Hennepin County FOSTER parent GUIDE A to Z
The Foster Parent Guide provides information about laws governing foster care and child protection. If there is any discrepancy between this publication and the actual law, the provisions of the law govern.

The following people contributed to this issue of the Foster Parent Guide under the direction of Lois Nilson, Program Manager: Martha Waldemar, Terryl Gordon, Sue Macek, Crystal Quarberg, Penny Wile, Margaret Bedor, Dian Norcutt, and Doug Kersten. Input regarding content was requested from Hennepin County foster parents, staff in the Human Services and Public Health Department, Children and Family Services and the Hennepin County Attorney’s Office.
### Where to Call

<table>
<thead>
<tr>
<th>Service Description</th>
<th>Phone Number</th>
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<tbody>
<tr>
<td>County Directory Information (including workers’ phone numbers)</td>
<td>(612) 348-3000</td>
</tr>
<tr>
<td>Emergencies after hours (evenings, weekends and holidays)</td>
<td>(612) 348-3552</td>
</tr>
<tr>
<td>To report abuse or neglect call Child Protection</td>
<td>(612) 348-3552</td>
</tr>
<tr>
<td>Training coordinator, class registration and cancellations</td>
<td>(612) 348-5840</td>
</tr>
<tr>
<td>Accounting problems or billing questions</td>
<td>(612) 348-3445</td>
</tr>
<tr>
<td>Medical EVS – Eligibility Verification System</td>
<td>(651) 431-2670</td>
</tr>
<tr>
<td>(to verify the foster child’s MA eligibility and which HMO the foster child is enrolled in)</td>
<td></td>
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<tr>
<td>Metropolitan Health Plan</td>
<td>1 (800) MHP-0550</td>
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<tr>
<td>U Care Minnesota</td>
<td>(612) 676-3200</td>
</tr>
<tr>
<td>Medica Choice Care</td>
<td>(952) 992-2322</td>
</tr>
<tr>
<td>Health Partners Care</td>
<td>(952) 967-7998</td>
</tr>
<tr>
<td>Managed Health Care Advocates Hotline</td>
<td>(612) 596-8860</td>
</tr>
<tr>
<td>(to access medical assistance information or if you are having problems with the HMO health plan)</td>
<td></td>
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<tr>
<td>Inquiries about becoming a foster parent</td>
<td>(612) 348-KIDS</td>
</tr>
<tr>
<td>Front Door or Initial Contact and Assessment</td>
<td>(612) 348-4111</td>
</tr>
<tr>
<td>(the Front Door Social Service area provides information, referral and access to the majority of voluntary social service programs within the Department, as well as making connections to community programs)</td>
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### Other Important Phone Numbers

<table>
<thead>
<tr>
<th>Service Description</th>
<th>Phone Number</th>
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<tbody>
<tr>
<td>Child Crisis Team</td>
<td>(612) 348-2233</td>
</tr>
<tr>
<td>Juvenile Court Information</td>
<td>(612) 348-5089</td>
</tr>
<tr>
<td>Minnesota Joint Underwriting Association</td>
<td>(651) 222-0484</td>
</tr>
<tr>
<td>Minnesota Non-emergency Transportation (MNET)</td>
<td>1 (866) 467-1724</td>
</tr>
<tr>
<td>Metro Area</td>
<td>(651) 645-9254</td>
</tr>
<tr>
<td>Office of the Ombudsperson</td>
<td>(651) 757-1811</td>
</tr>
<tr>
<td>Women, Infant and Children Program (WIC)</td>
<td>(612) 348-6100</td>
</tr>
</tbody>
</table>

Hennepin County web address: [www.hennepin.us](http://www.hennepin.us)
Hello!
The Hennepin County Human Services and Public Health Department recognizes the service that foster parents provide to children and the community. To assist you in your role as a foster parent, this publication provides basic requirements, expectations and policies that govern your role as a foster parent.

The Placement Team
To reach full potential, every child must live in a stable, nurturing environment. Individuals must function as a team in order to accomplish this for children in foster care.

Here is a brief overview of foster children and the members of their team. Primary members of the team include the foster child, foster parent/s, Child Services Worker, Child Protection Worker, and the Licensing Worker. Secondary members of the Placement Team may also have contact with you over the period of the youth’s placement.

Within 30 days of placement, primary members of the placement team– foster child, foster parent, Child Protection Worker, Child Services Worker and Licensing Worker (some or all) will meet in person to complete both of the following:

- The Minnesota Assessment of Parenting for Children and Youth or MAPCY which is a standard assessment tool for evaluating the required level of care for a child or youth in foster care placement. See Minnesota Assessment of Parenting for Children and Youth or MAPCY.
- The Out of Home Placement Plan that spells out the goals and responsibilities of the parents, the child, the child’s worker and the foster parents. See Out of Home Placement Plan.

PRIMARY MEMBERS OF THE PLACEMENT TEAM

FOSTER CHILDREN
- Foster children have often been severely neglected, physically and/or sexually abused, and exposed to other traumatic situations. As a result, they have unique needs and challenges.
- Foster children need increased supervision.
- These children may need to learn the basics of personal hygiene, social skills and daily routines.
- Children who have been sexually abused may have to learn appropriate ways to give and receive affection.
- Children who have been physically abused may be aggressive or withdrawn and need to learn how to get their needs met in socially acceptable ways.
- Foster children may demonstrate difficult behaviors, which may continue for some time. This needs to be understood even though the behaviors are unacceptable and need to be changed. Many foster children will need to attend therapy sessions.
- Most foster children will need special academic help.
- Some children in foster care are medically fragile, with numerous medical appointments and special equipment.
- Other foster children have multiple developmental disabilities requiring behavior management programs and/or needed therapies.

BIRTH PARENTS
- Parents of children in foster care may be struggling with chemical dependency, homelessness, emotional problems, mental illness, poverty and adolescent parenthood.
- Parents are expected to be working on a case plan to deal with their problems so their family can be reunited.
One of the best ways for a foster parent to help a foster child is by maintaining an accepting attitude towards the child’s parents. Encouragement, respect and kindness to the child’s parents promote greater communication.

Some birth parents may try to use you for financial or emotional support. Remember that your role is to care for the children. Do not get involved in the parents’ problems and direct parents to contact their social worker.

Regardless of their problems, there are no people more important to children than their parents. It is important to encourage the ongoing development of these relationships.

Some parents of disabled children have their children in foster care simply because they need a break from the demands of caring for the child.

**FOSTER PARENTS**

In addition to providing a child with food, clothing, shelter, cleanliness, medical and dental care, transportation and schooling, being a foster parent requires commitment, understanding, patience and a lot of responsibility.

Foster parents are expected to be familiar with the contents of the:

- Foster Parent Guide.
- Minnesota Department of Human Services Rule 2960, foster care licensing rule.
- Agreement between Foster Parents and Placement Agency (DHS 0139).
- Foster Child’s Out of Home Placement Plan.
- Essentials, the Hennepin County foster parent Email newsletter.
- All correspondence from agency.

All foster parents, including relative/kin foster parents, must follow foster care statutes, rules and policies.

As part of the team, you are responsible for carrying out your part of the Out of Home Placement Plan (also known as OHPP).

You are responsible for communicating information or observations about your foster child to the child’s worker. You are also expected to file Incident Reports. See Incident Reports.

Any time there are changes in your home, tell your licensing worker. This includes changes in employment, plans to move, problems or illnesses and hospitalizations within your own family, anyone who has moved into or out of your home or is staying in your home, and other responsibilities that you didn’t previously have.

You are not only helping individual children in your care. You are also helping to strengthen families and communities.

There may be many different social workers involved with your foster child.

See *Child Protection System*.

**Licensing Workers**

Licensing workers are responsible for making licensing recommendations to the Minnesota Department of Human Services. They need to assure that foster families and their homes meet licensing standards.

Your licensing worker will get to know your family members’ life experiences and lifestyle, and your theories on raising children. This information is used in matching foster children to your family.

Your licensing worker will meet with you several times a year to provide support and information and to review compliance with Rule 2960.
During annual reviews and relicensing home visits, you and your licensing worker will discuss the placements you have had during the past year, and set goals for the upcoming year based on the types of children you would like to care for. You will develop a training plan. You will have paperwork to complete, and will receive a copy of your relicensing dictations.

Your licensing worker is also responsible for conducting licensing complaint investigations.

Your licensing worker provides support and encouragement to you and your family.

Please make yourself available to meet with your licensing social worker as needed and complete all necessary paperwork as requested. You have 120 days to complete all aspects of licensing. Failure to do so could result in the children being removed from your care and/or a denial of your foster care application.

**Child Placing Workers**

- The child’s placing worker decides which of the referred foster families a child will be placed with. See Placements.
- The child’s placing worker will provide you with a Placement Folder with information about the child. See Placement Folder.
- Within 30 days of placement, the placement team will meet with you in person to complete both of the following:
  - The Minnesota Assessment of Parenting for Children and Youth or MAPCY which is a standard assessment tool for evaluating the required level of care for a child or youth in foster care placement. See Minnesota Assessment of Parenting for Children and Youth or MAPCY.
  - The Out of Home Placement Plan that spells out the goals and responsibilities of the parents, the child, the child’s worker and the foster parents. See Out of Home Placement Plan.
- The child’s placing worker is the person you contact for authorizing things such as the foster child’s haircuts, school testing, overnights, etc.
- During the child’s placement in your home, the child’s placing worker is expected to visit the child monthly. This worker will also talk with you about the Out of Home Placement Plan to see how it is progressing.
- The child placing worker’s role is to make sure the medical, educational, social and emotional needs of the child are being met. This worker will also ensure that you have the resources and information you need to help the child.
- In most cases, the Child Services Worker will be assigned for only the first 90 days of the placement. After that, the family’s Child Protection Worker will be the contact person for all of the above responsibilities.

**SECONDARY MEMBERS OF THE PLACEMENT TEAM** – Other team members may contact you or have some involvement with the child placed in your home.

**Case Management Assistants**

The Case Management Assistant’s role includes:

- Loading of court and placement data into the state social service information management system (SSIS).
- Requesting birth certificates.
- Monitoring required timelines for court.
- Making phone calls to foster parents to complete missing data from the MAPCY.
Shelter Workers
- The Shelter Worker works with a child in shelter placement, usually for less than 30 days.
- The shelter worker makes sure that the child’s needs are being met while in shelter and to prevent a disruption of medical care or school.

Northstar Care for Children
Northstar Care for Children was approved by the 2013 Minnesota Legislature and took effect January 2015. This legislation consolidates and simplifies three child welfare programs - Family Foster Care, Kinship Assistance (which replaces Relative Custody Assistance), and Adoption Assistance - with a unified benefit structure.

The goal of this program is to increase the number of Minnesota children placed with permanent caregivers. Important changes include:

A uniform assessment process is a central feature of Northstar Care for Children. It is called the Minnesota Assessment of Parenting for Children and Youth or MAPCY. The MAPCY is about parenting, not services. Parenting is what parents do – whether foster parents, relative custodians, or adoptive parents. The MAPCY measures the parenting involved in raising young people as well as the individual needs of the child. In some cases, the reimbursement that you receive will increase. In others, your reimbursement will decrease - depending on the amount of parenting provided and the needs of the child.

As of January 1, 2015, the MAPCY will replace the current Difficulty of Care (also known as a “DOC”) assessment tool. After this date, you will no longer be submitting a written DOC assessment.
Abuse and Neglect Reporting
Foster parents are mandated reporters. This means that they are obligated to report incidents of suspected child abuse and/or neglect. Minnesota law protects people who report abuse or neglect in good faith.

- Call 911 if the child is in immediate danger
- Call Hennepin County Child Protection or the county where you witnessed the abuse or neglect. See Where to Call.

If a foster child tells you about abuse or neglect that occurred in the past that may have not been reported, call the child’s placing worker. If a foster child returns from a visit with bruises or otherwise appears to have been abused or neglected, call all of the following:

- Child Protection – See Where to Call
- The child’s placing worker
- Your licensing worker
- Complete an Incident Report form

If you are aware that a foster child has been abused or neglected in your home, you must complete an Incident Report form and immediately call all of the following:

- Child Protection – See Where to Call
- The child’s placing worker
- Your licensing worker

Accidents/Injuries
See Incident Reports.

Accounting
See Financial Information.

Administrative Review Process
In some cases, the plan for a child in foster care needs to be administratively reviewed every six months. This is an internal review meeting that is not a court hearing.

If you are notified of an administrative review, we encourage your participation in the process.

Adoption
If the court determines that a foster child cannot move home, there must be a plan for permanency. One of these options is adoption.

Minnesota law requires Hennepin County to consider relatives first for foster care and adoptive placement, and then persons with whom the child has had significant contact.

Adoptive placements must ensure that the best interests of children are met. This takes into consideration the foster parents’ interest and whether they can meet the child’s special needs over the long term, including medical, educational, religious and cultural needs.

If you are asked to consider adopting one of your foster children, there are resources to help you make this decision:

- The child’s placing worker.
Your licensing worker.

Hennepin County Adoption Program, which has materials and training for foster parents who are adopting their foster children.

An adoption resource worker, who is assigned to help with the technical parts of the child's adoption.

If you decide not to adopt your foster child, you will still play a key role in preparing the child for adoption. In cases where the child will be moving to a new adoptive family:

You will be asked to meet the family chosen by the adoption worker and to provide information about the child to the adoptive family.

You will be called upon to help the child through the transition by supporting the child's feelings of loss, confusion and worry.

The transition tends to be a very emotionally charged time for the child, foster family and adoptive family. Make sure that you are communicating with your licensing worker and the child's worker during this period.

See Adoption Promotion and Stability Act.

Adoption Promotion and Stability Act (APSA)

APSA is a federal law that prohibits agencies receiving federal funds from delaying or denying adoptive or foster placement of children on the basis of the race, color or national origin of the adoptive or foster parent or of the child. This does not pertain to children affected by the Indian Child Welfare Act (ICWA).

Advocates, Managed Health Care

See Medical Assistance.

Agreement Between Foster Parents and Placement Agency

A child's foster parents and the agency supervising the child's placement in foster care share responsibility for the care of the child. They must work together to ensure that the standards and policies set forth by law and the Commissioner of the Minnesota Department of Human Services are met. To accomplish this, the foster parents and the agency need to understand not only what is expected of them but also what they may expect of one another.

In addition to Minnesota Department of Human Services rules and regulations, Hennepin County also requires...

- If you take the foster child out of the home for one night or longer, we ask that you contact the child’s placing worker.

See appendix/link.

Air Bags

See Car Safety.

Allegations

See Complaints.
Babysitters

Choose babysitters with care, making sure the foster children are not too difficult for them to manage. You are ultimately responsible for the care a babysitter provides the foster children in your home. You need to use good judgment when choosing babysitters. Failure to protect can lead to a negative licensing action.

If there is reasonable cause to request a background check on a potential babysitter, that person probably should not be used as a babysitter.

Providers can use their discretion regarding the age of the babysitter, considering the special needs of the child. Per child protection and the Red Cross, children younger than 11 years old cannot babysit.

If you are using a licensed child care provider as a babysitter, the total number of all the children under age 18 cannot exceed the total limits of the child care provider’s license during the time care is provided in his/her home. Such care must be less than 24 consecutive hours.

You must make certain that all babysitters for your foster children:

- Are trained by a qualified source on life sustaining medical equipment used by a foster child. A qualified source is a person with medical training or a vendor of the equipment. A foster parent is not considered a qualified source to train a babysitter. See Medical Equipment.
- Are trained in car seat safety if there is any possibility they will be driving a child under the age of nine. See Car Seats.
- Have completed SUID/AHT (Sudden Unexpected Infant Death Abusive Head Trauma) training if caring for children through the age of five. See SUID/AHT (Sudden Unexpected Infant Death /Abusive Head Trauma).
- Are provided with emergency and medical phone numbers, and emergency plans.
- Are told not to give out any information about a foster child to anyone.
- Are aware that phone calls and visits by birth parents or social workers may only occur when the foster parent is home.
- Agree to abide by the entire section about discipline in Rule 2960. It is your responsibility to review that section with your babysitters.
- Agree to abide by your drug and alcohol policy.
- Understand the importance of supervision and report to you any incidents that occurred while you were gone.
- Receive your permission before bringing anyone else along or allowing anyone else to visit in your home while they are babysitting.

Substitute care is the term used when you arrange for someone to come into your home to provide care for your foster child while you take a break. Before using someone in your home for 24 or more consecutive hours you must make sure that:

- To receive prior authorization from your licensing worker.
- The person is at least 18 years of age.
- A background study completed. See Fingerprinting.
- That anyone the person brings along who is 13 years or older, also has a completed background study, unless the person is a foster child.
- Have these studies done at the time of initial licensing or whenever you are going to use new babysitter so that you have someone approved to care for foster children in case of an unexpected emergency.
YOU MAY NOT:

- Take foster children to an unlicensed home for 24-hour care.
- Take foster children to a licensed foster home for 24-hour care unless you have received prior authorization from the child’s worker and the other foster home’s licensing worker.

USING FOSTER CHILDREN AS BABYSITTERS:

- Foster children may not babysit other foster children.
- Foster parents may use their own judgment concerning whether to allow a foster child to babysit foster parents’ own children.
- Foster children may babysit neighbors’ children only after receiving approval from the foster child’s worker.

Beds/Bedrooms

INFANTS UP TO AGE ONE MUST:

- Sleep in a safe crib (a portable crib or car seat may not be used). See Crib Safety
- Be placed on their backs to sleep on a firm mattress with a tight-fitting sheet (adult sheets may come loose and entangle an infant).
- Sleep in an area free of pillows, bumper pads, stuffed animals, quilts or comforters, as these may cause suffocation.

INFANTS MUST NOT:

- Sleep in an adult or toddler bed either alone or with another person.
- Share a crib with another child.
- Be placed in a bean bag chair.
- Be placed in a mesh-sided playpen unless the sides are left in the upright position.
- See SUID/AHT (Sudden Unexpected Infant Death /Abusive Head Trauma).

BY THE AGE OF FIVE:

- Children of the opposite sex typically may not share a bedroom. This includes siblings. Exceptions to this policy are required to be authorized by your licensing worker.

ALL FOSTER CHILDREN MUST:

- Sleep in a bedroom. An adult (18 years and older) who is not related to the foster child may not share the foster child’s bedroom.
- Have his/her own bed that is large enough to match the size and age of the foster child. In some circumstances, siblings of the same sex may share a double bed. However, you must obtain prior permission from your licensing worker and the children’s workers.

PLEASE NOTE:

- Under special circumstances, the placement team may approve alternative arrangements.
- Non-relative providers must have at least two bedrooms in your home to provide foster care.
Car Safety

**AIR BAGS:**
- If your vehicle has a passenger air bag, all children under the age of 13 should ride in the back seat.

**Car Seats:**
- Car seat training is required for anyone transporting a foster child under the age of nine and must be taken every five years.
- Minnesota law requires that children must remain in a federally approved, properly secured restraint until they reach 8 years old – unless the child is 4’9” or taller.
- Children ages birth to one year, up to 20-22 pounds, must ride in a rear-facing child safety seat approved for their weight. Try to keep children rear facing until they reach the rear facing weight limit.
- Children ages one to four, 20 – 40 pounds, must use forward-facing safety seats approved for their weight.
- Children both under age 8 and shorter than 4 feet 9 inches must use front-facing booster seats.
- Talk with your licensing worker if you need car seat training.

**IN ADDITION:**
- Read the instruction manual for your specific car seat and keep the manual in the car. Also read the vehicle owner’s manual for information on car seats and seat belts systems.
- Choose a seat that can be held tightly against the car’s seat back. Try the car seat in your car before using it.
- Replace a car seat if it is more than six years old.
- Destroy any car seats that have been involved in accidents even if there is no outward damage.
- Car seats and booster seats need to meet current federal safety regulations, and are appropriate for the child’s age and weight. Visit their web site at [www.cpsc.gov](http://www.cpsc.gov), or see Where to Call.

