

HENNEPIN COUNTY
HUMAN SERVICES

Hennepin County Foster Parent Guide



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Hennepin County
Children and Family Services
Foster Care Licensing

hennepin.us/fosterparents



Hennepin County Foster Parent Guide

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How to use this guide

As a foster parent, you do so much to support children and families in our community.

This guide contains important information about foster care requirements, expectations, and policies, as well as guidance to help you best meet the needs of foster children and youth.

If you are viewing on screen, click on an entry in the contents (page 2–3) to be taken to that page. Clicking on the footer will take you back to the contents page.

The most current version of this guide will be available at hennepin.us/fosterparents.

If you have questions about any of the content, ask your licensor.



Thank you for the commitment you've made to Hennepin County children and families.

Where to call



County (including workers' phone numbers)	612-348-3000
Emergencies after hours (evenings, weekends and holidays)	612-348-3552
To report abuse or neglect, call Child Protection	612-348-3552
Training coordinator, class registration and class cancellations	612-348-5840
Accounting problems or billing questions	612-348-3445
Cope (mental health emergencies)	612-596-1223
Family Response Stabilization Service (immediate in-person support, 10 a.m.–10 p.m. daily)	612-979-9511
Front Door (voluntary Hennepin County social service programs and connections to community organizations)	612-348-4111
Inquiries about becoming a foster parent	612-348-KIDS (5437)

Other important phone numbers

Juvenile Court information	612-348-5089
Office of the Foster Youth Ombudsperson	651-946-2940
Minnesota Joint Underwriting Association	651-222-0484
Minnesota Non-Emergency Medical Transportation (Mn NEMT)	1-866-467-1724
Office of the Ombudsperson for Families	1-888-234-4939
U.S. Consumer Product Safety Commission	1-800-638-2772 www.cpsc.gov
WIC (Women, Infants & Children— Special Supplemental Nutrition Program)	612-348-6100

Health care phone numbers

Medical EVS — Eligibility Verification System	651-431-2670
Prepaid Medical Assistance Programs (PMAP):	
Hennepin Health Plan	1-800-HHP-0550
U Care Minnesota	612-676-3200
Blue Plus	651-662-6013
Health Partners Care	952-967-7998
Medica	1-800-373-8335
Managed Health Care Advocates Hotline	612-596-8860



Every child needs a safe, stable and nurturing environment to reach their full potential. For children in foster care, all of the adults responsible for children's well-being must function as a team.

This section provides a brief description of the various team members involved when a child is in out of home placement. Primary members of the team include the foster child(ren), foster parent(s), Child Service Worker (CSW), Child Protection Social Worker (CPSW), and the Foster Care Licensing Social Worker (FCLSW). Secondary members may also have contact with you over the period of the child's placement.

Within 30 days of placement, some or all primary members of the team will meet in person to complete the following:

- The Minnesota Assessment of Parenting for Children and Youth (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 (OFPP) which identifies the goals and responsibilities of the parents, the child(ren), the child's worker and the foster parents. [See Out of Home Placement Plan.](#)

Primary members of the team

Foster children

- Foster children and youth have often been through a lot, including experiences of severe neglect, physical or sexual abuse, and exposure to other traumatic situations.
- Foster children typically need more supervision than their peers, particularly during the early phases of out of home placement.
- Some foster children may need to learn the basics of personal hygiene, social skills and daily routines. They may not have had the same experiences and opportunities as many other children their age.
- Children who have been sexually abused or neglected may have to learn appropriate ways to give and receive affection.
- Some, but not all, children who have been physically abused or neglected 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. It is important that foster parents understand their foster child's behaviors within the context of the trauma that they have experienced. Many foster children will benefit from therapy or other mental health services.
- Many 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.
- Many foster children are remarkably resilient. All foster children have their own strengths, talents and interests, and want trusted adults to help them pursue their dreams.

