CPS (CPS might expedite counseling for her).

There's no "blame" on you or your home; on the contrary, you are seen as having appropriately safeguarded the child by reporting the information.

Key Takeaways: **Serious Incident = yes (child abuse allegation).** The foster parent must treat any disclosure or suspicion of abuse as a serious incident and report *immediately* arrow.org. Document the child's exact words and actions taken. Do not investigate on your own – hand it over to CPS/agency. The role of the foster parent is supportive and vigilant, while professionals do the investigation. This scenario underscores that serious incidents include historical abuse allegations, not just injuries or events happening in-the-moment.

Scenario 3: Runaway Incident

Background: You are fostering "Marcus," a 16-year-old, who has a history of running away from previous placements. You've discussed triggers and prevention strategies in his treatment plan. One evening, Marcus gets upset after a phone call and storms out of the house. You follow to the porch, but he runs down the street and disappears around the corner. It's 9:00 PM and already dark.

Incident: Marcus is now an **unauthorized absence (runaway)**. This is a serious incident requiring immediate action and reporting.

Foster Parent Actions: You immediately try to locate him. You grab your phone and flashlight and check the immediate area (house, backyard, nearby streets). No sign of him. You call out for him, but he's gone. After about 15 minutes of searching his known hangouts in the neighborhood (the park, a friend's stoop) with no success, you realize he is truly missing. You call your agency's on-call number to inform them "Marcus ran away." They advise you to notify law enforcement since he's a minor out at night. **By 9:30 PM (within 30 minutes), you call the police** non-emergency line (or 911, depending on local guidance for runaways) to report a missing foster child. The police take his description and say they will lookout.

Next, you call the DFPS Abuse Hotline to report Marcus missing. You provide his name, age, time he ran, what you've done so far, and that police have been notified arrow.org. The hotline takes the info as a Priority II (likely) and will inform licensing. You also continue trying to reach Marcus on his cell phone – no answer. You recall the phone call that upset him was with his older brother; you pass that info to police and your agency, as the brother's place might be where Marcus went.

Your agency case manager arrives or calls back to assist. They help contact Marcus's brother's family or any other leads. You document every attempt to find him: "Searched neighborhood from 9:05-9:20 PM, called friend J.S.'s mother at 9:25 PM (he wasn't there), called police at 9:30 PM, case manager called sibling's foster parent at 9:45 PM," etc. arrow.org. These details will go into your incident report.

At 1:00 AM, the police locate Marcus a few miles away at a convenience store (or at the brother's house in another part of town). They return him to your home, or you pick him up

at the station. Marcus is safe and unharmed. You notify the agency and the hotline (if asked) that he's been found. (Even after found, the incident still gets reported and documented as it occurred.)

Reporting & Documentation: Your written report includes:

- Time he was noticed missing (9:00 PM) and circumstances (upset after call, ran out).
- Actions taken: search efforts (list everywhere you checked), people you contacted (neighbors, friends), and the times you did so [arrow.org](#); notification to police (with officer name if possible) [arrow.org](#); notification to agency and DFPS hotline (with times).
- Law enforcement response: e.g., "Local PD dispatched officers; at 1:00 AM, Officer Smith (badge 123) informed me Marcus was found at X location. I retrieved Marcus; officer filed a report #____."
- Condition of child upon return: e.g., "Marcus returned home at 1:30 AM, slightly cold but no injuries. He stated he went to try to see his brother. He is calm now and has agreed to talk with therapist tomorrow."
- Outcome: You might note plans to address it (agency will schedule a treatment meeting, etc.). And that you will keep all doors alarmed (maybe they were already, but nonetheless).

Texas rules require documentation of efforts and notifications made when a child is absent without permission [arrow.org](#). You've done that thoroughly. Also, since Marcus was missing >2 hours, you clearly informed law enforcement within required timeframe (for 16-year-old, definitely by 24h but you did within half an hour which is excellent) [arrow.org](#) [arrow.org](#).

Your agency, per their role, also likely notified the CPS caseworker and possibly the biological parent or at least documented that CPS should inform them if required (with older teens, parents often still need to know if their child went missing and came back).

Outcome: The next day, your agency holds a meeting with you and Marcus. They update his service plan to include additional runaway prevention strategies (perhaps a volunteer mentor, a self-soothing plan when upset, etc.). You maybe install door chimes as extra alert at night per agency suggestion. Marcus' therapist is notified to address the triggers. No punitive action is taken against you, because you followed protocols correctly: immediate search, timely notifications, clear documentation. Possibly, licensing might review if supervision was adequate – but given he's 16 and it was a spontaneous bolt, they likely just note it as an incident with no deficiency on your part. You showed you responded diligently.