**SEAT BELTS**
- Minnesota law requires that everyone in a car must be wearing a fastened seat belt.

**Carbon Monoxide Detectors**
Minnesota law requires single and multiple dwelling residences to have carbon monoxide detectors installed within ten feet of each bedroom. Although this is not yet written in foster care rules or statutes, foster parents are strongly urged to comply with the carbon monoxide law.

**Child Foster Home Evaluation Form**
- At relicensing and at the end of a foster child’s placement, the child’s worker will complete the Child Foster Home Evaluation form that evaluates the care you provided the child.
- You will be mailed a copy of the completed form. A copy will also be placed in your foster care file and one in the child’s file.
- If you disagree with the evaluation, discuss your concerns with the child’s worker and your licensing worker. If you wish, you may respond in writing to the child’s worker and your licensing worker and your comments will be attached to the evaluation and placed in your file.
**Child Protection System**

**CHILD PROTECTION WORKERS**

- Cases in child protection originate when a report of child abuse or neglect is made to the agency.
- The report is screened by a child protection screener to determine whether it meets the agency’s criteria for a child protection investigation.
- A finding of maltreatment does not guarantee that a case will be opened for services. Many times when maltreatment is found, the children may not be in danger, the parents have taken appropriate steps to resolve the problem, or the family is referred to community resources for assistance. The agency does not assign a child protection worker or create a case plan for the families in these situations.
- If maltreatment is found and the children are found to be in need of services, the case is then transferred to child protection for ongoing services and monitoring and possibly placement of the children.
- Once transferred to child protection, a case is assigned to a child protection worker. If the child is eligible under ICWA (Indian Child Welfare Act), the case is assigned to the ICWA section. Workers focus on helping the custodial parent(s) or guardian achieve resolution of child protection issues by engaging them in their case plans.

*See Appendix - CHILD PROTECTION MAP*

**CHILD PLACING WORKERS (FORMERLY CHILD SERVICES WORKERS)**

- Child placing workers focus on the needs of the child and on supporting the placement. Their primary relationships are with the child and the caregivers.
- Child placing workers also work in partnership with other persons significant in the child’s life such as adoption workers, teachers, therapists, physicians and others.
- Child placing workers ideally remain assigned to the child from the beginning of the case until permanency is achieved.
- The Child placing worker’s role includes:
  - Arranging placement and providing transitional and ongoing placements.
  - Providing continuity for a child while in out of home care and working closely with the child’s primary caregiver (usually the foster parent) to ensure that the child’s needs are met.
  - Assessing, monitoring and supporting a child’s social/emotional, medical/dental, behavioral/developmental, educational, cultural/spiritual and psychological needs.
  - Working with caregivers in response to a child’s mental health, medical or other crises.
  - Participating in permanency planning for a child to help achieve permanency in a timely manner.
  - Working as part of the team for a child when adoption is the permanency plan.
- Child placing worker visits the child in the foster home, talk with the foster parents, and view the residence to better understand the child’s daily routine. They may also visit the child at school.
- The Child placing workers works with the team to develop the Out of Home Placement Plan.
- The Child placing workers functions as the primary worker for a child in out of home care.

**PERMANENCY CONSULT**

- If reunification remains uncertain, a permanency consult takes place with department staff, appropriate providers and the County Attorney. The purpose of this team is to determine a permanency outcome that is in the best interests of the child.
Permanency options include:

- Reunification when parents successfully complete the case plan and are able to have their children returned to them.
- Transfer of permanent, legal and physical custody to another person.
- Termination of parental rights and adoption.
- Extended Foster Care.

**ADPTION RESOURCE WORKERS**

- When adoption is first identified as the most likely option for a child, adoption resource workers meet with a possible resource family (often the current foster parents) to discuss the possibility of adoption.
- When children do not have an obvious adoption resource, the adoption resource workers may recruit potential families.
- Adoption resource workers then expedite adoptions in a quick, efficient manner. These workers are available to support, coordinate, promote and finalize adoptions.

**CHILD SERVICES WORKERS**

- All child protection cases with children 0 to 17 ½ will be referred to the Child Services units for the first 90 days. After 90 days cases that meet the following criteria will remain in Child Services:
  - Child is medically fragile
  - Child has a large number of siblings (5 or more)
  - Child is a state ward
  - Teens who are still in need of placement
- Ongoing case management for the family will be the responsibility of the Child Protection worker after the first 90 days. In the case of a Termination of Parental Rights, once that TPR is ordered, a Child Services Social Worker will be reassigned to the case to partner with the Adoption Resource Social Worker to achieve permanency for the youth.

See Child Placing Workers.

**Child Safety Agreement:**

See appendix.

**Clothing**

**CLOTHING ALLOWANCES:**

It is required that a portion of the monthly reimbursement be used to maintain the child’s clothing. Foster parents are expected to budget this money for future clothing needs, such as a winter jacket, boots, snow pants, mittens and scarf.

**INVENTORY CHILDREN’S CLOTHING WHEN THEY ARE PLACED IN YOUR HOME AND WHEN THEY LEAVE:**

- You must make a written inventory of the child’s wardrobe and belongings, including any items you purchased with an initial clothing allowance, and the cost of each item.

**KEEP A COPY OF THE INVENTORY AND THE RECEIPTS.**
INITIAL CLOTHING ALLOWANCE:
- Not all children will need an initial clothing allowance.
- If the child does not come with a wardrobe that meets the Foster Child Minimum Clothing Standard, an initial clothing allowance may be issued for the child.
- It is rare for the maximum amount of an initial clothing allowance to be issued. A clothing allowance is issued to get you started for the season that the child moves to your home, not for the entire year.
- The initial clothing allowance must be requested within 30 days of the child’s initial placement in foster care.
- The amount of the initial clothing allowance will be determined by the child’s worker and it will depend upon the needs of that particular child.
- If an initial clothing allowance is approved, you will be issued a check for a specific amount to purchase the needed clothing.
- You are required to save the receipts and identify each item on the receipt.

Here are the maximum amounts for initial clothing allowance. These amounts change annually. Also, each child’s need are figured individually. The initial clothing allowance rates effective July 1, 2017 through June 30, 2018 are as follows:
- Ages 0 through 5 $650
- Ages 6 through 12 $770
- Ages 13 through 20 $910

MAINTAINING THE CHILD’S WARDROBE:
Foster parents must maintain an adequate wardrobe for each foster child for as long as the child is in the foster home. See Foster Child Minimum Clothing Standard below.

You must replace clothing before it wears out or is outgrown. You must use portions of the monthly reimbursement check to add to and maintain clothing throughout the year.

If you buy used clothing, it must fit properly and be in excellent condition, with no stains or tears.

If you are taking a teenager, discuss clothing during the preplacement visit. Decide whether the child will shop for his or her own clothes, how often the child will be given money, and the amount to be given each time.

FOSTER CARE MINIMUM CLOTHING STANDARD
Following is the minimum wardrobe that you must maintain for each foster child while the child is living in your home. It is also what you must send with the child whether the child is going to another foster home, relative, adoptive home, facility, independent living or returning home.

Infants (0 – 11 months)
- 7 – 10 outfits
- 7 onesies or t-shirts
- 1 pair of shoes
- 1 outfit for special occasions
- 1 coat appropriate for season; snow pants, cap, scarf and mittens if winter discharge
- 1 comb or hairbrush
Any gifts given to the child while in foster care
- 1 duffel bag or suitcase
- 1 diaper bag containing: 1 bottle, 6 disposable diapers, 1 blanket, 1 bib, 1 unopened can of formula
### 1 – 11 Year Olds

- 7 underpants
- 7 pairs of socks
- 5 tops
- 2 sweatshirts or sweaters
- 5 pants/shorts
- 2 pairs of shoes
- 2 sleep wear outfits
- 1 outfit for special occasions
- 1 coat appropriate for season; snow pants, cap, scarf and mittens if winter discharge
- 1 toothbrush
- 1 book bag for school-aged children
- 1 comb or hairbrush
- 1 duffel bag or suitcase

Any gifts given to the child while in foster care

### 12 – 18 Year Olds

- 7 underpants
- 7 pairs of socks
- 5 tops
- 2 sweatshirts or sweaters
- 5 pants/shorts
- 2 pairs of shoes
- 2 sleep wear outfits
- 1 outfit for special occasions
- 1 coat appropriate for season; snow pants, cap, scarf and mittens if winter discharge
- 1 toothbrush
- 1 book bag
- 1 comb or hairbrush
- 2 bras (girls)
- 1 duffel bag or suitcase

Any gifts given to the child while in foster care

### When a child leaves your care:

- Regardless of where the foster child moves, you must send along:
  - A complete wardrobe of clothing that fits well and is in good repair, and that meets or exceeds the Foster Care Minimum Clothing Standard.
  - Anything the birth parents have given the child.
  - Any gifts the child has received while in your care.
  - Anything that was purchased and reimbursed by a Miscellaneous Expenditure Voucher, such as a bike or sports equipment.

On the day a child leaves your care, complete the Foster Care Minimum Clothing Standard form. Give the white copy to the child’s worker. Give the yellow copy to your licensing worker. This form is in the child’s placement folder.
Complaints

RETURN PHONE CALLS
We expect you to return phone calls from the department within two days.

COMPLAINTS - HOW TO AVOID THEM

Do Incident Reports and keep social workers informed
The biggest source of complaints is a lack of cooperation with the agency. Usually that means that an Incident Report was not done or your licensing worker and the child workers were not informed about things like:

- Severe diaper rash.
- Changing day care arrangements.
- Using respite.
- A child on run all night.
- Bruises on a child.

This is not a complete list. See Incident Reports.

Follow the foster care rule about discipline
The foster care licensing rule says, “no hitting, slapping, spanking, pinching, shaking, kicking or biting.” Do not use any form of physical discipline. See Child Safety Agreement.

Take Children to Appointments
Take children to initial and follow-up appointments which includes therapy, medical, dental, or other appointments.

Visits
Cooperate with the plan for visits. Prior to accepting a placement, clarify the following with the child’s worker:

- How often are the visits?
- Who will visit?
- Who arranges the visits?
- Where are the visits held?
- What is required from me regarding transportation for the visits?

Answers to these questions should be written in the Out of Home Placement Plan.

Do not allow parental or other unauthorized visits that have not been ordered by the court or written in the Out of Home Placement Plan.

Supervise the children
Provide a higher level of supervision for foster children than you do for most children. There is frequently more aggressive play among foster children.

Administer prescription medication as directed by the child’s doctor
Children need to take their medication as directed. Make sure the school has the medication if it needs to be taken during school hours.

Let us know who lives in your household
Let your licensing worker know right away if someone is going to move into your home. This includes family members who previously lived with you. If someone is visiting (staying overnight) let your licensing worker also know that. Do not allow anyone into your home, even to visit, who presents a risk to the foster child.
Do not let anyone use your address who is not living in your home. We will consider someone using your address as living in your home.

**Let us know about other changes in your household**

- Let your licensing worker know right away if you or other household members have:
  - Any medical concerns or hospitalizations.
  - Involvement in counseling that included a mental health assessment or drug/alcohol assessment or treatment.
  - Contact with law enforcement.
  - A change in marital status including separations.
  - Sought an Order For Protection or Harassment Order.
  - A new phone number, including cell phone numbers.
  - A plan to move.
  - Any social, emotional, medical or educational difficulties that your own children are experiencing.
  - A change of pets.

**Let your licensing worker know beforehand about:**

- Your vacation plans.
- Any changes in bedrooms by household members or anyone staying overnight.

**In summary:**

- Follow the rules and expectations of the county.
- Try to have a cordial, cooperative relationship with the birth parents.
- Complete Incident Reports often and on time.
- Keep a log of what goes on in your home.
- Ask your licensing worker when you are unsure if you should report something regarding the foster child and/or something within your household.

**Complaints about the Agency**

If you disagree with an agency decision or are dissatisfied with services from an agency representative:

- Discuss the problem with the agency representative involved.
- If the issue is not resolved, call that person’s supervisor or program manager to discuss the issue. You may decide to ask for a meeting with the supervisor or program manager. If your concerns relate to a foster child, you may ask to include the child’s worker, the guardian ad litem, the therapist and your licensing worker in the meeting.
- If the issue is not resolved after this meeting, you may call the program or division manager and expect a meeting of all persons significantly involved in the issue. During this call, identify whom else you would like at the meeting.
- If you still feel as if the concern has not been addressed adequately, you may call the Office of the Ombudsman who will forward your concerns and complaints to the appropriate manager and follow up to ensure that there was some type of resolution. See Where to Call.
- Understand that the final decision-making authority rests with the agency or court.
- Carry out the child’s case plan even if there is no consensus.
COMPLAINTS ABOUT FOSTER PARENTS

- All licensed foster homes are bound by State of Minnesota child foster care licensing rules and statutes. All complaints against foster families will be investigated.
- Complaints may contain child protection issues (maltreatment), licensing issues, or both.
- Social workers may remove the foster children from your home while a complaint is being investigated.
- A child protection intake screener will determine whether the complaint meets the criteria to be investigated by the child protection program pursuant to the *Maltreatment of Minors Act*, *MN Statute 626.556, subp. 11*. If the complaint does not meet these criteria, the licensing program will investigate the complaint to determine whether there are any violations to the licensing law.

### Complaints containing child protection (maltreatment) issues

A child protection worker will investigate the complaint.

The child protection worker must notify the local police department about the complaint. The police may decide to conduct a criminal investigation prior to the child protection investigation.

The workers of all the foster children in your home are mandated by law to notify the foster children’s parents.

The child protection worker may gather information from the foster child, other children who have lived in or are currently living in your home (including your birth and adopted children) and anyone else who may have information.

The child protection worker will meet with you to present information and to obtain your explanation. Your licensing worker may accompany the child protection worker, but the child protection worker is the lead investigator.

**There are two possible outcomes to a child protection investigation:**

1) a finding of maltreatment
2) no finding of maltreatment.

All complaints received by the agency must be logged and kept in a central depository (known as the Complaint Log) as well as in the foster parent’s file. Information in the Complaint Log is retained for at least seven years. The information in the foster care file remains there as an accurate account of the allegation and investigatory findings.

At the close of the investigation, the foster parent will receive a written notice of the determination.

If there is a finding of maltreatment that meets the definition of *MN Statute 626.556 of “serious or recurring” maltreatment*, it is a disqualification to family foster care licensure. A consolidated Notice of Determination and Disqualification will be sent to the person responsible for the maltreatment with information on the disqualifier and appeal rights.

### Complaints containing licensing issues, but no child protection issues

A licensing worker will investigate the complaint.

The licensing worker generally will not contact the local police department.

Parents of foster children in your home are generally not notified about licensing complaints.

The licensing worker may gather information from the foster child, other children who have lived in or are currently living in your home (including your birth and adopted children) and anyone else who may have information.

The licensing worker will meet with you to present information and to obtain your explanation.

**There are three possible outcomes of a licensing complaint investigation:**

1) occurred
2) did not occur
3) no determination can be made.

All complaints received by the agency must be logged and kept in a central depository (known as the Complaint Log) as well as in the foster parent’s file. Information in the Complaint Log is retained for at least seven years. The information in the foster care file remains there as an accurate account of the allegation and investigatory findings.

At the close of the investigation, the foster parent will be verbally informed of the findings and a letter of findings will be sent.

If there is a substantiated rule violation, it is a state requirement that, at minimum, a Correction Order must be issued to the foster parent. A Correction Order states the licensing violation and gives you a time limit to respond in writing how the violation will be corrected. You have the right to request reconsideration of the Correction Order to the Minnesota Department of Human Services.
Depending on the seriousness of the violation, there may also be a negative licensing action. This may include recommendations to DHS for a conditional license, fines, denial of an application, or revocation of the foster care license.

If there is a finding of maltreatment, the written complaint must be kept for ten years and then be destroyed.

If there is no finding of maltreatment, the written complaint must be kept for four years and then be destroyed.

Depending on the seriousness of the violation, there may also be a negative licensing action. This may include recommendations to DHS for a Correction Order, a conditional license, fines, denial of an application, or revocation of the foster care license.

If the complaint is classified as “did occur,” the allegation, violation, corrective measure and resolution will be dictated into your foster care file. If you received a Correction Order, a copy of it and your written response will also be kept in your file.

If a licensing complaint is classified as “no determination can be made,” an entry is made into your licensing file which outlines the complaint allegation, investigation outcomes, and why no determination can be made.

If the licensing complaint is classified as “did not occur,” an entry is made in your licensing file reflecting the allegation, the investigative outcomes, and why the complaint is classified as “did not occur.”

There may be dual investigations, involving both child protection investigating a maltreatment issue, and licensing staff investigating a licensing issue. Even if child protection makes a “no finding of maltreatment” determination, licensing staff may determine that a licensing violation occurred. For example, spanking a foster child but leaving no marks may result in a “no finding of maltreatment” determination by child protection. But this is a licensing violation and will likely result in a negative licensing action. A summary of the child protection investigation will be kept in your licensing file if it is found that a licensing violation occurred based on this complaint.

The existence and status of complaints regarding your foster care license are public information. If disciplinary action is taken against your license or the complaint is resolved, the following data are public information: the substance of the complaint; the findings of the complaint investigation; the record of informal resolution of a licensing violation; orders of hearing; findings of fact; and conclusions of law and specifications of the final disciplinary action contained in the record.

Concurrent Families (Formerly Foster Care Adoption Option Program)

Concurrent Families is a program for children for whom termination of parental rights appears likely and, at the time of placement, a relative/kin home does not appear to be available as a permanency option. This is a foster care program with a potential adoption option, there is no guarantee that you will be able to adopt.

These children:

- May be on a “fast track” for termination of parental rights (TPR) due to a previous history of child protection involvement in the family, or very serious/life threatening abuse issues, but the TPR is not yet completed in juvenile court, or
- Have a TPR petition filed in juvenile court, but who have not had a completed kinship search, or may not have an identified father. The father or relative may still come forward to claim the child.

Foster parents in this program go through specialized training and sign an agreement that they will support the court and agency’s plans for the children that may include:

- Efforts to reunify children with parents and or guardians.
- Placing with relatives who are willing to take the children and meet licensing standards. This can include placing with siblings and half siblings already in another placement.
Some requirements for Concurrent Families foster parents:

- Meet all the standards for foster care with a completed home study.
- Attend Concurrent Families training.
- Have the endorsement of their licensing worker to be in the program.
- Agree to be adoptive parents for the children if the need develops.

Confidentiality

Information about foster children and their families is protected by the Minnesota Government Data Practices Act. You may not share information about your foster child with your friends or neighbors. This may be particularly difficult when your foster child is a relative or kin. Refer them to the child’s worker.

This law:

- Governs how information about foster children, their parents and others in their families is created and recorded.
- Dictates how information gathered in your foster care file is created and recorded.
- Defines what information can be collected and with whom it can be shared.

JUVENILE COURT & CONFIDENTIALITY

Juvenile protection hearings are open to the public. Adoption proceedings and delinquency hearings are not.

If a member of the media contacts you about a case that is before the court, the rules of confidentiality still apply. Questions about juvenile court proceedings should be referred to court information. See Where to Call.

While testifying in court, foster parents may answer questions about foster children. However, once your testimony is done, you may not share any information about the child or the family, not even information you provided in court.

PHOTOS, VIDEOS, & PERSONAL INFORMATION ABOUT FOSTER CHILDREN

Foster parents must not allow photos, sketches, names or identifying information of foster children to be used in any material that will be available to the public. This includes but is not limited to:

- Videos shown to anyone other than immediate family members.
- In Christmas cards, other cards or print material.
- On a web page or anywhere on the Internet.
- As part of a presentation for a class.
- In any publication, such as newspapers, company newsletters, magazines, etc.
- Your family’s internet social networking sites such as Facebook and MySpace, etc.