Parents

- Parents of children in foster care may be struggling with substance use, homelessness, emotional concerns, or mental health.
- Parents are expected to be working on a case plan to deal with the concerns that brought them into Child Protection so their family can be reunited.
- It is important to encourage and develop a working relationship with children's parents and, in some cases, extended families. Working together benefits the children placed in your home.
- 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 and empathy.
- Remember that your role is to care for the children placed in your home. Appropriate boundaries are essential to maintaining a healthy relationship with the children's families. If financial or emotional support is requested of you, direct the family member (parents or otherwise) to their assigned Child Protection Social Worker.
- Some parents of children with disabilities may utilize foster care as a resource 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 in:

1. The Hennepin County Foster Parent Guide
2. Minnesota Department of Human Services Rule 2960, foster care licensing rule
3. Agreement between Foster Parents and Placement Agency (DHS 0139)
4. Foster child's Out of Home Placement Plan; request a copy from the Child Protection social worker
5. Essentials, the Hennepin County foster parent email newsletter
6. All correspondence from Hennepin County

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.

- There may be many different social workers involved with your foster child and foster parents are expected to stay in communication with each of them.
[See Child Protection System.](#)

Foster care licensing social worker

- 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 set by the state and the county.
- Your licensing worker will get to know your family members' life experiences and lifestyle, and your thoughts and perspectives 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 together.

Your licensing worker is also responsible for conducting licensing complaint investigations. Licensors are prompted to complete an investigation when they observe something that may be in direct conflict with Rule 2960 or when a maltreatment report has been made.

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. Licensing social workers and foster parents are required to complete the necessary paperwork to ensure

licensing is completed in a timely manner and to ensure that the license remains in good standing. Teamwork with your licensing social worker is very important.

Child placing worker

When the county is working with parents to reunify a family, the Child Protection social worker is the primary child placing worker. Sometimes a child will also have a Child Services worker involved during that time to focus specifically on the child's needs.

If a parent's rights have been terminated ([See Termination of Parental Rights](#)), the Child Protection social worker may cease working with the parent and the primary child placing worker may be a Child Services worker, Children's Mental Health case manager, or Developmental Disabilities social worker, depending on the child's specific circumstances.

- The child's placing worker decides which of the referred foster families a child will be placed with.
- The child's placing worker will provide you with information about the child's needs and services.
- The child's placing worker is responsible for completing and sharing the Out of Home Placement Plan. [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 services, visits, haircuts, 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 and 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.

Additional members of the team

Placement support staff

During the first 30 days that a child initially enters out of home placement, this team of social workers is available to serve children. The goal of the placement support team is to ensure that there are no gaps in needed support at this critical point in time for children. The placement support team is there to increase information-sharing between parents and foster providers. They are available to make sure that children's immediate needs can be met during the transition into foster care. Placement support staff are only involved when the child has been placed by Hennepin County.

Placement coordination team

When children need placement in a non-relative home, the placement coordination team works with the child placing worker, licensors, and non-relative foster parents to identify the best placement option. The placement coordination team's goal is to make the best match possible between a child's needs and a foster provider's skill and capacity to meet their needs to prevent placement disruptions.

Kinship social workers

The role of the kinship worker includes:

- Completing a search for relative resource options, including other possible relative placement options. If you are a non-relative provider, a kinship search will occur simultaneously although the child(ren) may have a current placement in your home.
- In cases where a relative placement option exists, the kinship worker completes preliminary background screening, observes the relative's home, and completes emergency relative placement paperwork when the department has made the decision to place with a relative.

- Kinship workers then send the information on to a foster care licensing worker to continue with the licensing process.
- Kinship workers work to identify multiple extended family members and kin who could either be placement options for a child or who may want to be involved in a child's life.

Permanency resource workers

Permanency resource workers assist families with navigating the process of adoption following a termination of parental rights or a transfer of permanent legal and physical custody (TPLPC). This includes completing and submitting forms for Northstar Kinship Assistance or Northstar Adoption Assistance and understanding court processes. Permanency resource workers are also responsible for recruiting adoptive families when needed. Hennepin County Permanency Workers are available to assist only when the child was placed by Hennepin County. [See Northstar Care for Children.](#)

Children's Mental Health case managers and Developmental Disability case managers

- In some cases, children have unique needs that are best met when social workers who specialize in children's mental health or developmental disabilities are there to assist the team. A child placed in your home may work with one of these case managers in addition to other team members.