Key Takeaways: **Serious Incident = yes (unauthorized absence).** The foster parent must respond quickly: search, notify police (especially by 2 hours for younger or within 24 max for older; here it was within 0.5h) [arrow.org](#), notify agency/DFPS immediately. Document

every step. Reintegrate the child and adjust supervision. The agency will support and might create a plan, but no one faults the foster parent since you did the right things. It demonstrates the importance of acting fast and keeping records during a stressful event.

Scenario 4: Behavioral Crisis – Suicide Attempt

Background: “Elena” is a 15-year-old in your foster home, diagnosed with depression. One evening, after a tense phone call with her mother, she locks herself in the bathroom. You sense something is wrong and knock; she eventually opens the door, and you find she has ingested a number of pills (over-the-counter pain relievers) in a suicide attempt. She’s conscious but groggy and scared.

Incident: This is a **suicide attempt by a child**, a very serious incident that requires emergency medical care and reporting arrow.org.

Foster Parent Actions: Immediately, you call 911 for medical help. While waiting, you keep Elena awake and reassure her, trying to find out what she took and how much. You also quickly remove any remaining pills and any other medications from her reach (they were locked, but she got these from a purse). EMS arrives, they evaluate and transport her to the hospital for overdose treatment. You accompany her. She is hospitalized for monitoring and psychiatric evaluation.

From the hospital, once Elena is stable, you call the **Abuse Hotline** to report the incident (though no abuse here, serious incidents like suicide attempts are reported via the same hotline). You provide all details of the attempt arrow.org. You also inform your agency case manager. They likely come to the hospital or meet you there, and coordinate with the CPS caseworker. Given the nature of the incident, Elena will be evaluated by mental health professionals; possibly a psychiatric hospital admission is considered. According to Texas guidance, the **attempt** itself is the reportable incident (and you’ve reported it), and any admission to a psych facility is a follow-up step (not a separate incident unless something else precipitates it) arrow.org.

Reporting & Documentation: In your report, you include:

- The time and events: “At ~8:00 PM on Jan 5, 2025, Elena ingested approximately 20 pills of [Medication] in a self-harm attempt.”
- How you discovered and intervened: “Elena had locked herself in bathroom after a distressing call; I persuaded her to open door after about 5 minutes and found evidence of ingestion. Called 911 at 8:10 PM. Monitored breathing and alertness until EMS arrived.”
- Who was involved: Elena (child), you, any family members present (maybe your spouse was in home and helped).
- EMS/police involvement: paramedics names or report numbers if available.

- Hospital info: “Transported to XYZ Hospital ER, treated for overdose. Treating physician Dr. Lee completed evaluation. Elena’s stomach was cleared and she was medically stabilized. She was then transferred to the psychiatric unit for further care.”
- Notifications: “Called DFPS Statewide Intake at 9:00 PM, spoke with Sam (ref #xxx)[arrow.org](#). Called agency on-call at 8:30 PM, spoke with Supervisor Y, who came to hospital. CPS caseworker Jane Doe arrived at 10 PM at hospital.”
- Outcome/Next steps: “Elena is under psychiatric care at XYZ Hospital as of this report. Plan is for a 72-hour evaluation. No other children in the home have access to medications (all have been double-secured). Will participate in discharge planning to support Elena’s safety. Follow-up therapy to be intensified.”

This incident will trigger a CPS caseworker visit and likely a safety plan for when she returns (like removing any sharp objects, increased supervision, etc.). It’s not an investigation of you, but licensing may review how medication was stored or if any warning signs were missed. Ensure to show that you followed her treatment plan and that meds were locked (if indeed they were and she found a way, or if they weren’t fully secured, acknowledge that and correct it).

Your agency and CPS might consider a higher level of care for Elena (maybe moving to a residential treatment if needed), but that’s case-specific. Throughout, you acted fast, got her life-saving help, and reported promptly.

Key Takeaways: **Serious Incident = yes (suicide attempt)**. Life safety first (911), then immediate reporting. Document clearly the attempt details and your actions. Recognize that *any suicide attempt is explicitly reportable in Texas*[arrow.org](#). Also note the guidance: suicidal ideation alone isn’t a “serious incident” by definition[arrow.org](#), but in practice, always tell the caseworker/agency about any self-harm statements so they can address it clinically. In Elena’s case, it was an actual attempt, so you did exactly right. The scenario highlights the importance of quick intervention and also the nuance that the psych hospitalization was due to a reportable incident (the attempt), aligning with TAC guidance[arrow.org](#).