If you have questions, consult the child’s worker. In some situations, the child’s worker may obtain written authorization from a child’s parent or legal guardian for usage.

Contagious Diseases

See Medical and Dental Care, Incident Reports.
**Crib Safety**

Foster parents with infants under one must assure the crib is in compliance with Consumer Products Safety Commission Standards (CPSC) before a child is placed into the home. To assure the crib complies with current CPSC standards foster parents should first:

1. Determine the manufacture date based on the tracking label on the crib or the registration form supplied. Cribs manufactured on or after June 28, 2011 can be presumed to comply and no additional documentation is necessary to determine compliance.

2. If the crib was manufactured prior to June 28, 2011, a Children’s Product Certificate (CPC) or test report from a CPSC-accepted third party lab is the preferred way to demonstrate compliance. Many manufacturers, importers and retailers will provide these documents to consumers upon request, or they post them on their websites.

3. If the crib does not have a tracking label or registration form affixed to it:
   - If the crib was manufactured prior to June 28, 2011 it is unlikely that it has been certified as being compliant with the current CPSC standards. However, consumers may contact the manufacturer or retailer to determine, which, if any, standard to which the crib has been certified.

Receipts alone are not an indicator of compliance and should only be used to support the documents identified above (tracking label or registration form) when determining compliance.

**Data Practices Act**

See Confidentiality.

**Dental Care**

See Medical and Dental Care.

**Discipline**

Foster parents must sign the Child Safety Agreement form stating they will abide by the Minnesota Department of Human Services Rule 2960.3080, subp. 8 about Discipline. See appendix - Child Safety Agreement.

**DOC Rate (Difficulty of Care)**

The DOC rate is a supplemental reimbursement to the basic foster care rate.

Any foster child receiving legacy foster care (foster care prior to January 2015) will continue receiving that amount unless:

- Child returns home (even if child returns to foster care with same foster family)
- Child moves to a different foster home
- Child moves from foster care to Northstar Kinship Assistance
- Child moves from foster care to Northstar Adoption Assistance
- Child moves to Extended Foster Care-SIL

Beginning January 1, 2015, Hennepin County began using a new tool for assessing basic and supplemental difficulty of care rates called the Minnesota Assessment of Parenting Children and Youth (MAPCY). See MAPCY section.
Diversity

- Foster parents interact with individuals from diverse cultural backgrounds.
- Increase your knowledge of different cultural groups by attending community events and foster parent training sessions, and by developing friendships with individuals of other cultures.
- Create an atmosphere in your home that reflects an appreciation of diverse cultures.
- Celebrate holidays and share foods enjoyed by different cultural groups.
- Provide books and toys that affirm the value of cultural diversity.

Driver’s License & Driver’s Education

Foster parents may not sign for a foster child’s driver’s license application. The Minnesota Bureau of Public Safety allows only a parent or legal guardian to sign for this.

If your foster child has a driver’s permit or license, or if your foster child would like to drive, discuss this with the child’s worker and your insurance agent. Learn what your responsibilities, liabilities and costs may be and make sure that your insurance coverage is appropriate.

Under some circumstances, you may be reimbursed for the cost of driver’s education:

- The class must take place in a school facility.
- The foster child must be a ward of the state or the placement must be expected to last at least one school year.
- You must obtain prior approval from the child’s worker.
- If the child’s worker approves reimbursement, complete a Miscellaneous Expenditure Voucher and give it to the child’s worker within 30 days of expenditure.

Emergencies

**IF A FOSTER CHILD ACTS IN A WAY THAT IS A DANGER TO SELF, OTHERS OR PROPERTY, NOTIFY THE POLICE AND THE CHILD’S WORKER IMMEDIATELY.**

- If unable to reach the child’s worker, call the worker’s supervisor.
- After hours, call First Response. Then leave a message on the child’s placing worker’s and licensing worker’s voice mail.
- Complete and mail an Incident Report within 24 hours of the incident.

See Where to Call.

Things to immediately report

- An injury to a child that requires emergency medical treatment.
- Hospitalization of a child.
- A child whose behavior is injurious to self or others. If you cannot control the child, you will need to call 911 first.
- A child returned to you from a parental visit with unexplained injuries.
- A child telling you of alleged abuse or neglect.
- Failure of a birth parent to return a child from a visit.
- A lost or runaway child.

The above is not a complete list. If in doubt about calling, it is better to do so.

The Child Crisis Team offers 24 hour access to children experiencing a mental health crisis. The Hennepin County Child Crisis number is 612-348-2233.
Essentials Foster Parent Email Newsletter

- Foster Care staff publishes the Essentials newsletter by email regularly.
- It contains foster care information, policies, updates and training opportunities.
- It is important for you to know the information contained in Essentials.

Financial Information

**BASIC MAINTENANCE RATE**

The basic maintenance rate is intended to reimburse foster parents for the costs of meeting the needs of foster children.

**These needs include:**

- A bed, a clean mattress that is in good condition, a pillow, sheets and blankets for each foster child.
- A dresser or some place for the child to put belongings.
- Age-appropriate toys and play equipment for physical, mental and social development.
- Car seats and booster seats that meet current federal safety regulations and are appropriate for the child's age and weight.
- Snacks and three nutritionally balanced meals per day.
- A complete wardrobe of clothing that is maintained as the child grows and the seasons change. See Clothing.
- Incidentals, such as grooming supplies, school supplies, routine transportation costs, non-prescription medical supplies, and fees for leisure time activities.
- Allowance, if age appropriate.
- Gifts for holidays and birthdays.

A portion of the basic rate is intended to reimburse foster parents for the increased household costs such as electricity, heat and water.

Items such as furniture, car seats, over-the-counter drugs, toys and games, wear and tear or damage to your property are considered to be reimbursed with the basic foster care rate.

See appendix for daily basic rates and DOC/MAPCY Supplement for 2015 - June 2016.

**VOUCHER**

- For foster care reimbursement, a voucher is mailed to foster parents the second to last working day of the month to cover that month’s care.
- If you have not received your voucher by the fifth working day of the month, call accounting. See Where to Call.

There are five steps to completing the voucher:

1. Enter the service dates for which you have not yet billed. In the “from” column enter the first day of the month that the child was in your home. For example, if the child was in your home the entire month of January 2015, enter 1-1-15 in the “from” column.
2. In the “to” column enter the last day of the month that the child was in your home. That date would be 1-31-15 for the example given in Step 1.
3. Add the names, birth dates, and dates of service for children who entered your home during the month whose names do not appear on the voucher.
4. Sign the voucher on the lower left side.
5. Date the voucher on the lower right side and mail the first day of the month following services.
6. If the voucher is not signed, or if it is dated, postmarked or dropped off prior to the first of the month, it will be returned to you.

SAMPLE VOUCHER INVOICE – See Appendix.

OTHER FACTORS RELATING TO YOUR VOUCHER

- If a child has a MAPCY level beyond the Basic rate and it is not listed on the voucher, add a note to the voucher stating the MAPCY level and also notify the child’s worker.
- For any foster home placement of three days or less, the agency will reimburse for the day the child arrives and the day the child leaves. For any foster home placement of four days or more, the agency will reimburse for the day the child arrives, but not the day the child leaves.
- If a foster child is gone from your home (runaway, in the hospital or on a home visit, etc.), you will be reimbursed the full foster care rate including MAPCY level, for up through five days if the case plan is for the child to return to your home. If the absence is six days or more, you will be reimbursed the basic foster care rate including MAPCY level for up to 14 days (days 6 - 14) if the case plan is for the child to return to your home. The latter requires Program Manager approval.
- If the child has not returned within these time limits, all reimbursements will be discontinued.
- If you are receiving any other funding for your foster child, such as Supplemental Security Income (SSI), you must report this so that foster care reimbursement can be adjusted accordingly. You may not receive income from more than one source for a foster child and Hennepin County should be the representative payee for all Social Security benefits for a foster child. Accounting will contact you to work out a repayment plan if an overpayment has occurred.

YOUR FOSTER CARE CHECK

If you have payment problems or billing questions, call Accounting. See Where to Call.

- Wait ten working days from the date you dropped off or mailed the voucher before calling to check on your payment. This number is available only during business hours.
- Have your provider number and client case number ready when you call.

If you have an emergency that requires you to pick up your check rather than waiting for it to be mailed, call your licensing worker.

- If your licensing worker agrees, the worker will initiate this request with accounting.
- These emergency reimbursement requests are limited to once per year.

For Respite Care Reimbursement, see Respite & Substitute Care.

Fingerprinting

The federal Adam Walsh Child Protection and Safety Act of 2006, known as the Adam Walsh Law, and Minnesota Statute section 245C.05 requires fingerprints for all household members 13 years and older who live in a foster home. This requirement also includes substitute caregivers.

When someone new moves into your home or you want to use a new substitute caregiver, they will have to do fingerprints in order to move into your home or provide substitute care.

All background studies for anyone applying to become a foster parent, all licensed foster parents, all household members 13 years and older (including former foster children that you have adopted) and including babysitters/substitute caregivers, will have their background studies completed by the Department of Human Services (DHS) in a process called NETSTUDY.

Communications to you about the results of your background studies will now come directly from DHS rather than from the Hennepin County Foster Care Program.
**Fire Safety**

Prior to placement, foster parents must have in place:

- Smoke detectors leading to all bedrooms or sleeping areas.
- A fire extinguisher (2A10BC or higher) in the home. The fire extinguisher must be maintained and tagged annually before a relicensing or annual review with your licensing worker.
- A completed Fire and Weather Safety Floor Plan that is discussed with your licensing worker and is on file in your foster care file.

Practice a fire or weather exit drill with your foster children.

**EMERGENCY AFTER HOURS**

If you have an emergency or urgent issue with foster children in your care after normal business hours, on weekends, or holidays call (612)348-3552. See Where to Call.

You must contact Emergency After Hours when you are unable to reach your foster child’s worker in case of:

- An injury to the child that requires emergency medical treatment.
- Hospitalization of a child.
- A child whose behavior is injurious to self or others.
- A child returned to you from a parental visit with unexplained injuries.
- A foster child telling you of alleged abuse or neglect.
- Failure of a birth parent to return a child from a visit.
- A lost or runaway child.

**Foster Care Adoption Option (FCAO) Program**

See Concurrent Families.

**Foster Parent Evaluation of Child Placement**

- At the time of your relicensing, annual review and at the end of a placement, one of the forms you complete is the Foster Parent Evaluation of Child Placement.
- This form is a way for you to evaluate the services you have received from the agency in your role as a foster parent.
- A copy of the form is filed in your foster care file. Another copy is sent to the child’s placing worker.
Guardian ad Litem

- A guardian ad litem is a person appointed by a juvenile court judge to represent the best interests of a child who is involved in juvenile court.
- The guardian is accountable to juvenile court, but not to social workers or parents.
- It is necessary for the guardian to develop firsthand knowledge about the child's situation.
- Foster parents are expected to answer a guardian ad litem's questions about the placement.
- The appointment of a guardian ad litem is mandatory unless the court finds that the child's interests are otherwise protected.
- The guardian ad litem remains involved until the court jurisdiction is dismissed.

Guns

- Guns must be kept in a locked area and separate from ammunition. Guns must not be visible or accessible to the foster children.
- Ammunition must be kept in a locked area separate from guns.
- Report to your licensing worker if you have a permit to carry a gun.

ANY FOSTER CHILD WHO IS USING A GUN MUST HAVE:

- Written permission from the birth parent or guardian and
- Written permission from his/her worker and
- Successfully completed a state-certified gun safety program and
- An adult present during any use of the gun.
Hair and Hygiene

- Foster children may need assistance with washing, bathing, brushing and flossing teeth, hair and skin care, toileting habits and menstrual hygiene. You must provide the necessary supplies for the children and assistance as needed.

- Foster parents are responsible for keeping foster children’s hair clean and neat.

- Foster parents may not consent to foster children’s hair cuts, permanents, relaxers or other chemical processes without permission from the child’s parent or guardian, obtained by the child’s worker.

- If you have an African American foster child placed in your home, ask your licensing worker, check websites, or attend Hennepin County training. If you have a foster child who is a different race from you and you need special products for hair or skin care, contact the child’s worker. The worker may approve reimbursement for these products. If you receive approval for reimbursement, submit a completed Miscellaneous Expenditure Voucher with attached receipts to the child’s placing worker.

Homeschooling

- Foster parents are not permitted to homeschool foster children except under unique circumstances.

- For unique circumstances, prior authorization must be obtained from the licensing worker and the child’s worker.

Home Visits

When a social worker or other team members come to your home for a meeting:

- Prior to the meeting, prepare a written list of questions or issues you want to discuss.

- In wintertime, shovel the sidewalk.

- Turn off the television.

- Listen for the doorbell at the scheduled time of the visit.

- Have the names and phone numbers of others concerned with the foster child available at the meeting.

- If the children in your home are not to be present at the meeting, have an activity planned for them so that they will not be interrupting or eavesdropping.

- Introduce everyone in your home. Then ask others to give you privacy so that you are free to discuss confidential information with the worker.
Your house should be neat and tidy and you should be dressed in a casual but professional manner.

**ICWA (Indian Child Welfare Act)**

- This federal law establishes standards and procedures that state courts must follow before and after American Indian children are removed from their parents or Indian custodian.
- The law provides for notice to the tribe of hearings involving child custody matters and for intervention by the tribe in any state court proceedings where placement is necessary.
- The law requires the necessity of a qualified Indian expert for placement of Indian children.
- The law outlines the following order of placement preference:
  1. The child’s extended family.
  2. A tribe-approved foster home.
  3. A state-approved Indian foster home.
  4. An Indian-operated or approved institution.

**Illnesses**

See Medical and Dental Care Incident Reports.

**Incident Reports**

Foster parents are expected to file Incident Reports to notify agency workers of any accidents, injuries, hospitalizations, marks or bruises, illnesses, assaults or threats or unusual behavior involving foster children.

**There are two steps to filing an Incident Report:**

1. Notify both your licensing worker and the child’s worker immediately by phone. Leave a voice message with a brief description of the incident if the workers are not available.

2. Complete an Incident Report. Fully describe the incident including the date, the time, the people involved, the action taken, etc. Send it to your licensing worker within 24 hours of the incident.

**The following incidents require the completion of an Incident Report.** The list is not inclusive. If you are in doubt about whether to complete an Incident Report, contact your licensing worker.

- Calls made to 911 and any contact with the police department regardless of reason or outcome.
- Bruises.
- Head lice, scabies and all other contagious diseases.
- Bites.
- Marks that appear following a child’s visit with birth parents or relatives.
- Significant behavioral issues including lying, stealing, hitting, etc.
- Self-inflicted injuries.
- Sexual play, sexual acting-out and/or stories by the child about sexual abuse.
- Marks that occurred while the child was at school.
- Bruises, scratches, marks or diaper rashes that were on a child at the time of a preplacement, placement or respite in your home.
- Running away, missing or unauthorized absence.
- Injuries to the eye, head, mouth and teeth.
- Visits to the hospital emergency room or urgent care.
- Admissions to the hospital.
Suicide attempts, threats or ideations.
Evidence of internal injuries.
Broken bones, fractures and dislocations.
Hypothermia, frost bite, sun stroke and heat exhaustion.
Burns.
Near drowning accidents.
Ingestion of foreign or poisonous substances.
Puncture wounds, tetanus shots.
Any time you have contacted First Response.
Extreme or unusual behaviors.

If an injury requires urgent care or hospitalization after hours, call Emergency After Hours at (612)348-3552. See Where to Call.

If the accident/injury is one that may result in a claim against you, notify the Minnesota Joint Underwriting Association. See Insurance Coverage.

**Independent Living Skills (ILS) Programs**

Hennepin County offers a number of different ILS programs and services for youth who are going to age out of the foster care system. These programs are aimed at providing the necessary skills training and supports to youth that will enable them to successfully live independently. Life skills education, and the opportunity to practice these skills, is crucial for youth to enter into adulthood and be self-sufficient.

**ARE ALL YOUTH IN FOSTER CARE ELIGIBLE?**

ILS programs are aimed at youth ages 14 and older who are likely to remain in placement until age 18 or older and have been in placement for 6 consecutive months. Youth who leave out-of-home placement after age 16 for adoption, kinship care, or transfer of legal custody are also eligible for ILS services.

**WHAT KINDS OF ILS PROGRAMS DOES HENNEPIN COUNTY HAVE?**

Hennepin County partners with the Connections to Independence program, Division of Indian Works and the YMCA for most of the ILS programming.

There are at least five ILS classes offered monthly. In addition there are drop-in hours 3 days a week for assistance with any ILS needs. Some of the programming that is offered includes:

**Educational Support** - Assistance filling out FAFSA, college applications, Education and Training Voucher and resources on furthering education through certificate programs, vocational training and other post-secondary options. Also included is an additional graduation ceremony for Hennepin County youth. Employment Support including paid internships, job skills training and job search assistance.

**Housing resources and supports** - Rental assistance, security deposits and application fee assistance, assistance searching for affordable housing and transitional living programs. Rentwise training on how to sign a lease, work with a landlord etc.

**Healthy Transitions** - Classes and courses on mind, body, soul, healthy relationships and sexuality, and Girls Circle Heart Groups designed to work with young women in society.

**Transportation** - Assistance with Drivers Education Training, classes on how to purchase and maintain a car, car insurance-what effects it and how to make it cheaper and assistance in paying for car repairs.

**Financial Literacy** - Budgeting, tax assistance, how to start and maintain a checking and/or savings account, credit workshops and assistance in interpreting and completing a credit report.

**Leadership and Self-Advocacy** – Youth Leadership Council, Elements of Transition group, conference fees and attendance for workshops, sponsorship of Foster Club all-stars, participation in Tomorrow’s Lead-
ers Today conference.

Group events - Youth team building events and retreats.

Other general ILS classes include Streetwise, healthy cooking, internet safety, personal development and self-care.

**PROMOTING PERMANENT CONNECTIONS**

**Who can I contact for more information?** Contact the youth’s social worker for more information.

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**Independent Living Skills (ILS) Programs**

**INITIAL PLACEMENT TEAM MEETING**

Within 30 days of foster placement, primary members of the placement team (foster child, foster parent, Child Services Worker or Child Protection Worker) will meet in person to complete both of the following:

- The Minnesota Assessment of Parenting for Children and Youth or MAPCY which is a standard assessment tool for evaluating the required level of care for a child or youth in foster care placement. See Minnesota Assessment of Parenting for Children and Youth or MAPCY.
- The Out of Home Placement Plan that spells out the goals and responsibilities of the parents, the child, the child’s worker and the foster parents. See Out of Home Placement Plan.

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**Injuries**

See Incident Reports.

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**Insurance Coverage**

Foster homes licensed by the Minnesota Department of Human Services are covered by a liability insurance policy through Minnesota Joint Underwriting Association (MJUA).

- Basically, this policy covers anything that you are legally obligated to pay as a result of a lawsuit concerning property damage or bodily injury by a foster child in your care.
- If something happens that may result in a claim against you, you must notify the MJUA as soon as possible. See Where to Call.
- If you have a question as to whether something is covered, call MJUA. They would rather know about hundreds of incidents that don’t turn into lawsuits than to miss one that does.

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**Internet and Foster Children**

Foster children can benefit from being online, but may also be targets of exploitation or crime. Adult supervision is necessary while utilizing the Internet.

**RISKS**

Teenagers are most susceptible to risk because they are more likely to participate in online discussions (chat rooms) regarding companionship, relationships or sexual activity. They could be exposed to inappropriate sexual, belligerent, harassing or violent material. While participating in online discussions, children may risk their safety by providing personal information, making themselves vulnerable to predators.

Computers should be in areas that allow easy and consistent supervision by adults. Most Internet services provide adults with the ability to block and limit access to features, such as adult oriented sites. Your Internet provider may also provide a weekly update of web-sites visited by each individual who signed on using
your computer. These tools do not take the place of parental supervision.

