

**ARIZONA SUPREME COURT**  
**ADMINISTRATIVE OFFICE OF THE COURTS**  
**JUVENILE JUSTICE SERVICES DIVISION**  
**Contract Year 2014 - 2016**  
**SERVICE SPECIFICATION**  
**FOSTER HOME RESPITE CARE**  
**Service Code 155 & 156**

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**LICENSE REQUIREMENT:**

Licensed as a Regular Family Foster Care Home or Therapeutic Foster Care Home

**REQUIREMENTS:**

Ability to enter foster home and care for youth, or accept youth into own home for temporary care. This service is available for youth in foster care only.

**TRAINING:**

<p>The following (1, 2, 3, 4 only) must be completed <b>prior</b> to providing services to</p> <p><b><i>Regular Family Foster Home</i></b></p> <ol style="list-style-type: none"> <li>1. Basic DES pre-service training</li> <li>2. CPR/First Aid</li> <li>3. Behavior management</li> <li>4. Behavioral observation and documentation</li> <li>5. In addition to the re-licensing requirement,</li> <li>6. hours annual on-going therapeutic education</li> </ol>	<p>The following (1, 2, 3, 4, 5 only) must be completed <b>prior</b> to providing services to the</p> <p><b><i>Therapeutic Foster Care Home</i></b></p> <ol style="list-style-type: none"> <li>1. Basic DES pre-service training</li> <li>2. CPI</li> <li>3. CPR/First Aid</li> <li>4. Behavior management</li> <li>5. Behavioral observation and documentation</li> <li>6. In addition to the re-licensing requirement, <ul style="list-style-type: none"> <li><b><i>In Home Parent(s):</i></b> 10 hours of annual on-going therapeutic education</li> <li><b><i>Other Parent:</i></b> 5 hours of annual on-going therapeutic education</li> </ul> </li> </ol>
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**REIMBURSEMENT:** Negotiated contract rate

**SERVICE TASKS:**

1. Provide all services in accordance with the service tasks required for the level of regular foster care home.
2. Document service delivery and client behaviors daily.

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I have read and fully understand the requirements to provide Foster Home Respite Care services, agree to all requirements and restrictions and propose the following rate:

<p><b><i>Regular Family Foster Home</i></b> (service code 155)</p> <p>Proposed service rate: \$ _____ / hour (Maximum of 12 hours)</p> <p>Proposed service rate: \$ _____ / day</p>	<p><b><i>Therapeutic Foster Care Home</i></b> (service code 156)</p> <p>Proposed service rate: \$ _____ / hour (Maximum of 12 hours)</p> <p>Proposed service rate: \$ _____ / day</p>
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Other proposed agreement: \_\_\_\_\_

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\_\_\_\_\_  
Contractor Signature / Date

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**AOC USE ONLY: DO NOT FILL IN BEYOND THIS LINE**

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<p><b><i>Regular Family Foster Home</i></b> (service code 155)</p> <p>Final service rate: \$ _____ / hour (Maximum of 12 Hours)</p> <p>Final service rate: \$ _____ / day</p>	<p><b><i>Therapeutic Foster Care Home</i></b> (service code 156)</p> <p>Final service rate: \$ _____ / hour (Maximum of 12 Hours)</p> <p>Final service rate: \$ _____ / day</p>
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Other final agreement: \_\_\_\_\_

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\_\_\_\_\_  
Contractor Signature / Date

\_\_\_\_\_  
AOC Signature / Date