Scenario 5: Unauthorized Restraint / Behavior Management Issue

Background: You are fostering two brothers, ages 8 and 10, who sometimes have aggressive behaviors due to trauma. One day, the 10-year-old, “Jake,” has a severe meltdown – he’s throwing objects and trying to hurt his younger brother. You have been trained in **emergency behavior intervention (personal restraint)** and this situation warrants it to prevent harm.

Incident: Jake attempts to punch his brother; you step in and perform a brief **personal restraint** (holding Jake’s arms from behind) to stop him from harming others. This hold lasts about 30 seconds until Jake calms slightly. In the struggle, however, Jake and you trip

and fall to the ground. Jake ends up with a minor scrape on his elbow and you with a bruise. No serious injury, but it was a physical restraint and a child was slightly hurt during it.

This qualifies as a serious incident because:

- A **physical restraint** was used (which always must be documented, especially since it's not routine discipline).
- There was an **injury during the restraint**, albeit minor, which triggers specific documentation (per TAC §749.513, if an injury resulted from a restraint, detail the precipitating behaviors and restraint specifics)arrow.org.
- It involved aggressive behavior which is significant to report.

Foster Parent Actions: After the fall, you check Jake – only a small scrape, which you clean and bandage. The younger brother is shaken but unharmed. You sit with the boys and help calm them down using de-escalation techniques. You ensure everyone is now safe.

You then notify your agency about the incident. You explain that you needed to perform a restraint to protect the younger child. Because there was a minor injury (scrape) from the scuffle, you decide to report it via the hotline as well (especially to cover all bases – technically if it's very minor, some might consider not a “critical injury,” but given it was due to a restraint and any use of restraint on a child is serious, it's wise to report it). You call Statewide Intake, report Jake's aggressive episode and that you used a short personal restraint as trained, and that he got a small scrape in the process. The hotline takes the info – likely it's not viewed as abuse since you used an approved technique for safety, but it will be recorded and sent to Licensing for review.

Reporting & Documentation: This report will be a bit detailed on the behavior side:

- Incident description: “Jake, 10, became physically aggressive toward his brother. To prevent harm, I, the foster father, implemented a short personal restraint (basket hold) on Jake at approx. 4:15 PM on 9/1/2025. During the struggle, we slipped to the floor.”
- Duration and type of restraint: It's important to document *how long* and *what type* of hold, to show it was within training guidelines (e.g., “hold applied for about 30 seconds, just until Jake released the toy and ceased trying to hit; then I released him”). Note that per TAC, only trained caregivers can do restraints and only short ones for emergencies – by documenting it, you show it was an emergency and briefarrow.org.
- Injury report: Describe the scrape injury. “Jake sustained a small abrasion (~1 inch) on left elbow when we fell. Provided first aid (cleaned and bandaged). No further injury noted. I have a bruise on my left knee from the fall; no medical attention required.”

- Precipitating circumstances: To comply with §749.513 documentation requirements, you describe what led to the restraint (“Jake was attempting to punch brother after an argument over a game”) and the behaviors during (“He was yelling, swinging fists”)arrow.org.
- Witnesses: The younger brother was present; list him as witness (though 8 years old, he’s a direct witness).
- Interventions after: “After releasing Jake, I used calming techniques, separated the siblings, and they each spoke with me about what happened. The situation de-escalated and normal activities resumed by 5:00 PM.”
- Notifications: “Called agency at 4:30 PM; program director notified. Called SWI at 5:00 PM to report use of restraint and minor injury (spoke to Katie, ref#...)”
- Outcome: “Agency will review the incident. Both children remain in home; we discussed alternative coping strategies with Jake. Monitoring Jake’s elbow – appears fine.”

Because any restraint is something Licensing looks at closely, your thorough documentation shows it was done for safety, not out of anger or punishment, and that you followed rules (you were trained, you only used it as long as necessary, etc.). You also note differences in size/age between the kids as required for child-on-child violence documentation (Jake is 2 years older, which is relevant but not a huge difference)arrow.org.

Your agency will likely do a quick internal check: Was the restraint within policy? Was there anything else we could do? They might have you do an incident debrief with their behavior specialist. But since you did it correctly, it should be fine. If Jake’s scrape had been more serious (say a sprain or big bruise), still handled similarly, just more documentation of injury and maybe medical check.