### Internet Safety and Usage for Your Foster Child

- Make sure your foster child knows never to give out identifying information (name, address, school name, telephone number, etc.).
- If you don’t know how to access the services the foster child uses, ask the child to show you.
- Use the system controls and blockers/filters to eliminate objectionable material.
- Never allow a child to arrange a face to face meeting with another computer user.
- Never allow a foster child to respond to threatening, obscene, or uncomfortable emails. Encourage your foster child to tell you if they encounter such messages.
- Remember that people online may not be who they seem. Someone claiming to be a 12-year-old-girl, could actually be an adult.
- Keep computers in areas that allow for easy supervision.

### Internet Usage by Other Family Members or Babysitters

- You are responsible to assure that foster children are not exposed to sexually explicit and/or violent materials.

### Lessons

An allowance of up to $10 per month may be allowed for a foster child’s lessons. These include, but are not limited to:

- Other special lessons.
- Community activities.

Authorization of these expenditures must include:

- That the lessons are part of the child’s casework plan.
- Prior supervisory approval.
- Definite time limits for evaluation of the child’s progress and ability by the child’s worker.

If these expenses are approved for reimbursement, submit a Miscellaneous Expenditure Voucher to the child’s worker within 30 days of expenditure.

### Lost Children

If a foster child is lost:

- Notify the police and the child's worker immediately.
- If you are unable to reach the child’s worker, leave a phone message and then call the worker's supervisor.
- After hours, call the emergency after hours phone number. (612) 348-3552. Then leave a message on the child’s worker’s phone.
- File an Incident Report.
Mandated Reporting
See Abuse and Neglect Reporting.

Medical Assistance (MA)
MA is divided into Fee-for-Service and Prepaid Medical Assistance Programs (PMAP). If a foster child is on MA Fee-for-Service or a PMAP, you should not have to pay for medical services.

**MA-PMAP**
Most foster children will be on MA-PMAP. MA-PMAP provides medical services through an HMO. Medical services provided through the HMO are the same services provided through MA Fee-for-Service (for example: dental, eye care, pharmacies, mental health care or services from physicians or medical facilities). Hennepin County residents on MA-PMAP must choose one of these HMO health plans: U Care, Metropolitan Health Plan, Medica Choice Care, or Health Partners Care.

- If the foster child is on an HMO, you must use this HMO for all medical services.

The foster child's worker should give you the child's Minnesota Health Care Program (MHCP) card and the HMO enrollment card. Use both the MHCP and the HMO cards when accessing medical services. If you do not have the MHCP or HMO card, you can still access medical services. If you do not know which HMO the child is enrolled in, call Eligibility Verification System (EVS).

See Where to Call.

If you do not know the child's HMO ID number, you can contact a member service representative at the HMO health plan. The HMO member service representative can help you access medical services or choose a primary provider most convenient to you or help you with medical transportation.

**MA-FEE-FOR-SERVICE**
Children on MA Fee-for-Service may go to any physician, dentist, eye care provider, pharmacy, medical facility, mental health provider or other medical provider who accepts Minnesota MA.

- If a foster child is on MA Fee-for-Service, ask medical providers if they accept Minnesota Medical Assistance.

The foster child’s worker should give you the child’s Minnesota Health Care Program (MHCP) card. Use the MHCP card when accessing medical services. If you do not have the MHCP card, you can access medical services by giving the foster child’s MA number (also called the Person Master Index, or PMI, number) to the medical provider. You must get the foster child’s MA number from the child’s worker. To verify the foster child’s current MA eligibility, call Eligibility Verification System.

See Where to Call.

Managed Health Care Advocates
Hennepin County has Managed Health Care (MHC) Advocates to help you access medical services through the HMO health plan. See Where to Call.

Please call the MHC Advocate Hotline if:

- You have not been able to get the foster child’s MA information from the child’s worker, the worker’s supervisor, or from EVS.
- A medical provider asks you to pay for medical service.
- You are having problems with the HMO.
- You are having problems getting medical services for the foster child.
EVS - ELIGIBILITY VERIFICATION SYSTEM:
Using this system allows you to verify the foster child’s MA eligibility and which HMO the foster child is enrolled in. To use EVS, see Where to Call.
- Select option 1.
- Enter the provider number 024018400.
- Enter the foster child’s MA number (also called the PMI number) OR
- the foster child’s social security number and date of birth.

HMO MEMBER SERVICE REPRESENTATIVE:
Each HMO health plan has member service representatives who can help you access medical services for the foster child. If an HMO member service representative will not talk with you about accessing medical services for the foster child, it may be because they need authorization to talk to you. If this happens, contact the foster child’s worker. See Where to Call.

Medical Coverage
Every foster child is eligible for medical insurance.
- When a foster child is placed in your home, make sure you receive all the medical provider information from the placing worker.
- If there are gaps in medical coverage, the foster parent needs to work with the child’s worker to determine coverage. There are specific payment processes the county must follow to determine the appropriate source of medical coverage. This refers to both medical care and prescription drugs.
- The foster parent must not take the child to a doctor or medical provider who is not covered by the child’s health plan.
- If a foster child is on PMAP and needs transportation to a medical appointment, call the child’s PMAP medical provider. PMAP providers are: Hennepin County, UCare MN and HealthPartners Care.
- If the child is on straight MA and needs transportation to a medical appointment, call MNET at least five days in advance of the appointment. See Where to Call.
- If you want mileage/parking reimbursement for transporting a foster child to a medical appointment for either PMAP or straight MA, call MNET to register the child prior to the appointment to arrange for reimbursement.
- Once the foster child’s placement ends, it is required that the foster parents return the child’s medical insurance card to the placing worker.
- If you are asked to sign any documents, please put Hennepin County information on the documents, attention: placing worker. Do not put your personal information on them.

FOSTER CHILDREN MAY RECEIVE MEDICAL COVERAGE FROM DIFFERENT OPTIONS, SUCH AS:
- Their parents’ private health insurance.
- Medical Assistance (MA) Fee-for-Service or Prepaid Medical Assistance Program (PMAP).
- Hennepin County Child Welfare funds pay for medical services if no other medical coverage is available.
- A combination of the above options.
Medical and Dental Care

- Prior to accepting a child for placement, be sure to ask if there is any special health care that you will need to provide or arrange for the foster child. See Medical Equipment.
- Foster parents are responsible for arranging routine medical and dental care for foster children and follow-up appointments such as therapy.
- Consult your foster child’s worker about any medical developments or concerns.
- If you are having problems getting answers to your questions, please contact the placing worker.
- If a foster child has not had a physical exam before placement, discuss with the child’s worker who will take the child for an exam within the first 30 days of placement.
- After the initial exam, foster children must have medical and dental examinations annually while in placement.
- If there is a possibility that a foster child may have a communicable disease, you must take the child to a doctor and follow the medical treatment plan. Some conditions for which you must consult a doctor and follow the medical treatment plan are listed. This is not a complete list, but an example of those contagious diseases for which you must seek professional medical attention.
  - Conjunctivitis (pink eye)
  - Lice
  - Impetigo
  - Shigellosis
  - Pinworms
  - Measles
  - Ringworm
  - Mumps
  - Scabies
  - Chicken pox
- Foster parents do not have the authority to arrange for anything but routine medical care for foster children. If a doctor or medical facility determines that appropriate and routine care includes necessary tests, immunizations and vaccinations for the child, you may consent to those routine procedures. If the doctor recommends more than routine care for the child, contact the child’s worker who will obtain the necessary permission.

Medical and Dental Emergencies

If a medical or dental emergency arises:

- Immediately seek professional medical care for the child.
- Inform the doctor or hospital that you are a foster parent and do not have the authority to give medical consent, which must be given by the parent or guardian. In cases where the state is the guardian, the designated representative in the county can sign medical consents.
- During business hours, immediately call the child’s worker who will locate the parents or guardian or obtain a court order.
- If you are unable to reach the child’s worker during business hours, call the worker’s supervisor.
- If it is after normal business hours, call Emergency after hours (612) 348-3552.
- Emergency medical, dental, mental and other health services may be provided to a foster child without the consent of the parent or legal guardian when, in the professional’s judgment, the risk to the child’s life or health is of such a nature that treatment should be given without delay and the requirement of consent would result in delay or denial of treatment.
Medical Equipment

Minnesota law requires foster parents to be trained by a qualified source on life-sustaining medical equipment they use with their foster children.

- The law covers common medical devices such as nebulizers, as well as those less common medical devices such as syringes for injection, blood glucometers, feeding tubes and pumps, suction machines, oxygen, C-pap and B-pap machines.
- A qualified source to train you is a person with medical training or a vendor of the equipment.
- Another foster parent who has been trained is not a qualified source to train you.
- If other adults in your house administer the medical equipment, they also must be trained by a qualified source. In other words, foster parents cannot train their partner, spouse or babysitter.
- Also, if you have not had a placement and did not use the equipment in the past six months, you must be retrained before you can take a new placement and use the equipment.
- This law also applies to equipment used for children in respite care or on preplacement visits with you.
- The agency is required to keep a record of your training. If you are using medical equipment with foster children in your home, your licensing worker should have documentation of your training on file.
- If a child already in your home is prescribed new medical equipment, you should be trained immediately and send in the signed documentation form. Usually the doctor’s staff or the equipment vendor will train you.
- Ask your licensing worker for the form used to document the training. Keep a supply on hand. Always get a letter or note from the trainer to document the training if you don’t have the form.
- In order to comply with this law, it is essential that you do not take foster placements, respite placements or pre-placements of children who need to use medical equipment unless you and others who help care for the children have been trained by a professional to use the equipment.

Medicine & Prescriptions

- You may not give a foster child any prescription medicine or vitamin supplements unless directed by a doctor.
- You must follow the prescription’s directions, or the doctor’s directions regarding the vitamin supplements.
- You may not change or discontinue prescribed medications without a doctor’s approval.
- If a psychotropic drug is prescribed by a doctor for mental health issues such as ADHD (Attention Deficit Hyperactivity Disorder), depression or anxiety, contact the child’s worker. The worker will need to obtain approval for this before you give the medication to the child.
- Make sure the school has the medication if the child needs to take it during school hours.
- A babysitter must be eighteen years or older in order to give medication to a foster child. You are responsible for making sure the babysitter understands and follows the prescription directions.

See Prescription Payments.
Minnesota Indian Family Preservation Act

- Minnesota Statutes, Section 257.35-257.3579, provides for the participation of Indian tribes in the placement of their children.
- Local social service agencies or private licensing agencies must:
  - Determine if a child is Indian and identify the child’s tribe.
  - Provide notice of potential out of home placement to the child’s tribe.
  - Make a reasonable effort to identify and locate extended family members.
  - Work with tribal courts and tribal social service agencies.
- The Act also provides that “…orders of a tribal court concerning placement of such child shall have the same force and effect as orders of a court of this state.”
- The Commissioner of Human Services is directed to publish an inventory of all Indian children in placement annually.

Minnesota Assessment of Parenting for Children and Youth (MAPCY)

- A uniform assessment process is a key part of Northstar Care for Children called the Minnesota Assessment of Parenting for Children and Youth (MAPCY). The MAPCY tool is comprehensive and supports good practice. Rather than identifying how “sick” the youth is, we want to shift the focus to how the caregiver can meet their needs. A completed MAPCY will answer two primary questions about the youth in your care:
  - What are the young person’s needs?
  - What parenting are you doing to meet those needs?

MAPCY DOMAINS
For all domains, the assessor doesn’t pick the level, but instead the assessor selects from among the available choices (in consultation with the caregiver).

- Placement Experience
- Dynamics in the Caregiver’s Home
- Supervision, Guidance & Structure
- Mental Health, Physical Health & Development
- Preserving Connections
- Developing Identity
- Education
- Child Care (ages birth-12 only)

This should result in a less subjective rating, with the computer deriving the level and the resulting score.

Miscellaneous Expenditure Voucher

Generally, all expenses of caring for a foster child are reimbursed as part of the basic foster care rate. Some items are reimbursed beyond the basic rate. These may include some portions of: school events, high school graduation expenses, driver’s training, family vacation expenses, musical instruments, lessons, bicycles, sports and recreational equipment, television for a hospitalized foster child, long distance phone calls, special hair and hygiene products.

For any of these expenditures, you:

- Must get prior approval from the child’s worker.
- Complete a Miscellaneous Expenditure Voucher and give it to the child’s worker.
- Request reimbursement within 30 days of the expenditure.
Moving

- If you are planning to move, notify your licensing worker and the foster child’s worker as soon as your plans are definite and prior to the move.
- As soon as you move, your licensing worker will need to visit your new home to ensure that it meets foster care standards.
- If you are moving out of the county and want to take a foster child with you or be licensed in the new county, discuss this with your licensing worker and the child’s worker.

Musical Instruments and Lessons

Foster parents may be reimbursed for the purchase of a foster child’s musical instrument only:

- If the child is in long term placement.
- With prior approval from Supervisor and Program Manager.
- Allowance of up to $10 per month may be allowed for school aged children for music lessons and instrument rental only.
- If it is part of the child’s casework plan.
- If there are definite time lines set for evaluation of the child’s progress and ability by the child’s worker.

If these expenses are approved for reimbursement, submit a Miscellaneous Expenditure Voucher to the child’s worker within 30 days of expenditure.

Out of Home Placement Plan

- When a child is placed in foster care, the birth parents, Child Placing Worker, Child Protection Worker, Foster Care Licensing Worker, Guardian Ad Litem, and foster parents come together to make up the team that will be working with the child and family. A tool that is used to begin this teaming process is the Out of Home Placement Plan (OHPP).
- The OHPP must be completed within the first 30 days of placement.
- The OHPP spells out in writing why the child is in placement and what types of services the child might need.
- Everyone involved with the child, including the foster family, birth family and social workers needs to be involved in creating this plan.
- Foster parents are encouraged to attend the OHPP meeting. At the meeting:
  - Everyone gives input into the plan.
  - Tasks are negotiated by all present. This is a time to clarify any concerns you have about the child’s needs and responsibilities you will have during the placement.
  - Everyone then signs off on the plan and is given a copy.

You should receive a copy of the OHPP for every child you have in placement.

Your name and address is listed on the OHPP, in accordance with Minnesota Statute 260.176, sub 3(b). This will be omitted in cases where providing this information would lead to endangerment for the child and/or foster family.

If you have questions about the OHPP, contact the child’s worker or your licensing worker.
**Overnights**

You must obtain approval from the child’s worker before allowing a foster child to go on an overnight. This includes sleepovers at a friend’s or relative’s home or anywhere else with or without you.

If the foster child will be staying overnight at another foster home, that foster home’s licensing worker must also give prior approval. See Prudent Parenting.

**Pets**

- Foster families that have pets must ensure that all immunizations are up to date and provide the Foster Care Licensing Social Worker with a copy of the current shot records; this needs to be done for initial licensing and annually at relicensing or annual review. Pets may not pose a threat to foster children.
- Foster families with foster children under the age of six may not have chickens, ducks or reptiles as household pets.
- Foster families whose foster children are all age six or older may have chickens, ducks or reptiles under the following circumstances:
  - The pet must always be kept in a cage.
  - You must require a thorough hand washing following the handling of the animal, its food and anything the animal has touched.

**Phone**

A foster home must have an operable phone located in the residence for safety reasons. However if the applicant/provider uses only cellular service the agency requires the applicant/provider to read, sign and comply with the conditions of the Landline Exception Agreement.

The Landline Exception Agreement requires foster residences to have a charged, functioning cell phone in the home at all times. See appendix.

**Phone Expenses**

The agency may authorize and pay for a foster child’s long distance phone calls according to the casework plan. If approved, complete a Miscellaneous Expenditure Voucher and give it to the child’s worker with a copy of the phone bill.

If you allow a foster child to purchase or use a cell phone, you are responsible for those expenses.

**Phone Number Change**

Any time you get a new phone number or an unlisted number, notify your child’s worker and licensing worker immediately.

**Piercings and Tattoos**

Foster parents may not give permission for a foster child’s piercings, including ear piercings, or tattoos without written permission from the child’s parent or guardian, obtained by the child’s worker.
Placement Folder
The placement folder is intended to help the foster parent keep all of the records about the foster child in one folder. The folder should include the following forms:

- Child Placement Face Sheet
- Out of Home Placement Plan
- Foster Parent Permission

The foster parent is responsible for completing these forms.
- School Record
- Health Care Record
- Immunization Record
- Foster Child Minimum Clothing Standard
- Incident Report
- Foster Parent Evaluation of Child Placement
- Family Contact Record

Every child in foster care should have a Placement Folder. If you did not receive a Placement Folder for a child, request one from the child’s worker and inform your Foster Care License Social Worker. You are expected to maintain a child’s Placement Folder. Your licensing worker will check with you during quarterly visits to assure that you are maintaining the Placement Folder.

Placement Plan
See Out of Home Placement Plan.

Placements
Foster care providers should not contact any one other than the licensing worker regarding placements.

MATCHING FOSTER CHILDREN TO FOSTER FAMILIES
- It is important that your licensing worker know what type of child is most appropriate for your home.
- If you want to change the age range or types of children you are interested in considering, discuss this with your licensing worker.
- If you are not getting foster care referrals, talk with your licensing worker to evaluate whether your age range, available space and skills match placement needs.
- If you have recently had a foster care placement, future referrals will be made based on your family and the foster child’s adjustment to the placement.
- Once you have a placement additional placement may need to be approved by the foster child’s worker (depending on the needs of the child).

MINNESOTA STATUTE SECTION 260C.212, SUBD.2 LISTS FACTORS THAT MUST BE USED IN DETERMINING WHICH PLACEMENT IS MOST APPROPRIATE FOR A CHILD. THESE ARE:
- The child’s current functioning and behaviors.
- The child’s medical, educational and developmental needs (if not addressed elsewhere in the casework plan).
- The child’s history and past experience.
The child’s religious and cultural needs.

- The child’s connection with a community, school and church.

- The child’s interests and talents.

- The child’s relationship to current caretakers, parents, siblings and relatives.

- The reasonable preference of the child, when appropriate.

In addition, the agency also considers the following factors in the matching process:

- Relative providers, if they can meet the child’s needs.

- Siblings needing to be placed together.

- Age and sex of the child.

- Whether the foster parent has had the training, experience and skills needed to deal with the child’s current functioning, behaviors and needs.

- Child’s need for a parent home full time.

- Match between the foster child and any other children in the foster home.

- Space in the foster home.

- Location (proximity to the child’s family or school).

- Child’s need for foster parents who are comfortable with sexuality, gender identity and chemical dependency issues.

- Child’s need for foster parent’s participation in therapy or other appointments, including school activities, family visits, etc.

- Foster parent’s ability to transport.

- The number of children under age two in the foster home.

- Regardless of children’s ages, the total number of children in a foster home must not exceed the limits set by Rule 2960.

- Allergies, including pet allergies.

- The child’s worker is informed about foster homes that might be a match for the child. The child’s worker then has the final responsibility for reviewing and selecting the foster home that will be used.

**ACCEPTING A REFERRAL**

- Only agree to take a child when you are certain you and your family have the time, energy, ability and commitment to parent this child for as long as the child needs foster care.

- You must also have the ability to provide the needed transportation. Foster Providers should clearly state their working schedule and how it relates to their ability to transport foster children to visits and medical appointments.

- Don’t feel guilty if you decide not to take a particular child. Everyone has different strengths and abilities. It is better to say “no” to a referral than to take a child and later realize it was not a good decision. The agency has a “first placement-last placement” policy. This means that we expect that a child’s first placement will be the family with whom the child will live until reunification or other permanency planning is made. It is emotionally damaging to a foster child to be moved from one foster home to another.

- Have a preplacement visit. See Preplacement Visits.
Some questions to ask the referring worker to help you make a decision when you are referred a child:

1. Has the child been in previous placements?
2. May I talk with the shelter parent or foster parent who currently has the child?
3. What is the child's relationship to his or her family?
4. What problems led to the child's placement?
5. Has the child been physically or sexually abused or neglected? When? How?
6. How does the child feel about being in placement?
7. How do the child's parents feel about the placement?
8. How will the child relate to other children in your home?
9. What is the estimated length of placement?
10. Is the plan to return the child to parents, adoption or another option?
11. Is the child functioning academically and socially at grade level?
12. Are there learning problems?
13. Are there behavior issues?
14. Is the child using life-sustaining medical equipment? Have I been trained to use this equipment?
15. Are there special care issues such as toileting, eating, or sleep problems?
16. Does the child need frequent medical appointments? Who transports?
17. What type of medical coverage? Which clinic?
18. How often are visits?
19. Who will visit?
20. Who arranges the visits?
21. Where are the visits held?
22. What is required from me regarding transportation for visits?
23. What are the child's strengths, interests and hobbies?
24. Is the child sexually active?
25. Does the child smoke?
26. Has the child ever received a psychiatric or psychological evaluation? What were the recommendations?
27. Will the child be in therapy? Where? How often? Who transports?
28. Is the foster family expected to participate in therapy sessions?
29. Is the child on probation? Why?
30. What are the conditions of probation?
31. Does the child have an assessed MAPCY level? What is it?
32. Is an initial clothing allowance needed?
33. Does the child take any medication? If so, what medication? Why? What are the side effects of the medication?
WHEN A FOSTER CHILD COMES TO YOUR HOME

- You may want some kind of welcome to celebrate your foster child’s arrival, but do it fairly quietly. Your foster child will probably feel more comfortable if everyone settles down to a routine as quickly as possible.
- Children will differ in their responses to placement. Some may be depressed, others may have no reaction at all, and most will have responses somewhere between these extremes.
- Giving the child permission to be sad about missing his or her birth family can decrease some of the discomfort the child feels. This will also help to increase the child’s ability to attach to you.
- Eventually a foster child will likely test your limits. The child may refuse to eat, cling to you, wet the bed, become defiant, or vent anger at you and your family. With patience, you can help the child learn that placement is not a punishment and that you care about the child.

When a child comes to your home do not assume they know how to do simple tasks. Take the time to explain how your family makes beds, hangs up clothes, and sets the table. Remember that some children have not had the life experience to know how to do these things and they may seem defiant when really they don’t understand.

On the day of placement, the child’s worker will provide you with or arrange with you the following:

- The worker’s phone number and the supervisor’s phone number.
- The child’s medical card or medical number.
- The child’s Placement Folder. See Placement Folder.
- Details concerning visitation plans, medical concerns, any medication with written instructions, transportation plans for visits and appointments.
- School records.

In addition:

- If the child has not had a physical, make an appointment and take the child to the exam within the first 30 days of placement.
- Review with the worker the child’s clothing and discuss whether the child is in need of, and eligible for, an initial clothing allowance.

THE FIRST MONTH OF PLACEMENT

- Begin maintaining the Placement Folder.
- Begin maintaining a folder with detailed information of how you are meeting the child’s needs. This information will be used to determine the MAPCY Rate for reimbursement.
- Within 30 days of the child’s placement in your home, you should receive from the child’s worker a copy of the Out of Home Placement Plan.
  - This plan spells out the duties of the parents, the child, the worker and the foster parents during the time the child is in your home.
  - All persons will sign the form, stating that they agree with the goals and responsibilities.
  - The Placement Plan must be reviewed administratively every six months.

See Administrative Review Process and Out of Home Placement Plan.
IF A PLACEMENT ISN’T WORKING

- Talk frequently and openly with the foster care licensing worker and child placing worker throughout the placement. Let the worker know the difficulties you are having and what you have tried. The worker may be able to provide you with additional resources to turn the placement into a successful one.
- Advocate with the agency, school and medical systems to get the child what he or she needs. These services may include personal care attendants, extra respite, therapy or specialized school services.
- You must work with the agency to ensure a planned discharge. Before an unplanned discharge, you must confer with other interested persons to review the issues involved in the decision. During this review process, which must not exceed 30 days, you must determine whether you, the treatment team (if any), interested persons, and the child can develop additional strategies to resolve the issues and to permit the child an opportunity to continue in your care. If the review indicates that the decision to discharge is warranted, the reasons for it and the alternatives considered or attempted must be documented. A child may be temporarily removed from your home during the review period if the child is a danger to self or others.

END OF PLACEMENT

When your foster child leaves, regardless of where the child is going, the following must be sent along with the child:

- A schedule of feedings, depending on the child’s age.
- Details of the child’s sleep habits, food or other allergies and general likes and dislikes.
- Anything that the parents have given the child.
- The child’s toys.
- A properly maintained and complete wardrobe that matches or exceeds the Minimum Clothing Standard. See Clothing.
- Any pictures you have of the child.
- Anything for which you received reimbursement, like a bike or sporting equipment.
- Anything else that clearly has belonged to the child.
- The child’s medical card and any medical equipment.
- Any gifts you or others have given the child.
- Belongings need to be packed in a suitcase, not garbage bags.

This list is not meant to be inclusive. If you are in doubt as to what should be sent, consult the child’s worker. Have the following forms completed and give them to the child’s worker on the day the placement ends:

- Foster Child Minimum Clothing Standard. Send a copy to your licensing worker.
- The child’s Placement Folder. It is important that you have all the forms up to date.
- Foster Parent Evaluation of Child Placement form. Send a copy to your licensing worker.
- Foster Care providers should not discharge foster children from placement. Placing workers need to get the children from the home.

ONGOING CONTACT WITH FORMER FOSTER CHILDREN

If you would like to maintain contact with a foster child, check with the child’s worker first. The child’s worker will know whether your contact with the child may interfere with case planning for the family.

If you receive approval to maintain contact, you must also receive prior approval from the child’s worker and your licensing worker if you want to have the child visit in your home. These visits may have an impact on other placements in your home and could affect your liability insurance coverage.
**Playpens**

- Never place an infant in a mesh playpen with the sides down. Infants may roll into the space between the mattress and the loose mesh side, causing suffocation.
- If using a playpen, check with the US Consumer Product Safety Commission regarding the safety of your playpen. See Where to Call, or visit their web site at [www.cpsc.gov](http://www.cpsc.gov).
- Playpens must not be used for sleep; babies must be placed in a crib to sleep.

**Preplacement Visits**

- If the information you receive about a prospective foster child sounds as if the child may be a good match for your family, ask the child's worker to arrange for a preplacement visit.
- Depending upon the age of the child and the child's needs, the preplacement visit may be a matter of hours, days, a series of weekends or other combinations.
- For any overnight preplacement visit, foster parents are able to be reimbursed for.
- If the child does not remain as a placement, submit a Miscellaneous Expenditure Voucher to the child's placing worker for payment. Make sure to include on the voucher that this was a preplacement visit.
- If the child remains as a placement, indicate the days of the preplacement on the monthly voucher.
- A preplacement of three days or less will be reimbursed for each day.
- A preplacement of four or more days will be reimbursed for the first and subsequent days, but not the last day (the day the child leaves).

**Prescription Payments**

If you need to pay for a foster child's prescribed medicine because the pharmacy cannot verify the child's medical coverage:

- Complete a Miscellaneous Expenditure Voucher.
- Attach a copy of the receipt.
- Give these to the child's placing worker within 30 days of purchase in order to receive reimbursement.
- See Medicine & Prescriptions.

**Prudent Parenting**

In accordance to Public Law 113-183, the Preventing Sex Trafficking and Strengthening Families Act for 2014, requires the states to support normalcy for all children in foster care and for them to participate in socially and developmentally appropriate activities that their peers who are not in care experience. Therefore, supporting foster care parents and residential staff to allow foster children to engage in normal childhood activities by applying the reasonable and prudent parenting standard. The law also protects foster parents and residential facilities from being permissible to civil liabilities due to the implementation and compliance of the reasonable and prudent parenting standard.

The standard is conceptualized as careful and sensible parenting decisions that maintain the child's health, safety, religion, and creed and holds the best interest while encouraging psychosocial developmental growth (M.R 260C.212, Subd. 14). When considering the implementation of the standard, please note the following guiding points.

- The child's chronological age vs. maturity and developmental level
- Risk of activity
- Best interest of the child
- Importance of the experience for the child’s psychosocial growth
- Importance of a family-like experience
- Behavioral history of the child
- Wishes of the child's parent/legal guardian, as appropriate (i.e., only when the child's parents are involved in the child’s case as designated in the Out of Home Placement Plan.)

These guiding points must be used when foster parents are considering to allow foster children to engage in activities such as recreational events (i.e., camping, boating, swimming, movies, video games), school and extracurricular (i.e., sports, theater, band), overnights, and planned outings (i.e., sleep over with friends), social media, driving, babysitting, attending college tours etc.

**Relicensing**

Your license lists an expiration date. Prior to that date, your licensing worker will meet with you to complete your relicensing study so that the licensing worker can make a recommendation to the Minnesota Department of Human Services for a license renewal.

**Prior to your relicensing home visit:**

- Complete all the relicensing forms mailed to you. Make certain that the forms that require signatures (all adults and children age 13 and older) are signed.
- Check your smoke detectors to make sure they are working. Fix if needed.
- Check your fire extinguisher, get it serviced and tagged. Your fire extinguisher must be a 2A10BC or larger. “Maintenance” is a thorough examination and repair of your home's portable fire extinguisher that must occur yearly that includes an examination of the extinguisher by an approved company. Annual maintenance is required to be recorded on a tag or label attached to each extinguisher that indicates the month and year the maintenance was performed and the name of the person or company performing the service.
- All training should be completed two months prior to the relicensing due date. For mandatory training needed, please see Hennepin County training website at [www.hennepin.un/fostercare](http://www.hennepin.un/fostercare).

**Resources/Help/Supports for Foster Parents**

See Essentials Email Newsletter, Support Groups, Training

**Respite and Substitute Care**

Caring for foster children is challenging. We encourage foster parents to take breaks from fostering.

- You are eligible to receive up to 21 days per calendar year of reimbursed respite care or substitute care. This is 21 days per foster family, not per child.

  - Respite and substitute care reimbursement is available only to fully licensed homes.
  - Respite care, substitute care during the last two weeks in December will not be approved.
  - You may not use respite or substitute care and at the same time take a foster child into your home for respite or a foster care placement.
  - All respite must be arranged and approved through your licensing worker. Send the respite plan by email when possible, using only the child’s first initial.
A. Respite Care Protocol

Respite care is the term used when your foster child goes to another licensed foster home while you take a break. Notify the child’s worker that you are making this request. Here is the process for requesting respite care:

- Notify your licensing worker at least 30 days in advance when you want to use respite. Failure to notify the licensing worker prior to using respite care may result in a negative licensing action and/or nonpayment.
- The licensing worker will select a licensed home for the respite placement.
- You must complete the Respite Providers/Substitute Caregivers Information form for each child needing respite, and give a copy of the form to the respite provider. Both you and the respite provider must sign the completed form before the respite begins. See Section C.

B. Substitute Care Protocol

Substitute care is the term used when you arrange for someone to come into your home to provide care for your foster child while you take a break. (This was formerly called in-home respite.) Here is the process for requesting substitute care:

- You must notify your licensing worker and the child’s worker of the plan prior to using a substitute caregiver. Failure to do so may result in a negative licensing action and/or nonpayment.
- You must provide your licensing worker and the child’s worker with the name of the substitute caregiver who will be providing respite care. Substitute caregivers must: have a current and completed background check, including fingerprinting (see Fingerprinting) in order to provide 24-hour care for a child; be at least 18 years old; and provide documentation of training from an appropriate training source on any medical equipment used by the foster child. See Medical Equipment. Car seat training must be completed for anyone transporting a child under the age of nine. SUID and AHT training must be completed for anyone providing care for infants or children 5 and under.
- If the substitute caregiver is providing more than 30 cumulative days of substitute care in a 12-month period, that person must meet the requirements outlined above as well as: must submit a signed statement attesting to good health and being physically able to care for foster children and have at least six hours of training or 20 hours of experience in caring for children with the particular needs of the foster children to be cared for.
- Substitute caregivers must also meet all other babysitter requirements. See Babysitters.
- You must complete the Respite Providers/Substitute Caregivers Information form for each child needing respite, and give the copy of the form to the substitute caregiver. Both the foster parent and the substitute caregiver must sign the form. See Section C.
C. Respite Provider/Substitute Caregiver Information Form

Here is what you need to do: Read over the form before you fill it out and then fill it out completely.

1. Fill in name of foster parent requesting the respite, your licensing workers name and the date.
2. List the first day (date) the child goes to respite and the day (date) he returns.
3. List the child's first and last name, birth date, nickname and gender.
4. List things the child likes to do, for instance - reading, helping cook, watching TV with foster parent, playing basketball, etc. If the child has behavioral and/or emotional needs, be sure to include these. Also include things such as food hoarding, running away, overeating/undereating. This would be the place to list the type of supervision the child needs. Example, does he need to be in the same area as a foster parent at all times or can he have alone time?
5. List any food allergies, things the child won’t eat or shouldn’t eat due to medications or other conditions he experiences. If the child's diet is very specific, you might send enough of the particular food for the time the child is in respite or a list of the foods the child likes.
6. List any current bumps, bruises, or other physical problems. Describe them and give location on the body.
7. List any special products the child uses. If it is something very specific, you should send the product with the child.
8. If the child goes to school, what time does school start and end? How will the child get to school? Time child gets up/goes to bed. Does the child take a nap?
9. List first and last names of persons who the child can contact, such as birth parents, grandparents, brothers, sisters, and/or friends.
10. If the child has any sort of visit, list it here and fill out the details on each line - these include visits with parents/family, medical/dental appointments and therapy to name a few.
11. Fill this in only if the child will be attending school during the time he is in the respite home. If the child needs help with homework, be sure to give details such as the TV must be turned off or he needs to sit in a room with you when he completes it. Does an adult need to check the homework or lead the child through each step and make sure it is completed correctly?
12. List this information so the respite provider will know the doctor, the medical plan and the medical card number for the child.
13. List any medical problems the child experiences - asthma, allergies, any allergies to medications, any insect allergies. In regard to allergies, what is the child's reaction- from sneezing to breathing problems?
14. Name the medical equipment and how it is used. Be sure to send it with the child.
15. Name the medication and the reason the child is taking it. You need to send medications in their original containers.
16. The person who is doing the respite should fill this out. Make sure you complete this with your first and last name, full address and phone number. List your licensing agency, usually Hennepin County. The three questions in this section must be answered. If the answers are yes and you do not have the required training, you CANNOT do the respite. You must sign and date the form in this section. Be sure to carefully read all of the information about the child and get all your questions answered before the respite begins. As the completed form indicates, the person providing the respite must submit this two-part form with the Miscellaneous Expenditure Voucher in order to be reimbursed for the respite.
17. Respite provider/substitute caregiver sign and date.
18. Fill out this section depending on which type of respite you are using: substitute care or out of home respite. Make sure you sign and date this section. Keep a copy for yourself and give the yellow copy...
to the person doing the respite. The foster parent requesting respite should have all but the “Respite Provider/Substitute Caregiver” section completed before bringing the foster child to the respite home or before the substitute caregiver arrives.

19. Foster parent requesting respite sign and date.

D. Daycare Protocol:

- Up to five of the 21 days of respite may be used for bringing your foster child to a licensed daycare home or center for less than 24 hour care.
  - It is up to you to find the licensed daycare home or center.
  - The home or center you use for daycare must be licensed.
  - You will be reimbursed up to $45 per day, regardless of the number of children. For example, whether you have one foster child or five foster children in daycare, the total reimbursement rate is a maximum of $45 per day, not $45 per child.
  - Regardless of how many hours the children are in day care, it will count as one of your five days. You may not claim just half a day if you only use a few hours.
  - Daycare providers must also meet all other babysitter requirements. See Babysitters.
  - If you decide to use five of your respite days towards daycare, you pay the provider and the agency reimburses you. Write the names of the foster children and the name of the licensed daycare provider or facility on a Miscellaneous Expenditure Voucher and send the voucher to your licensing worker for processing.

E. Respite Care Reimbursement

- Respite days will be reimbursed to you at the regular foster care reimbursement rate including the DOC rate or MAPCY level. The licensed respite provider is also reimbursed the same rate.
- If the break is three days or less, all three days are reimbursed. If the break is longer than three days, reimbursement is made for the first and subsequent days, but the last day (the day the child leaves) is not reimbursed. You will receive the foster care rate, including the DOC or MAPCY level, for each child during the time of the respite by including the dates of the respite on the monthly voucher. This is also the amount reimbursed and sent directly to the respite foster parent who provided the care. See Section G.

F. Substitute Care Reimbursement

- The agency will reimburse you $45 per day, to be used to reimburse the substitute caregiver, regardless of the number of children in your home.
- Reimbursement for substitute care: the total break, up to 21 days in a year, is reimbursed.
- Complete a Miscellaneous Expenditure Voucher, listing the names of the children for whom the substitute care was provided. Also include your name and the dates of the care. Sign the front and send the form to your licensing worker. The signed Respite Provider/Substitute Caregiver Information form must be attached in order to get reimbursement.
- The reimbursement of $45 per day is sent to you and you are responsible for paying your substitute caregiver. You will also receive the foster care rate, including the DOC or MAPCY level, for each foster child during the time of respite by including that period of time on your monthly voucher.

G. Reimbursement if You Are Providing Respite Care

If you are a foster parent who provides respite care for children living with their birth parents, or for children who live in a foster home other than yours:
- Your foster care license must reflect the correct number of children for whom you will be providing care.
- Your licensing worker and the child’s placing worker must preapprove the respite plan.
- If the break is three days or less, all three days are reimbursed. If the break is longer than three days, reimbursement is made for the first and subsequent days, but the last day (the day the child leaves) is not reimbursed.

Complete a Miscellaneous Expenditure Voucher listing the names of the children for whom the respite was provided and dates of the respite. Sign the form, attach the signed Respite Provider/Substitute Caregiver Information form, and mail it to your licensing worker. The reimbursement is sent directly to you, the respite provider.

**When a substitute caregiver comes into your home to provide care for your foster children:**
- You and the caregiver complete the Respite Provider/Substitute Caregiver Information form prior to the respite beginning. [Respite Provider/Substitute Caregiver Information Form](#)
- After the respite, you pay the caregiver. Complete the Miscellaneous Expenditure Reimbursement Request form following steps 1-10 below and mail it to your licensing worker. You will be reimbursed.
  1. Fill in the name(s) of the foster child(ren).
  2. Fill in the case number if you know it. If not, leave it blank.
  3. Fill in the name of the child(ren)’s worker.
  4. Fill in the date you are completing the form.
  5. Write “Substitute Care” for how many children.
  6. List the dates of service and the number of days requested for reimbursement.
  7. Leave the amount area blank.
  8. Sign the form.
  9. Print your name and complete address below your signature.
  10. Attach Respite Provider/Substitute Caregiver Information form to the Miscellaneous Expenditure Reimbursement Request and mail both forms to your licensing worker.

When a child goes to a foster home for respite (Out of Home Respite) the foster parent providing the care completes the Miscellaneous Expenditure Reimbursement Request form and submits it to the licensing worker.

**The person providing the care:**
1. Fills in the name(s) of the foster child(ren).
2. Fills in the case number if known. If not known, leave it blank.
3. Fills in the name of the child(ren)’s worker.
4. Fills in the date the form is being completed.
6. Lists the dates of service, the number of days requested for reimbursement.
7. Leaves the amount area blank.
8. Signs the form.
9. Print your name and complete address below the signature.
10. Attaches Respite Provider/Substitute Caregiver Information form to the Miscellaneous Expenditure Reimbursement Request and mail both forms to the licensing worker for the home taking the respite.