Outcome: No investigation needed beyond possibly Licensing reviewing the report. The incident is categorized as a “behavioral management” issue. The agency might update the boys’ service plans to include more proactive strategies to prevent escalation. Perhaps they provide you with a punching bag for Jake or extra therapy sessions. You demonstrated you can manage a crisis appropriately and report it, which ultimately builds trust.

Key Takeaways: **Serious Incident = yes (emergency restraint & minor injury)**. Use of a restraint on a foster child is inherently reportable (if not by explicit TAC list, then by the fact it’s unusual and can result in injury). You handled it correctly by using an authorized method (only if trained and only to prevent harm)arrow.org, and you reported it. Documentation needed to be detailed about the restraint and behaviorsarrow.org. Confidentiality wasn’t big issue here, just siblings in same home. This scenario emphasizes that even “allowed” interventions like a short restraint must be taken very seriously and fully documented – it protects the child and you by being transparent.

These scenarios illustrate a range of situations: accidental injury, abuse disclosure, runaway, mental health crisis, and emergency discipline. In each case, the foster parent's appropriate actions included **ensuring safety, notifying the right people quickly, and documenting thoroughly**. By following the guidelines in this manual, you can handle each of these situations (and others) with confidence and keep the children safe and supported.

9. Tips for Ensuring Compliance and Protecting Child Safety

Finally, here is a concise list of **best practice tips** to help you stay in compliance with Texas requirements and, most importantly, keep children safe during any serious incident. Think of this as your quick-reference **checklist** moving forward:

Best Practices Checklist for Serious Incident Reporting:

- **Prioritize Safety First:** Always address the child's immediate needs *before* anything else. Administer first aid, remove the child from danger, and call **911** for any emergency (medical crisis, fire, crime, etc.) without delay dfps.texas.gov. You can't effectively report an incident if the situation is still dangerous – stabilize it first.
- **Know Your Emergency Contacts:** Keep a list of critical phone numbers readily accessible. Include the **Texas Abuse Hotline (1-800-252-5400)**, your agency's 24-hour emergency line, your CPS caseworker's number, local police/fire, etc. In a crisis, you don't want to scramble for the right number. Post them on your fridge or save in your phone.
- **Report Within the Required Timeframes:** Mark the mantra: **"As soon as possible, no later than 24 hours."** Many incidents should be reported immediately or within hours. Don't let the day pass before making those calls arrow.org. Timely reporting is not just a rule – it ensures the child gets timely help and that you stay compliant.
- **Call Statewide Intake for Every Serious Incident:** Remember that **one call to the hotline** covers notifying both CPS and Licensing arrow.org. So make that call for any qualifying incident (injury, runaway, abuse allegation, etc.). Even if you're unsure if it's "serious enough," the hotline staff can advise – it's better to have it on record. As a mandated reporter, you'll never be faulted for over-reporting in good faith.
- **Also Inform Your Agency Case Manager Promptly:** Right after calling SWI (or even concurrently if another caregiver can help call one while you call the other), loop in your **agency**. They are your allies and will guide you through next steps arrow.org. Quick communication with them means quicker support.

- **Document Everything (Even in the Moment):** If possible, jot down notes *during* or right after the incident while details are fresh. Write down times, witnesses, and actions. This will make your formal report more accurate. For example, note “8:45 PM – child fell off bike, 8:50 PM – called 911, Officer Jones arrived 9:00 PM.” These notes can later be polished into the report.
- **Use Objective, Descriptive Language:** When writing reports or talking to investigators, stick to the facts. **Avoid speculation or emotional language.** Describe behaviors and statements, not judgments. For instance, say “the child cried and said, ‘I hate life’” rather than “the child was extremely depressed.” This helps professionals make their assessments without bias.
- **Maintain Confidentiality:** Share information only on a “need-to-know” basis. In reports, use initials for other foster children arrow.org. Don’t post or gossip about incidents. If other foster parents or friends ask about a commotion, you can say “We had an emergency but it’s under control” without giving details. Protect the child’s privacy.
- **Keep Copies of Reports and Logs:** Make sure you retain a copy of any incident report you complete (unless instructed otherwise by your agency). Also keep a log of your notifications (dates/times of calls). These records can be invaluable if there’s ever a question about whether you reported timely, or to refresh your memory later.
- **Review and Update Safety Plans Regularly:** After any incident, debrief with your agency and family. Ask, “What can we learn? How can we prevent this in future?” Update your home’s **emergency plan** (you should have one for fires, disasters, etc.) and any child-specific behavior plans. For instance, if a child went missing, consider new door alarms or supervision strategies arrow.org. If a medical emergency happened, check that first aid kits are stocked and everyone knows emergency protocols.
- **Stay Current on Training:** Take all required foster parent trainings, especially on topics like CPR/first aid, trauma-informed care, and emergency behavior intervention. The more skilled you are, the better you can handle incidents calmly and correctly. Texas Minimum Standards require ongoing training – embrace it. For example, if restraints might ever be needed, ensure you’re qualified as per §749.2053 (only trained caregivers can do it) arrow.org.
- **Build a Support Network:** Serious incidents can be stressful. Have people you can debrief with (within confidentiality limits). This could be a support group of foster parents (discuss in general terms), a therapist, or a mentor. Your agency may have a foster parent mentor program – use it. Emotional support for you ensures you remain effective for the kids.