[See sample in appendix.](#)
I. Foster Child in Respite for More than 21 Days in a Calendar Year (Special Respite)
- The child’s placing worker must obtain approval from the child service’s program manager for any reimbursed respite beyond 21 days in a calendar year. These days need not be consecutive.
- The child’s placing worker must file this written authorization with accounting.
- At the end of each special respite, the foster parent completes a Miscellaneous Expenditure Voucher and attaches it to the Respite Provider/Substitute Caregiver form and sends both forms to the child’s placing worker.

Runaway Children
If your foster child has run away, is missing, or is absent without permission:

During working hours
- Notify the police.
- Call the child’s placing worker, who will notify the parents and other people who need to be informed. If unavailable, leave a message.
- If you are unable to reach the child’s worker, call the worker’s supervisor. If unavailable, leave a message.
- Call your licensing worker. If unavailable leave a message.
- File an Incident Report within 24 hours.

After working hours
- Call the police and then Emergency After Hours, 612 348-3552 and report the child missing. See Where to Call.
- Leave a message for the child’s worker.
- Leave a message for your licensing worker.
- File an Incident Report within 24 hours.

School Information

FOSTER PARENT PERMISSION LETTER
- At the time of placement, you will receive a Foster Parent Permission letter provided by the Child Placing Worker.
- Please note, any decisions pertaining to the educational rights of the foster child are afforded to the legal custodian whether it is the birth parents or the Commissioner of Human Services (i.e., TPR). The letter affords foster parents the opportunity to share needed information, partake in conferences, and to support the educational achievement of the foster child.
- The letter also gives you permission to attend school conferences and to receive school reports.

SCHOOL ENROLLMENT
- School aged children must be enrolled in school as soon as they are placed in your home during the school year. Let the school know that you are the child’s foster parent.
- Every attempt should be made to enroll kids in their school of origin. Please discuss with the placing worker.
- Immunization records are required to enroll a child in school. If not available from school, request records from Child Placing Worker.
- Talk with the child’s placing worker regarding obtaining previous school records.
- If a child needs educational testing to determine achievement level or special educational services this is to be requested by the department’s social worker to get the approval from the legal custodian and must be requested by either the department’s social worker or the legal custodian in writing or in conjunction with the school administrators. If the foster parent notes any learning disabilities or education challenges, it is recommended to inform the child’s worker and the department’s social worker for the next steps towards assessment/evaluation.
- Bring the signed Foster Parent Permission letter along when registering your foster child in school.

**PRIVATE SCHOOLS**
- To enroll a foster child in a private school, you will need to get parental permission through the child’s worker.
- The county is not able to pay for tuition or books, but some private schools will waive tuition for foster children.

**HOMESCHOOLING**
- Foster parents are not permitted to homeschool foster children except under unique circumstances.
- Prior authorization must be obtained from the licensing worker and the child’s worker for unique circumstances.

**REPORT CARDS AND SCHOOL REPORTS**
- Children’s workers will be asking about children’s school performance and will be asking to see report cards and other school reports.
- Keep these school records and send them with the child at the end of placement.

**SCHOOL LUNCHES**
- Foster children are usually eligible for school lunches at free or reduced rates.
- Call your local school or licensing social worker to obtain and complete an application. It may take a few days for the child’s eligibility to be determined, so be sure the child has money or lunch tickets for lunch until approved.

**SCHOOL EXPENSES**
Most school expenses are to be covered by the Basic Maintenance rate.

Some unusual expenses may be reimbursed; to be reimbursed for these:
- You must obtain prior approval from the child’s worker.
- If the child’s worker approves reimbursement, complete a Miscellaneous Expenditure Voucher, attach the receipt and give it to the child’s worker within 30 days of expenditure.

Some items that may be reimbursable if approved by Child Placing Worker are:
- Field trips.
- High school graduation expenses (pictures, announcements, senior class functions, etc.).
- Sports uniforms for school age children. A maximum of $10 per month during any calendar year for the months the child has been in placement. The total amount for sports uniforms and other recreational equipment cannot exceed $120 per year ($10 x 12 months). See Sports and Recreational Equipment.
- Items to be reimbursed must be itemized on the Miscellaneous Expenditure Voucher and submitted to the Child Placing Worker. This requires prior supervisory approval and must be part of the child’s written case plan.
Sexual Boundaries

- Foster families must have clear sexual boundaries. Clearly state what kinds of touch are not okay. Make sure you also review this information with babysitters.
- Under no circumstances should foster parents touch a foster child in a sexual way or ask a foster child to touch them in a sexual way.
- You must avoid innocent touching that a sexually abused child may interpret as being sexual (such as having a foster child give you a massage).
- Clearly explain your family privacy rules including bathing, toileting and dressing.
- Use good judgment regarding the nature of video, audio, computer and written materials to which foster children are exposed.

Shaken Baby Syndrome

See SUID/AHT (Sudden Unexpected Infant Death / Abusive Head Trauma).

SUIDS/AHT (Sudden Unexpected Infant Death / Abusive Head Trauma)

SUID is the sudden and unexpected death of a newborn baby through twelve months of age. For SUID prevention:

- Babies must always be put on their backs to sleep, at naptime and nighttime.
- Babies may not share cribs.
- A baby must not be put to sleep in an adult or toddler bed, either alone or with another person.
- Place a baby on a firm mattress with a crib sheet that fits snugly on the mattress and overlaps the mattress so it cannot be dislodged by pulling on the corner of the sheet. Never use an adult sheet on a crib mattress.
- Do not place babies to sleep on bean bag chairs, sofas, sofa cushions, waterbeds, sheepekins, or other soft surfaces. Babies also cannot sleep in car seats or on the floor. These spaces are not an acceptable sleep space or sleep position.
  - Remove pillows, quilts, comforters, stuffed toys and other soft items from cribs, as these may cause suffocation. The only allowable item in a crib is a pacifier.
  - Do not expose babies to smoke of any kind. See Smoking Legislation.
  - Do not put babies in mesh playpens with the sides down.
  - Check with the United States Consumer Product Safety Commission for up-to-date safety information. Visit their website at www.cpsc.gov, or see Where to Call.

See Crib Safety. See SUID/AHT Training.

Only a medical professional can direct a foster parent to have their baby sleep in a position other than on the baby’s back. The medical professional must sign the Parent Directive for Infant Sleeping Position form available through the Department of Human Services. The signed form must be in the child’s file before the foster parent can use the alternate sleeping position. If you receive a request for an alternative sleeping position, contact the Child’s Placing Worker.
**SUID/AHT Training**

- Non-relative foster parents must take SUIDS/AHT training before accepting a child through age 5.
- Relative foster parents must take SUIDS/AHT training within 30 days of placement.
- All family members, extended family, babysitters etc. who help with the care of a foster child through age 5 must have SUID/AHT training.
- Once trained, all licensed foster parents and others must repeat the training every five years if still caring for foster children through age 5.
- If you have any questions about the training, or who should be taking the training, talk to your licensing worker or call the foster care training coordinator.

**Sleepovers**

*See Overnights.*

**Smoking Legislation**

- Minnesota legislation prohibits smoking in foster homes. This also includes electronic cigarettes.
- You cannot smoke in:
  - The home.
  - The garage.
  - Any vehicle used to transport foster child.
  - A balcony, deck or porch that is attached to the house.
  - Any location in the presence of the foster child.
  - Second-hand smoke is related to SUID and to the development of children’s health problems.

**Sports and Recreational Equipment**

Reimbursement for sports and recreational equipment for a foster child may be allowed with supervisory approval in accordance with a foster family’s activities.

Whether or not you are reimbursed for a bicycle, if you allow a foster child to ride a bicycle, **the child must wear a bicycle helmet appropriate for the child’s age and size**. If the child is in an accident with a helmet, that helmet must be replaced.

**REIMBURSEMENT FOR SPORTS UNIFORMS, SLEEPING BAGS, BICYCLES, BICYCLE HELMETS AND SNOWMOBILE SUITS:**

- Requires supervisory approval.
- May be authorized for school-aged children only.
- May not exceed $10 per month during any calendar year for the number of months the child has been in placement.
- Must be part of the child’s written case plan.
- The total amount for any combination of the above items may not exceed $120 per year ($10 x 12 months).
- If the child’s worker approves reimbursement, complete a Miscellaneous Expenditure Voucher, attach the receipt and give it to the child’s worker within 30 days of expenditure.

YMCA memberships, camp fees and some recreational equipment may be funded by the Forgotten Children’s Fund. Discuss this with the child’s placing worker.
Stress
Foster parents may experience stress, sometimes called “burnout,” by attempting to meet the many demands of special needs children over a period of time without relief.

SOME SIGNS OF STRESS ARE:
- Exhaustion.
- Headaches.
- Sleep troubles.
- Depression.
- A quickness to anger.
- Resisting change.
- Irritability.
- Increased alcohol use.
- Becoming lax with paperwork or in supervision of children.

SOME WAYS TO PREVENT STRESS INCLUDE:
- Know your limits, skills, strengths and weaknesses.
- Ask for help when you need it.
- Increase your knowledge and skills by attending foster parent training classes.
- Use respite regularly and take breaks for yourself.
- Take time for yourself and your family.
- Spend time with people who are positive.
- Focus on the positive things rather than on the negative.
- Appreciate the small gains made with foster children.

The key to preventing burnout is to keep a balance in your life. If you are experiencing stress that is negatively affecting your ability to care for yourself, your family and/or the foster child, talk right away about this with your licensing worker.

Supervision
Many children who come into foster care have had little supervision. Many are emotionally delayed, overly aggressive and/or used to parenting themselves and their younger siblings. You must provide a high level of supervision to foster children in your care.

As a guideline:

INFANTS MAY NOT BE:
- Left in the care of another foster child.
- Left in the home alone.
- Left to cry without being checked on.
- Allowed to ride in the car without a car seat.
- Left alone in a car.
- Left in the bath tub unsupervised.
- Left in the yard unsupervised.
TODDLERS MAY NOT BE:
- Left in the bath tub unsupervised.
- Left in the yard unsupervised.
- Allowed to ride in the car without a car seat.
- Left in a highchair, swing, walker or other equipment unattended.
- Left in a bathroom or kitchen unattended.
- Left to care for a younger child.
- Out of your sight in a public setting.
- Left alone in a car.

SCHOOL AGED CHILDREN MAY NOT BE:
- Left alone in a car.
- Allowed to ride in a car without a seat belt (or booster seat until they are age 9 or are 4 feet 9 inches tall).
- Allowed access to chemicals or medical products.
- Left to care for younger children.
- Alone in the home overnight.
- Left alone at a store or mall.
- Left alone with other children at home or in public.
- In the park without adult supervision.
- Allowed to use the internet unsupervised. See Internet and Foster Children.

TEENAGERS MAY NOT BE:
- Allowed to ride in a car without a seat belt.
- Left alone overnight.
- Allowed to spend the night with a friend without prior permission from the child’s placing worker.
- Left to care for younger children if you are unsure of their capabilities.
- Allowed to babysit other foster children.
- Left to select music and videos or use the internet without adult supervision.
- Allowed to spend the day alone without you knowing specifically where they are.

Supplemental Security Income (SSI)
If you are receiving any other funding for your foster child, such as Supplemental Security Income (SSI), you must report this so that foster care reimbursement can be adjusted accordingly. You may not receive income from more than one source for a foster child and Hennepin County should be the representative payee for all Social Security benefits for a foster child. Accounting will contact you to work out a repayment plan if an overpayment has occurred.

Support Groups
Ask your licensing worker or check the Essentials foster parent Email newsletter for information about foster parent support groups.
Television and Video Games

- Monitor what your foster children are watching and playing.
- Keep televisions and internet access out of your foster children’s bedrooms.
- Limit foster children’s television viewing and video game playing time.
- Turn off the television during meal times.
- Ban any programs, music and video games that you find offensive.
- Lower the volume or turn off the television during social worker visits.

TELEVISION AND VIDEO GAME USAGE BY OTHER FAMILY MEMBERS OR BABYSITTERS

You are responsible to assure that foster children are not exposed to sexually explicit and/or violent materials.

EXPENSES FOR A TELEVISION MAY BE AUTHORIZED FOR A HOSPITALIZED FOSTER CHILD.

- Obtain prior permission from the child’s worker.
- If the child’s worker approves reimbursement, complete a Miscellaneous Expenditure Voucher and give it to the child’s worker within 30 days of expenditure.

Termination of Parental Rights (TPR)

Termination of parental rights is the result of a court order that ends the parental rights to that child and frees the child for adoption. TPR ends parental rights to visits unless otherwise ordered by the court. A TPR can be either voluntary or involuntary.

Training

Minnesota Department of Human Services Rule 2960 requires that foster parents receive training.

INITIAL TRAINING:

- Non-relative foster parents must complete a specific amount of training hours as determined by Hennepin County to be licensed.
- Initial training is required for relative providers who will be licensed as a child’s foster parent. This training for relatives must be completed within 30 days following the initial placement.
- Persons pursuing the Concurrent Families program are required to complete initial training as well as the Concurrent Families training session.

AFTER LICENSURE:

- Each foster parent must complete 13 hours of training per year after initial licensure. After the first year of licensure, each foster parent must complete 12 hours of training per year.
- Initial training does not count towards these annual hours.
- At least 5 of the 12 hours must be sponsored by the agency or the Foster Care Association. (Trainings must be in a classroom setting).
- At least 5 of the 12 hours must be related to the special needs of the foster children.
- At least 1 hour of the 12 hours must be approved mental health training.
- At least 1 hour of the annual hours must be approved Fetal Alcohol Spectrum Disorder (FASD) training.
- No more than 6 training hours per year may be from the following: a maximum of 3 hours from videos or books, and a maximum of 3 hours from individual training such as special staffing or meetings about a child in your care.
- There is no carryover of training hours into the next year.
- If foster parents have not completed the required annual training at the time of relicensure/annual review and does not show good cause why the training was not completed, foster parent may not accept new foster children until the training is completed. They may also receive a Correction Order.
- You may attend a foster care/adoption support group sponsored by Hennepin County, you will receive 1 hour credit per attendance and up to 3 hours per year.

**MEDICAL EQUIPMENT TRAINING**
Foster parents who care for children who rely on medical equipment to sustain life or monitor a medical condition must meet the requirements of Minnesota Statutes, section 245A.155. See Medical Equipment.

**CAR SEAT TRAINING**
This training is required every five years for foster parents taking children under the age of nine. The training must be done by a certified Department of Public Safety trainer. Babysitters and others who help transport foster children under age nine on a consistent basis are required to complete this training and may attend the training at no charge.

**SUID/AHT TRAINING**
SUID/AHT training is required for families taking infants and children through age 5. Babysitters and others who help care for foster children through age 5 and under are required to complete this training and may attend the training at no charge.

**MENTAL HEALTH TRAINING**
Each provider must have two hours of mental health training in order to be licensed, and all licensed foster parents must receive one hour each following year. Trainings that meet the mental health requirement are listed in the foster parent newsletter, the Essentials Email newsletter.

**FETAL ALCOHOL SPECTRUM DISORDER (FASD TRAINING)**
FASD training is not required at initial licensing, however, all licensed foster parents must complete 1 hour of FASD training within the first year after initial licensure. Foster parents must also complete 1 hour of training each following year.

**TRAINING RESOURCES**
Consult with your licensing worker concerning other training options, as you are not limited to the following training resources. Training topics should be related to understanding and living with children, especially foster children, and must be consistent with Rule 2960.
- Classes organized by the agency specifically for foster parents. These are free of charge and announced in Essentials Email newsletter or a training flyer.
- Agency-sponsored support groups.
- College courses.
- Community education classes.
- Classes offered by churches.
- Classes offered by private agencies.
- Foster Care Association Meetings (count only speaker’s time).
- Foster Care Association and other Conferences (count only workshop time).
- PTA meetings (count only speaker’s time).
- Red Cross classes.
- Special staffings or meetings about foster children in your care. Limit of 4 hours per year from this category.
Cancellations will be announced on the training phone line by 5:00 p.m. for evening classes, and 8:00 a.m. for Saturday classes. See Where to Call.

**RECORDING YOUR TRAINING HOURS**
- You are responsible for noting your training hours on the Provider Record of Training form mailed to you prior to your annual review or relicensing.
- Questions about training and reimbursement can be directed to the foster care training coordinator. See Where to Call.

**Transfer of Permanent Legal and Physical Custody (TPLPC)**

A transfer of permanent legal and physical custody is a legal action that takes place in juvenile court. A court order is issued, transferring a child’s custody from birth parents to another person.

- Foster parents are included in the definition of kin. This allows foster parents who are not related to their foster child to be considered for and accept a TPLPC.
- Relatives/kin who have a TPLPC have the right and responsibility to make decisions regarding the child’s care, education, medical treatment and upbringing. If the child develops mental health issues or behavioral problems, that relative/kin is responsible for seeking treatment for the child. The relative/kin with the TPLPC is responsible for that child until the child reaches the age of majority.
- When the TLC is granted, the birth parent-child relationship remains intact. The parent retains the right to access information, notification of accidents or serious illnesses, etc. The court may order visits between the parent and the child if visitation would be in the child’s best interest.
- If the relative/kin has been given permanent legal and physical custody by court order, it can only be taken away by another court order.
- The TPLPC court order is filed in family court, where any visitation disputes or other modifications in custody would be heard.
- When relatives/kin accept a TPLPC of a child, they may be eligible for Northstar Kinship Care Assistance. See *Northstar Kinship Care Assistance*.
- Relatives/kin who have accepted a TPLPC of a child are not eligible for foster care reimbursement for that child.
- Relatives/kin with a TPLPC may pursue financial support from the birth parent through child support actions.
- If a foster parent accepts a TPLPC of a child:
  - The child is now considered the same as a birth or adopted child for licensing purposes. You will be asked to provide a school report, and both you and the child sign for juvenile background checks to be completed on the child beginning at age 13.
  - If the child has serious behavior problems that could be a threat to the safety of other children in your home, this will affect your ability to have foster care placements in your home.

**Transportation**

Prior to accepting a child for placement, you must discuss with the child’s worker:

- Your responsibilities for transporting each child to family visits. As an example, if the child is to visit both parents, do the parents visit together at one visit or at two separate visits? If the child is to visit with siblings, does the child visit with the siblings all in one visit or in separate visits?
- How often the child needs transporting to counseling appointments and where are those appointments.
If the child has any unusual medical and or dental needs. If so, how often are the appointments and where are they?

If you sign the Out of Home Placement Plan, you must fulfill your listed responsibilities. If you have any questions about what is being asked of you, call your licensing worker before signing the Out of Home Placement Plan.

After you sign the Out of Home Placement Plan listing the number of visits you are responsible for, the child’s worker may ask you to do additional visits or additional transportation if the court orders them. We encourage you to be flexible. If transporting to the additional visits fits with your responsibilities to other foster children in your care and your own family’s needs, it would be greatly appreciated. The child’s worker would then revise the next Out of Home Placement Plan to reflect the increased number of visits, and you would sign the revised copy.

See Visits.

All foster parents are expected to transport children as part of regular care. The monthly foster care reimbursement amount includes routine transportation for children. Routine transportation includes transporting the child to and from:

- Day care.
- Medical and dental appointments. (Reimbursement is available for mileage and parking expenses for foster children’s medical, dental and therapy appointments, this is arranged through MNNET. Taxi fare is reimbursable only if approved in advance by the placing worker.) See Medical Coverage.
- Other appointments you agreed to in the Out of Home Placement Plan. See additional information on page 38.
- Respite.
- School activities, open houses and conferences.
- School transportation reimbursement may be available. Ask your licensor for further information.
- Therapy appointments.
- Visits with parents, siblings or other family members.