- **Don't Hesitate to Ask for Help:** If you sense a situation escalating (e.g., a child's behavior is deteriorating towards a crisis), **reach out BEFORE it becomes an incident.** Call your case manager and say, "I'm worried, can we strategize or get extra help?" It's not a failure to ask for respite or intervention; it's prudent. Many serious incidents can be averted with proactive measures.
- **Understand the Child's Triggers and History:** Knowing each child's background can help you foresee potential incidents. For example, if you know a child has a trauma trigger around water, you'll supervise extra at pool time to prevent a panic incident. If a teen has a history of AWOL, you'll keep a closer eye when they're upset and perhaps use agreed-upon coping strategies. This isn't foolproof, but it reduces risk.
- **Follow-Up After an Incident:** Once the dust settles, ensure the child gets any needed follow-up care. Attend all follow-up medical appointments, arrange counseling sessions to address the emotional impact, and help the child process what happened. Also, follow any recommendations from CPS or your agency (e.g., attend a staffing or therapy session with the child). Showing that you take post-incident steps seriously demonstrates your commitment to the child's well-being and to improvement.
- **Stay Texas-Specific:** Remember that rules can vary by state. You are in Texas – so always refer to Texas DFPS/HHSC guidelines (like the ones we cited) for what you must do. If you ever transfer to a different state or agency, learn their specifics anew. But as long as you foster in Texas, keep a copy of the Texas Minimum Standards for Child-Placing Agencies handy (or bookmarked online) and refer to the reporting rules (749.501-749.513) whenever you're unsure. This manual and your agency are great resources.
- **When in Doubt, Communicate:** If you are unsure about whether something needs reporting, or how to handle a particular scenario, reach out and ask. Call your agency or supervisor and explain the situation. They can advise if it meets criteria or how to proceed. It's better to ask than to assume incorrectly. As one saying goes, *"If you're going to err, err on the side of protecting the child."* That usually means report and document.
- **Stay Organized:** Keep all important records (placements info, medical consents, etc.) in an organized binder or digital file. In a crisis, you might need quick access to a child's Medicaid number, DFPS person IDs, etc., for hospital or police forms. Organization helps you respond more effectively.
- **Take Care of Yourself:** After a serious incident, make sure you attend to your own emotional state. It can be traumatic to you as well. Utilize any counseling provided, take a brief respite break if the agency can arrange it (even a few hours break can

help), get rest, and regroup. A calm and healthy foster parent is the best resource a child can have.

By following these tips, you'll not only remain **in compliance** with Texas rules but also create a safer and more supportive environment for the children in your care. Reporting serious incidents is not about getting anyone in trouble – it's about ensuring transparency and help for those who need it. Your diligence in this process can truly be life-saving and life-changing for a child.

In conclusion, as a Texas foster parent, mastering the art of **understanding and reporting serious incidents** is a critical part of your role. It may seem like a lot of protocol, but each step – from identifying an issue, to making a timely report, to writing it down, and learning from it – is designed to protect children and support you in providing the best care possible. You are a vital link in the child welfare system's safety net. By applying the knowledge and best practices from this training, you ensure that when serious incidents occur, they are **handled swiftly, correctly, and with the child's best interests at heart**. Thank you for your attention to these protocols and for your commitment to caring for Texas' children.

Keep this manual as a reference, and don't hesitate to ask your agency for updates or clarifications – policies can evolve, and staying informed is part of the job. With this foundation, you can face challenging situations with confidence and competence, knowing you're doing right by the children and by the law.

Stay safe, stay prepared, and never forget: your proactive reporting can make all the difference in a child's life. dfps.texas.gov/law.cornell.edu