Vacations

- Obtain permission from the child’s worker before taking the child on any trip, in or out of state, even on an overnight.
- You may be eligible for up to $15 per day for up to 21 days per year if you take a foster child with you on a family vacation.
  - This would be in addition to your ongoing foster care rate.
  - You must receive prior authorization from the child’s worker.
    - If the child’s worker approves reimbursement, complete a Miscellaneous Expenditure Voucher and give it to the child’s worker within 30 days of expenditure.
    - If you are unable to include your foster child in your vacation plans, discuss respite care with the child’s worker and your licensing worker well in advance. See Respite.
- Respite requests will not be approved during the last two weeks of December. It is very difficult for foster children to be placed in respite during the holidays. It is also hard to find respite families during this time.
**Visitation Centers**

Visitation Centers are staffed with family workers who guide parents in nurturing, communication and building self-esteem in their children. When transporting foster children to visits at a visitation center, note the following expectations:

- **Arrive on time.** Visits are scheduled back to back. If you arrive late, center staff cannot guarantee the visit will be extended to give parents their time.

- **You must wait 15 minutes past the scheduled time for parents to arrive.** Parents are often using public transportation or depending upon others for rides. After 15 minutes, you may choose to wait longer or to leave. Email the placing worker to inform them of the outcome of the visit. Also complete an Incident Report form.

- **Children, regardless of their age, must be delivered to and picked up from a Visitation Center staff person.** Staff cannot be expected to come out to your car, but they will be flexible in unique circumstances depending upon how busy the center is.

- **Call the center if you are not coming or if you will be late for the scheduled visit.**

- **Visitation centers are not equipped with all the essentials that the child may need.** When dropping off the child please have extra outfits, diapers, wipes, formula, bottles, any ointments that the child uses and a few healthy snacks (unless food is being provided by the birth parents). Also include any medical essentials such as inhalers. In addition, include a plastic bag so that clothing items that the child used (dirty) can be placed in it.

**Visits**

Prior to accepting a placement, ask the child's worker:

- **What is the visitation schedule?**

- **Who will visit?**

- **Who arranges the visits?**

- **Where are the visits held?**

- **What is required from me regarding transportation for the visits?**

- **All visitation and phone calls with parents must be approved by the child’s worker and in accordance with the Out of Home Placement Plan and/or court orders. Do not allow unauthorized parental or other visits.**

- **Foster parents are not expected to supervise visits.** If a visit needs to be supervised, the child’s worker will make arrangements for the supervision.

- **Some visits take place in a supervised setting.** In some circumstances, foster parents will be asked to accommodate visits in their home. Foster parents are not required to allow visitation in their home, but failing to allow this may affect the placements they receive. Visits may sometimes be arranged at the child’s parent’s home or a neutral setting.
Birth parents have lost much of their control over their children, so they may ask you to dress the child in a particular outfit or to style the child’s hair in a particular way. If possible, try to accommodate these requests. Giving the parent an opportunity to have this input can go a long way in developing a trusting relationship.

Do whatever you can to help make the visit a positive experience, even if the child seems confused and upset about the visit. Send along enough formula and diapers for the time a child using these items is on a visit. It is not uncommon to see an increase in a child’s negative behaviors following a visit. Report to the child’s worker any issues surrounding visitation, such as emotional or behavioral changes.

Call the child’s worker and your licensing worker if a child returns from a visit with injuries. Complete an Incident Report.

Please note: Visits may change over time.

VISITS WITH SIBLINGS
When it is not possible to place siblings together, the child’s worker may ask you, as part of the case plan, to arrange visits or outings with the foster parents of your child’s siblings.

Vouchers
See Financial Information.

WIC (Women, Infant and Children Program)
- Foster children under the age of five may be eligible for WIC.
- WIC provides vouchers for free food including formula, cereal, juice, milk, eggs and peanut butter or beans.
- If the foster child meets initial requirements, you will be asked to bring the child to a WIC clinic for an assessment to determine final eligibility.
  See Where to Call.
Agreement Between Foster Parents and Placement Agency

In Minnesota, the local county/tribal social service agency is responsible for providing child welfare services. In many cases, the court system has oversight responsibility for foster care placement and permanency outcomes. When children are placed in foster care, their parent(s), the responsible agency (county or tribal agency that has responsibility for placement), the licensing agency and foster parents, all must work together to ensure a foster child’s well-being, safety and plan for permanency. This means all standards and policies set forth by law, and by the commissioner of the Minnesota Department of Human Services, are understood and met. In some cases, the responsible agency and the licensing agency will be different. A summary of the responsible agency requirements is explained in DHS-0199A.

This agreement between foster parents and the licensing agency outlines their respective responsibilities.

Foster care licensing agency agrees to:

1. Assist prospective foster parents with the licensing process to:
   * Provide information about family foster care standards and licensing requirements
   * Consider and process variance requests
   * Help foster parents complete the background study process
   * Make home visits to complete the home study assessment.

2. Provide orientation and ongoing opportunities for training for foster parents that prepares them to meet the needs of foster children.

3. Provide Minnesota’s Reasonable and Prudent Parent Standard Guidance and training for foster parents to gain skills and knowledge in applying the reasonable and prudent parent standard when considering a foster child’s participation in age- or developmentally appropriate activities.

4. Describe the state’s liability insurance coverage provided for all licensed foster parents caring for children.

5. Help foster parents make informed decisions as to the suitability of their home to care for a specific child before placement.

6. Help foster parents understand that a decision not to take placement of a specific child will not jeopardize their license, or consideration of their home for other children.

7. Investigate alleged licensing violation reports to determine if requirements are being met.

8. Provide foster parents with written and verbal opportunities to evaluate licensing agency practices.

9. Include foster families in annual evaluations regarding their roles and responsibilities, and their need for support, during and after children’s placements.

Foster parents agree to:

1. Allow representatives of the responsible social services agency, licensing agency and/or commissioner of the Minnesota Department of Human Services, access to their home and property for the purpose of licensing, placement and supervision.

2. Consider foster care a temporary living situation for a child and recognize that the county or tribal agency is responsible for making and carrying out the service and concurrent permanency plan for a child. This includes supporting reunification with the child’s parents or transition to a relative or non-relative foster home.

3. Accept children for foster care placement as described in the statement of intended use.

4. Actively cooperate and participate with the responsible agency case manager and other appropriate professionals to develop and implement a child’s out-of-home placement plan (OHPP). Preserve family relationships, including visitation as directed by the case manager or OHPP.
5. Provide for the needs of child, including food, clothing, shelter, daily supervision, school supplies, personal needs and, consistent with the OHPP, provide timely access to medical and dental care, including prescription medications and mental health services by qualified professionals.

6. Develop a plan for a smoke-free home environment for foster children.

7. Provide supervision in accordance with a child’s age and needs, as assessed in the Minnesota Assessment of Parenting for Children and Youth (MAPCY).

8. Immediately report a missing foster child to the responsible county or tribal agency and law enforcement.

9. Report to the responsible agency plans to take a child out of the state, when a child will be away from the foster home for longer than three nights, any changes in household members or plans to move, any serious family illness, and any serious illness or accident involving a foster child.

10. Make every effort to increase understanding of, and respect for, the religious, racial and cultural heritage, and sexual orientation and gender identity of a child and their family.

11. Acknowledge the effect of trauma and the difficulties a foster child may experience adjusting to a new environment. Make every effort to understand and be patient in addressing challenging behaviors of a child that result from the impact of trauma, separation and the grieving process. This may include participation in therapy and other services, as directed by the OHPP or arranged by the responsible county or tribal social service agency.

12. Apply the prudent parent standard and support a foster child’s participation in extracurricular, social and cultural activities typical for the child’s age, or are developmentally appropriate.

13. Ensure a child’s personal property and funds in the foster home are available for their use, unless restricted in child’s OHPP. If a child is removed from the home, their property and funds, including any that were accumulated during placement, are returned within three days of removal.

14. Support placement stability for a foster child by asking for consultation and direction from the responsible agency if issues arise that cannot be resolved between foster parents and foster child. Prior to requesting removal of a child, foster parents must work with the responsible agency to determine if additional strategies or support services may resolve issues leading to the request for removal. When all resources are exhausted, provide the responsible agency with sufficient time (45 days, if possible) to plan for discharge.

15. Allow the responsible agency caseworker and child opportunities to meet alone.

16. Comply with requirements of the Family Foster Care Confidentiality Agreement, Attachment A, which is incorporated into this agreement.

By signing below, I, as the applicant or licensed foster parent, acknowledge that I have read this document and understand my responsibility to maintain confidentiality of the information provided to me regarding the foster child(ren) in my care. I also acknowledge that I have been provided a copy of this document.

We understand the policies and practices and our respective roles. We agree to carry out our responsibilities and comply with requirements in Minnesota Statutes and Rules at all times while providing foster care to children.

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Attachment A: Child Foster Care Confidentiality Agreement

A. The foster parent, having access to not public information* about a foster child and their family agrees not to discuss or otherwise disclose that information to any other person prior to child’s placement in foster care, while they are in the foster home, or after they leave the foster home, except to the following:

1. The licensing agency.
2. The responsible social services agency.
3. Those involved in child’s treatment plan.
   Foster parents must identify and share information, if appropriate, with persons who are directly involved in child’s treatment plan. A treatment plan is a written plan for intervention, treatment, and services for a child in a foster setting.
4. Child’s respite care and substitute care providers, and short-term babysitters. Foster parents must give these providers information needed to care for a child, including their emotional, behavioral, medical and physical health conditions; medications child takes; and the names and telephone numbers of individuals to contact in case of an emergency, including how to obtain medical care.
5. Child’s medical and dental care providers. When foster parents obtain either routine medical and dental care for a child, or emergency care, they may share or obtain necessary information.
6. Foster child’s child care providers. When foster parents enroll a child in a child care program, they may communicate to the provider necessary information to care for a child, including information required in an application to the child care program.
7. Child’s education professionals. When foster parents enroll a child in school according to their OHP, foster parents may communicate to school staff necessary information to educate the child, including information required for enrollment in school.
8. Child’s extracurricular, social, or cultural activity programs. When foster parents sign up a child for extracurricular, social, or cultural activities under the reasonable and prudent parenting standard, they may communicate to organization staff necessary information for a child to be signed up for, and participate in an activity.

B. Foster parents agree not to share any nonpublic information about a foster child and their family with neighbors, family members of foster parents who have not been approved by the responsible agency to receive information, or others who do not provide services or care to a foster child. Foster parents agree not to share nonpublic information about a foster child and their family on social media, unless otherwise approved by the responsible agency.

C. Foster parents agree that if they are unsure about any restriction of information, how to maintain written records related to a foster child and record retention, they will discuss these questions with the county or tribal agency that has responsibility for placement.

* As defined by Minnesota Statutes, Chapter 13.
Civil Rights Notice

Discrimination is against the law. The Minnesota Department of Human Services (DHS) does not discriminate on the basis of any of the following:

- race
- creed
- color
- religion
- national origin
- sexual orientation
- public assistance status
- marital status
- age
- disability
- sex
- political beliefs

Civil Rights Complaints

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by a social services agency.

Contact DHS directly only if you have a discrimination complaint:

Civil Rights Coordinator
Minnesota Department of Human Services
Equal Opportunity and Access Division
P.O. Box 64997
St. Paul, MN 55164-0997
651-431-3040 (voice) or use your preferred relay service

Minnesota Department of Human Rights (MDHR)

In Minnesota, you have the right to file a complaint with the MDHR if you believe you have been discriminated against because of any of the following:

- race
- sex
- color
- sexual orientation
- national origin
- marital status
- religion
- public assistance status
- creed
- disability

Contact the MDHR directly to file a complaint:

Minnesota Department of Human Rights
Freeman Building, 625 North Robert Street
St. Paul, MN 55155
651-539-1100 (voice)
800-657-3704 (toll free)
711 or 800-627-3529 (MN Relay)
651-296-9042 (fax)
Info.MDHR@state.mn.us (email)

U.S. Department of Health and Human Services’ Office for Civil Rights (OCR)

You have the right to file a complaint with the OCR, a federal agency, if you believe you have been discriminated against because of any of the following:

- race
- disability
- color
- sex
- national origin
- religion
- age

Contact the OCR directly to file a complaint:

Director
U.S. Department of Health and Human Services’ Office for Civil Rights
200 Independence Avenue SW, Room 509F
HHHH Building
Washington, DC 20201
800-368-1019 (voice)
800-537-7597 (TDD)
Complaint Portal: https://www.hhs.gov/ocr/portal/lobby.jsf
Summary of Child Foster Care Responsible Agency Requirements

A county or tribal agency must have placement responsibility for a child's foster care placement. This may be a court order or a voluntary placement agreement. The responsible agency's role and responsibility is determined in law and tribal code, and is reviewed in court. The following applies to most placements:

1. Consider foster care a temporary living situation for a child. The responsible agency's plan for a child to be safely reunited with their parent(s) and at the same time seek other families, first considering relatives and kin, to permanently care for a child if they cannot return home because of safety concerns.

2. Diligently search and notify a child's maternal and paternal relatives and kin of their need for foster parents. The agency will search for and notify relatives until the court is satisfied with agency efforts.

3. Place a child with their siblings. If siblings cannot be placed together, the agency must ensure that they have regular visitation and contact.

4. Provide foster parents with information about a child before placement as part of the out-of-home placement plan (OHPP), or as information becomes available, including:
   - The reason(s) foster care is needed.
   - The permanency plan for a child.
   - A child's medical history, immunization record, or any other medical or dental needs
   - A child's educational needs and school enrollment.

5. Include foster parents in development and implementation of the OHPP, assessing and including services needed in the foster home to ensure a child's well-being, and supporting placement stability. Foster parents must be provided with a copy of the OHPP.

6. Send foster parents written notice of all administrative review and/or court hearings, and ensure that they are aware of their right to attend court hearings and their right to be heard.

7. Visit a child monthly, with a majority of those visits to take place in the family foster home. These visits support placement stability and help a child and their foster parents address any problems they may be having. These visits should:
   - Assess a child's daily needs and foster parent concerns about a child's behavior and development to ensure their needs are safely being met in the home, as well as the need for additional services.
   - Ensure a child's health needs are met.
   - Ensure that child is attending school.

8. Explain the importance of family visitation to develop or preserve a child's bond with their parents and siblings, and establish a visitation plan that schedules visits so a child's parent(s), foster parents, and child can plan accordingly. Help foster parents understand that visitation may affect a child's behavior, and assist them to develop strategies that will support a child to maintain relationships with their parent(s) and siblings.

9. Inform foster parents about NorthstarCare for Children. The agency assesses every child entering foster care for a basic and supplemental payment using the Minnesota Assessment of Parenting for Children and Youth (MAPCY). Provide a copy of “What is the MAPCY assessment?” (DHS 7060). This assessment is not used to determine whether a child is in need of adoption services.

10. Ensure that a child's educational and health care needs are assessed and identified for appropriate services. This includes physical, mental, chemical, developmental, dental, and vision needs, as follows:
   - Provide clear instructions to foster parents in the OHPP about their role and responsibility in meeting a child's health care needs while in their care.
   - Involve a child's parent(s) in planning for their education and health care. The parents make educational and treatment decisions unless parental rights have been terminated, or the court has restricted parents' involvement.
   - Provide foster parents with information necessary to enroll a child in school, as well as in the free and reduced lunch program, and similar programs.

11. If a foster parent asks the responsible agency to remove a child from their home, prior to removal they and the agency staff will work together to determine if additional supports or services can safely maintain a child in the home. A foster child experiences an unplanned move only when an agency is concerned about their health or safety, or when all resources to support placement stability have been exhausted. Unless agency staff determines that there is an issue that affects a child's health or safety, it will remove a child from the foster home within 45 days of a request.
Agency Use: Enter a contact number that can assist with a request to interpret this document.

Attention. If you need free help interpreting this document, call the above number.

For accessible formats of this publication, ask your county worker. For assistance with additional equal access to human services, contact your county’s ADA coordinator. (ADA [9-15])
Child Safety Agreement

HENNEPIN COUNTY
HUMAN SERVICES AND PUBLIC HEALTH DEPARTMENT
CHILD FOSTER CARE LICENSING PROGRAM

CHILD SAFETY AGREEMENT

Applicant / Provider Name: ______________________________ Provider Number: _______________

Licensing Social Worker: ______________________________ Date: __________________

 Discipline
The license holder must consider the child’s abuse history and developmental, cultural, disability, and gender needs when deciding the disciplinary action to be taken with the child. Disciplinary action must be in keeping with license holder's discipline policy. The discipline policy must include the requirements in items A and B.

A. Children must not be subjected to:

(1) corporal punishment, including, but not limited to: rough handling, shoving, ear or hair pulling,
shaking, slapping, kicking, biting, pinching, hitting, throwing objects at the child, or spanking;

(2) verbal abuse, including, but not limited to: name calling; derogatory statements about the child or
the child's family, race, gender, disability, sexual orientation, religion or culture; or statements
intended to shame, threaten, humiliate, or frighten the child;

(3) punishment for lapses in toilet habits, including bed wetting and soiling;

(4) withholding of basic needs, including, but not limited to: a nutritious diet, drinking water, clothing,
hygiene facilities, normal sleeping conditions, proper lighting, educational services, exercise
activities, ventilation and proper temperature, mail, family visits, positive reinforcement, nurturing, or
medical care. However, a child who destroys bedding or clothing, or uses these items to hurt the
child’s self or others, may be deprived of such articles according to the child’s case plan;

(5) assigning work that is dangerous or not consistent with the child’s case plan;

(6) disciplining one child for the unrelated behavior of action of another; except for the imposition of
restrictions on the child’s peer group as part of a recognized treatment program;

(7) restrictions on a child’s communications beyond the restrictions specified in the child’s treatment
plan or case plan, unless the restriction is approved by the child’s case manager; and

(8) requirements to assume uncomfortable or fixed positions for an extended length of time, or to
march, stand, or kneel as punishment.

B. The license holder:

(1) must not require a child to punish other children:

(2) must follow the child’s case plan regarding discipline;

(3) must not use mechanical restraints or seclusion, as defined in part 2560.3010, subpart 38, with a
foster child:

(4) must ensure that the duration of time-outs is appropriate to the age of the child; and

(5) Must meet the requirements of part 9525.2700, subpart 2, item F, regarding the use of aversive or
deprivation procedures with a foster child who has mental retardation or a related condition.

OVER
I have reviewed the provisions of the rule prohibiting abuse (Minn. Rule 2960.3080 subp 8) with my foster care worker, and understand that I am required to follow it.

I plan to use the following discipline techniques:

______________________________

______________________________

______________________________

Smoke Free Environment
260C.215 subd 9 [SL Chp 201 A 1 S 9] Second Hand Smoke – Preventing exposure to secondhand smoke for children in foster care. (a) A child in foster care shall not be exposed to any type of secondhand smoke in the following settings: (1) a licensed foster home or any enclosed space connected to the home, including a garage, porch, deck, or similar space; or (2) a motor vehicle while a foster child is transported. (b) Smoking in outdoor areas on the premises of the home is permitted, except when a foster child is present and exposed to secondhand smoke.

My plan for maintaining a smoke free environment:

______________________________

______________________________

______________________________

FOSTER PARENT GUIDE
I also acknowledge that I have a copy of the current Foster Parent Guide on the date signed below. I realize that I am responsible for complying with all the information in the Foster Parent Guide. I understand that if I have any questions about the information in the Foster Parent Guide that I will discuss them with my Licensing Worker.

Applicant

______________________________

Co-Applicant

______________________________

Licensing Worker

______________________________
Daily basic rates and MAPCY Supplement Level Rates

2017-2018 FOSTER CARE RATES

Northstar is the program that sets the rates for foster care, adoption assistance and kinship assistance for children being placed in the foster care system after January 1, 2015.

BASIC MAINTENANCE RATES

The basic maintenance payment rates to be paid to child foster care parents, adoptive parents, relative custodians or to youth 18 years old or older and under age 21 in extended foster care who are eligible for Northstar Care for Children benefits, including those placed in unlicensed supervised independent living settings, effective July 1, 2017 through June 30, 2018 are as follows:

<table>
<thead>
<tr>
<th>Child’s Age</th>
<th>Monthly Basic Rate</th>
<th>Daily Basic Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 – 5 years</td>
<td>$ 650</td>
<td>$ 21.37</td>
</tr>
<tr>
<td>6 – 12 years</td>
<td>$ 770</td>
<td>$ 25.32</td>
</tr>
<tr>
<td>13 – 20 years</td>
<td>$ 910</td>
<td>$ 29.92</td>
</tr>
</tbody>
</table>

This rate is intended to reimburse foster parents for the costs of meeting the needs of foster children.

THIS INCLUDES:

- A BED for each foster child, a clean mattress that is in good condition, a PILLOW, SHEETS and BLANKETS.
- A DRESSER or some place for the child to put belongings. Age-appropriate TOYS and play equipment for physical, mental and social development.
- CAR SEATS that meet current federal safety regulations and are appropriate for the child’s age and weight.
- Three nutritionally balanced MEALS per day along with healthy SNACKS.
- A complete wardrobe of CLOTHING that is maintained as the children grow and the seasons change.
- Incidentals, such as GROOMING supplies, SCHOOL supplies, and routine TRANSPORTATION costs, non-prescription MEDICAL supplies, and money for RECREATION and leisure time activities.
- ALLOWANCE, if age appropriate.
- GIFTS for holidays and birthdays; TREATS and rewards.
A portion of the basic rate is intended to reimburse foster parents for increased household costs such as electricity and water.

Items such as furniture, car seats, over-the-counter drugs, toys and games, wear and tear or damage to your property are considered to be part of the basic foster care rate.

SUPPLEMENTAL LEVEL RATES
The supplemental level payment rates determined through the MAPCY assessment for children who are eligible for Northstar Care for Children benefits, including those placed in unlicensed supervised independent living settings, effective July 1, 2017 through June 30, 2018 are as follows:

<table>
<thead>
<tr>
<th>MAPCY LEVEL</th>
<th>Monthly Supplemental Rate</th>
<th>Daily Supplemental Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level B</td>
<td>$ 0</td>
<td>$ 0.00</td>
</tr>
<tr>
<td>Level C</td>
<td>$ 102</td>
<td>$ 3.35</td>
</tr>
<tr>
<td>Level D</td>
<td>$ 204</td>
<td>$ 6.71</td>
</tr>
<tr>
<td>Level E</td>
<td>$ 306</td>
<td>$ 10.06</td>
</tr>
<tr>
<td>Level F</td>
<td>$ 408</td>
<td>$ 13.41</td>
</tr>
<tr>
<td>Level G</td>
<td>$ 510</td>
<td>$ 16.77</td>
</tr>
<tr>
<td>Level H</td>
<td>$ 612</td>
<td>$ 20.12</td>
</tr>
<tr>
<td>Level I</td>
<td>$ 714</td>
<td>$ 23.47</td>
</tr>
<tr>
<td>Level J</td>
<td>$ 816</td>
<td>$ 26.83</td>
</tr>
<tr>
<td>Level K</td>
<td>$ 918</td>
<td>$ 30.18</td>
</tr>
<tr>
<td>Level L</td>
<td>$ 1,020</td>
<td>$ 33.53</td>
</tr>
<tr>
<td>Level M</td>
<td>$ 1,122</td>
<td>$ 36.89</td>
</tr>
<tr>
<td>Level N</td>
<td>$ 1,224</td>
<td>$ 40.24</td>
</tr>
<tr>
<td>Level O</td>
<td>$ 1,326</td>
<td>$ 43.59</td>
</tr>
<tr>
<td>Level P</td>
<td>$ 1,428</td>
<td>$ 46.95</td>
</tr>
<tr>
<td>Level Q</td>
<td>$ 1,530</td>
<td>$ 50.30</td>
</tr>
</tbody>
</table>

INITIAL CLOTHING ALLOWANCE
An initial clothing allowance is available based on the child’s individual needs during the first 60 days of the child’s initial placement into foster care. The county or tribal social service agency shall approve the initial clothing allowance consistent with the child’s needs. The initial clothing allowance must not exceed the monthly basic payment rate for the child’s age group. The initial clothing allowance rates effective July 1, 2017 through June 30, 2018 are as follows:

- Age 0 through 5 $ 650
- Ages 6 through 12 $ 770
- Ages 13 through 20 $ 910
Sample Voucher Invoice

Return To: 134 HSPHD Accounts Payables
A1300 Government Center
300 S Sixth St
Minneapolis, MN 55487-0134

Send To:

Voucher / Invoice
Cnty Vendor #: 29212 Phone #: (612) 276-9195
Additional Instructions:

Svc Arrangement #:
Cnty Contact:
Description: Cnty Contact Phone # (612)
Client Name:
Contract #:
Service: 181 - Child Family Foster Care
SSIS #:
Service Dates:
COA:

<table>
<thead>
<tr>
<th>Start Date:</th>
<th>End Date:</th>
<th>Rate:</th>
</tr>
</thead>
<tbody>
<tr>
<td># of Units:</td>
<td>Unit Type:</td>
<td>Day</td>
</tr>
<tr>
<td>Amount:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I/we declare under penalties of perjury that I/we are making the within claim; that I/we have examined said claim and that the same is just and true, that the money/service therein charged was actually paid/performed for the purpose therein stated; that the services charged are official and as such are allowed by law; and no part of said claim has been paid.

Client Signature: __________________________ Date: __________________________
Vendor Signature: __________________________ Date: __________________________
Cnty Worker Signature: __________________________ Date: __________________________
Cnty Supervisor Signature: __________________________ Date: __________________________

05/14/2015 - 04:11 pm  Page 1 of 1  Hennepin - SSIS
Children come to the attention of child protection

A report is made by a family member, community member or mandated reporter

Child Protection Screeners

Child Protection Investigation

The majority of children who come to the attention of child protection do not go into Out of Home placement

For those who do go into placement, this is the process

Indian Child Welfare Act (ICWA) and Child Services
Child Protection Field and Child Services

Tribal Revue

REUNIFICATION

- Termination of Parental Rights & Adoption
- Transfer of Permanent Legal and Physical Custody
- Long Term Foster Care for older children

CLOSED

A case may close at any time due to resolution of risk to the child and/or completion of the case plan

Adoption Resources Worker

Services Completed

Adoption
**Respite Provider / Substitute Caregiver Information Form**

**HENNEPIN COUNTY**
**HUMAN SERVICES AND PUBLIC HEALTH DEPARTMENT**
**RESPITE PROVIDER / SUBSTITUTE CAREGIVER INFORMATION**

1. **Provider Name:**
   - Provider Number: 

2. **Licensing Worker:**
   - Your Licensing Worker:
   - Date: 

3. **Date Respite Begins:**
   - Date Respite Ends:

**COMPLETE A SEPARATE FORM FOR EACH CHILD WHO WILL HAVE A RESPITE PROVIDER / BABYSITTER**

**RESPITE** is when you have a child placed out of your home for overnight care with another licensed foster care provider or when you have a substitute caregiver come into your home to provide 24-hour care for the foster child.

4. **CHILD INFORMATION**
   - **Name:** Charles Jones
   - **Nickname:** Charlie
   - **Birth Date:** mm/dd/year
   - **Gender:** 

   **Hennepin County Worker Names:**
   - Child Worker: Christine Cares
   - CP Worker: Juan Homes
   - Phone: U12-348-3333
   - Phone: U12-348-8283

   First Response (emergency number to be used evenings / weekends / holidays): (612) 821-4539

5. **ACTIVITIES, SPECIAL NEEDS, DIETARY NEEDS, HAIR & SKIN CARE**
   - **What activities does the child enjoy?**
   - **bicycling, music (listening), basketball, swimming**
   - **Does the child have special behavioral and/or emotional needs?**
   - **Yes**
   - **If yes, describe any behavior problems the child exhibits such as tantrums, head banging, sexually acting out, etc.:** has trouble sleeping. He will get up at night and look for food.
   - **Does the child have dietary needs?**
   - **Yes**
   - **If yes, list any special dietary needs the child has such as food allergies:** allergic to sesame seeds

6. **List foods the child enjoys:**
   - Pizza, spaghetti, hamburgers

7. **Does the child currently have any bumps, bruises or other physical problems?**
   - **Yes**
   - **If yes, describe appearance and location:** bruise/scrape on right knee

8. **What are the child’s skin & hair care needs? List any special products that should be used on the child’s skin or hair:**
   - n/a

9. **Child’s Daily Routine and Schedule:**
   - Up at 6, breakfast, school bus at 6:45 a.m. school til 3:30 p.m.
   - snack, fun activity, supper, homework, shower/bed by 8:30 p.m. Weekends more free time

10. **CONTACT PERSONS**
    - **Provide the name(s) and phone number(s) of people the child can contact:**
    - Sally Jones (mom)
      - Phone: U12-555-1234
    - Josie Betts (grandmother)
      - Phone: U12-555-4321

11. **APPOINTMENTS, VISITATIONS, ACTIVITIES FOR THE CHILD DURING THE RESPITE**
    - **With Whom**
    - **Date**
    - **Time**
    - **What For**
    - **Who transports**
    - **Who receives child**
    - **Address and phone**
    - Sally Jones mm/dd/yy 3:00 pm visit foster parent (you) CSW Christine Cares 925 Portland Ave So.
    - Dr. Lucy Cure mm/dd/yy 4:00 pm therapy foster parent (you) Dr. Lucy 2600 Bass Lake Road

**Original:** For Provider
**Copy:** For Person Providing The Respite
**This form must be submitted with the Miscellaneous Expenditure Reimbursement Request – HC 12284.**
11. **SCHOOL INFORMATION**

Complete this section if the child will be in school during the time of the respite.

- **School Name:** Waite Park School
- **Address:** 3222 34th Ave N.E.
- **Phone:** 612-789-0000

**Child's Grade:** 2nd

- **Yes**
- **No**

**Does the child need help with homework?**
- **Yes**
- **No**

**In a quiet room, parent needs to check:**

- **Yes**
- **No**

---

12. **MEDICAL INFORMATION**

- **Name of Primary Physician:** Dr. Dorothy Westin
- **Phone:** 612-555-1047

- **Name of Clinic:** Johnson St. Clinic
- **Address:** 3100 Johnson St. NE MPLS

- **Medical Plan:**
- **Medical Card Number:** 11223344

**Primary Hospital:** HCMC

**Does the child have medical needs?**
- **Yes**
- **No**

**Does this child use medical equipment or do you use medical equipment to assist the child?**
- **Yes**
- **No**

**Name of medical equipment:** Nebulizer

**Describe its use:** for asthma medication

---

13. **RESPIRE PROVIDER/SUBSTITUTE CAREGIVER**

- **Name:** Mary Jones
- **Address:** 3109 Ulysses St NE
- **Phone:** 612-555-3344

**Agency name if a licensed foster parent:** Hennepin County

- **Yes**
- **No**

**Foster child is under age six?**
- **Yes**
- **No**

If yes, I have completed SUID/AHT (Sudden Unexpected Infant Death and Abusive Head Trauma) training class within five years.

---

14. **Foster Parent Requesting Respite**

- **Name:** Your Name Here
- **Address:** 28012 McKinley Avenue NE
- **Phone:** 612-555-5566

**Emergency phone number where I can be reached during respite:** 612-555-4454

**I am requesting:**
- **out of home respite with another licensed foster care respite provider.**

**I have:**
- **shared with the substitute caregiver coming to my home the location of the fire extinguisher, first aid supplies, emergency and fire evacuation plans, discipline agreement, chemical use policy, information about child abuse and mandatory reporting laws, and will notify the child's worker as soon as possible in case of emergency.**

**provided to my licensing worker all written documentation of training needed by the substitute caregiver.**

**provided to my licensing worker the Foster Care Background Study Notice and Consent form HC13818 completed by the prospective substitute caregiver.**

I understand that my licensing worker must notify me that there is a current and completed background study from DHS on this substitute caregiver in my foster care file prior to the start of the respite.

**Signature:** Your Signature

**Date:** mm/dd/year

---

15. **RESPIRE PROVIDER/SUBSTITUTE CAREGIVER**

**Name:** Your Name Here

---

16. **RESPIRE PROVIDER/SUBSTITUTE CAREGIVER**

**Name:** Your Name Here

---

17. **Foster Parent Requesting Respite**

**Address:** 28012 McKinley Avenue NE

**Emergency phone number where I can be reached during respite:** 612-555-4454

**I am requesting:**
- **out of home respite with another licensed foster care respite provider.**

**I have:**
- **shared with the substitute caregiver coming to my home the location of the fire extinguisher, first aid supplies, emergency and fire evacuation plans, discipline agreement, chemical use policy, information about child abuse and mandatory reporting laws, and will notify the child's worker as soon as possible in case of emergency.**

**provided to my licensing worker all written documentation of training needed by the substitute caregiver.**

**provided to my licensing worker the Foster Care Background Study Notice and Consent form HC13818 completed by the prospective substitute caregiver.**

I understand that my licensing worker must notify me that there is a current and completed background study from DHS on this substitute caregiver in my foster care file prior to the start of the respite.

**Signature:** Your Signature

**Date:** mm/dd/year

---

Original: For Provider
Copy: For Person Providing The Respite * This copy must be submitted with the Miscellaneous Expenditure Reimbursement Request – HC12284.
LANDLINE EXCEPTION FOR FOSTER PARENTS

MN Rule 2960.3050, subp. 1 states there must be an operable phone located within the residence. I/we wish to have cell phone service in the home in lieu of a landline. Foster parent agrees to take responsibility for meeting all of the following conditions: (These conditions apply even if the foster child has his/her own cell phone)

1) The cell phone will always be charged and have minutes available, so foster child/ren can summon help in an emergency and have phone privileges as allowed by the caseplan.

2) Foster parent will ensure foster child/ren old enough to use a phone know the phone number and how to operate the cell phone.

3) The charged cell phone in the home will always be in a location accessible to foster children and any substitute caregivers.

4) Foster parent will verify that a signal is possible anywhere in the home (no “dead zones”).

5) Foster parent will confirm with the cell phone carrier that the phone has GPS capacity, so that Emergency Responders could locate the residence if 911 were called.

6) The cell phone must be kept in operable condition.

7) Foster parent is solely responsible for supervision of its use and any costs associated with maintenance/repair/replacement/additional charges.

8) If, for any reason, I/we cannot meet these requirements, I/we agree to obtain and maintain a landline in the home.

______________________________  ______________________
Foster Parent Signature                  Date

______________________________  ______________________
Foster Parent Signature                  Date
Foster Parents Can Be Paid Mileage and Parking for Medical Transportation!

What: Mileage, parking and bus fare can be paid

When: Doctor appointments
- Dental Appointments
- Therapy Appointments

Who: Reimbursement is for foster children on Medical Assistance (MA) or on a Prepaid Medical Assistance Plan (PMAP or HMO)

NEED TRANSPORTATION (medi-van or taxi) to get a foster child to a medical appointment: who you call depends on the child’s medical coverage.

- If a foster child is on a pre-paid medical assistance program (PMAP) call the child’s PMAP provider. The phone number is on the health insurance card. PMAP providers are:
  - Medica Choice: 952-992-2322
  - Metropolitan Health Plan: 800-647-0550
  - UCare MN: 612-676-6830
  - Health Partners Care: 952-967-7998

- If your foster child is on straight MA, call MNET (1-866-467-1724) at least FIVE DAYS prior to the appointment to arrange for a ride.

MNET needs to know:

- Foster child’s first and last name, date of birth, MA number;
- Name of the doctor, first and last, with correct spelling;
- Doctor’s complete street address, city, state, zip and phone number;
- Time of appointment;
- What the appointment is for. Be as specific as possible, e.g., if surgery, what type of surgery, or if follow up exam, for what;
- If anyone who is riding is pregnant (foster parent or foster child);
- If the foster parent will have anyone else with them other than the foster child with the medical appointment, transportation cannot be guaranteed for the extra children or adults. Therefore, the foster parent should try as much as possible to make different arrangements for other foster children rather than try to bring them along.

NEED MILEAGE OR PARKING REIMBURSEMENT if you drive a foster child to a medical appointment? Regardless of what medical coverage the foster child has:

- Call 1-866-467-1724 or 651-645-9254 to register each foster child and any new foster children.
- MNET will send you forms (logs).
- Send in one form per child each month to the address MNET provides.
COMPLETE ONLY IF YOU ARE PROVIDING THE RESPITE

HENNEPIN COUNTY
HUMAN SERVICES AND PUBLIC HEALTH DEPARTMENT
FOSTER CARE PROGRAM
MISCELLANEOUS EXPENDITURE REIMBURSEMENT REQUEST

<table>
<thead>
<tr>
<th>Child's Name</th>
<th>Case Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>IF MORE THAN 1 CHILD, WRITE NAME AND DOB BELOW.</td>
<td>Leave Blank if you do not know</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Case Worker</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>The worker of the child/children</td>
<td>The date you are completing the form.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Worker's Authorization Signature</th>
<th>Supervisor's Approval Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Licensor of foster parent using Respite.</td>
<td>Supervisor of the licensor</td>
</tr>
</tbody>
</table>

ATTACH RECEIPTS FOR APPROVED EXPENDITURES

ITEMIZE EXPENDITURES - Include dates of service, mileage, etc. | AMOUNT

1. Write Out of Home Respite on this line

2. Write the start and end date of the respite.
   LEAVE THIS

Full name of foster children and DOB. See Respite forms 1/2.

1. 

2. 

3. 

4. 

5. 

I hereby acknowledge receipt of the above services and/or commodities for the above-named child.

   Foster Parent providing the Respite
   Signature of Foster Parent

Foster parents are urged to submit this voucher as soon as possible to avoid delay in payment.

Return to:

Licensor of foster parent providing the Respite. Check for correct mail code.

Social Worker
Health Services Building - 10 MC960
525 Portland Avenue South
Minneapolis, MN 55415-1568

Write your name, address, and your provider number in this area.

While - Accounting
Yellow - Case File
HOW TO COMPLETE WHEN THE RESPITE IS IN YOUR HOME

HENNEPIN COUNTY
HUMAN SERVICES AND PUBLIC HEALTH DEPARTMENT
FOSTER CARE PROGRAM
MISCELLANEOUS EXPENDITURE REIMBURSEMENT REQUEST

<table>
<thead>
<tr>
<th>Child's Name</th>
<th>Leave blank if more than one child and write their names and date of birth below.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Worker</td>
<td>The name/s of the child's worker</td>
</tr>
<tr>
<td>Worker's Authorization Signature</td>
<td></td>
</tr>
<tr>
<td>Licensor of foster parent using Respite</td>
<td></td>
</tr>
<tr>
<td>Case Number</td>
<td>Leave Blank if you do not know.</td>
</tr>
<tr>
<td>Date</td>
<td>Date you are completing this form</td>
</tr>
<tr>
<td>Supervisor's Approval Signature</td>
<td>Supervisor of Licensor</td>
</tr>
</tbody>
</table>

ATTACH RECEIPTS FOR APPROVED EXPENDITURES

ITEMIZE EXPENDITURES - Include dates of service, mileage, etc. | AMOUNT

1. Write In-Home Respite for total number of children. Example- In-home respite for 3 children

2. Write the total number of Respite days used and the dates.
   Example- 5 days of Respite used


   Leave This Area Blank

Write the names and date of birth of the children.

I hereby acknowledge receipt of the above services and/or commodities for the above-named child.

Sign your name.

Signature of Foster Parent

Foster parents are urged to submit this voucher as soon as possible to avoid delay in payment.

Return to:

Your Foster Care Licensor.

Social Worker
Health Services Building - 10 MC9800
525 Portland Avenue South
Minneapolis, MN 55415-1569

White - Accounting
Yellow - Case File