Extended Foster Care social workers

- When youth age 17 ½ are in foster care, they are referred to Extended Foster Care. Extended Foster Care is a support available to eligible foster youth after age 18. If you are caring for a youth who is nearing age 18, an Extended Foster Care worker will be assigned.



Help the kids in your care with basic needs, healthy behaviors, and appropriate boundaries. Children and youth build confidence and resilience with opportunities to learn and grow.

Prudent parenting

Federal and state law require that foster children be allowed to participate in the same socially and developmentally appropriate activities as their peers who are not in care.

The reasonable and prudent parent standard refers to careful and sensible parenting that maintains the safety, health, cultural, religious, and tribal values and best interest of a child, while encouraging emotional and developmental growth. A foster parent uses this standard when deciding whether a foster child may participate in a particular activity.

When considering the implementation of this standard, consider the following:

- 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 (e.g. camping, boating, swimming, movies, video games), school and extracurricular opportunities (e.g. sports, theater, band), overnights, and planned outings (e.g. sleep-over with friends), social media, driving, babysitting, attending college tours, and so on.

Supervision

In some cases, children who come into foster care may have had inadequate supervision in the past. They may have experienced neglect and may be used to parenting themselves or younger siblings. Some children may have self-care skills that are either delayed or advanced compared to their chronological age. Regardless, you must provide a high level of supervision to foster children in your care. Foster parents need to be able to adjust their expectations based on each individual child's unique needs.

Guidelines for supervision

Infants and young children 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
- Left in a highchair, swing, walker or other equipment unattended
- Left to care for a younger child
- Out of your sight in a public setting

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
- Left alone in the home overnight
- Left alone in a public setting without appropriate 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
- Left to care for younger children if you are unsure of their capabilities
- Allowed to babysit other foster children
- Allowed to spend the day alone without you knowing specifically where they are.

Transportation

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
- Other appointments you agreed to in the Out of Home Placement Plan. [See Out of Home Placement Plan](#)
- Respite

- School activities, open houses and conferences.
- Visits with parents, siblings or other family members.

Foster parents are expected to transport children to medical, dental and therapy appointments as well. Reimbursement is available for mileage and parking expenses for foster children's medical, dental and therapy appointments. This is arranged through MNET or the child's PMAP. Taxi fare is reimbursable only if approved in advance by the placing worker. [See Medical coverage.](#)

Planning for transportation needs

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

- Your responsibilities for transporting each child to family visits. For example, you should know if the child is to visit both parents, whether the parents visit together at one visit or at two separate visits, how frequent the visits will be, whether there are sibling visits and the frequency of them. [See Supervised Visits.](#)
- How often the child needs transporting to appointments for medical care or counseling/therapy.
- If the child has any unusual medical and or dental needs. If so, how often are the appointments and where are they?
- The Out of Home Placement Plan should outline your responsibilities regarding transportation and you should be asked to sign the Out of Home Placement Plan. 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 and consider supporting this transportation in the child’s best interest. 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.

Transportation assistance

There may be times where you have a conflict that prevents you from being able to provide transportation. If you will need assistance with transportation for a foster child, contact the child’s placing worker as soon as you can. In some cases, limited assistance may be available from county staff or contracted private transportation providers. If contracted transportation services are provided to a child in your home, it is important that you keep the information given to you about what company is providing the transportation in the event that you need to cancel a scheduled trip.

Overnights

Apply the reasonable prudent parenting standard when making decisions about allowing a foster child to spend a night away, with a friend or on an overnight extracurricular activity such as a field trip. Use the same good judgment in determining whether the setting is appropriate for an overnight and whether the child is mature enough. It is best practice to inform the child’s social worker whenever such plans are made.

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

When in the best interests of a child, the agency can authorize overnights outside of licensed homes as part of the case planning. This includes:

- Relatives who are interested in participating in the care and planning for a child and helping to maintain a child’s familiar and regular activities and contact with friends and relatives.
- Natural family support of a foster family.

Overnights are not considered respite care, and can’t be paid as respite, unless the child is staying overnight in a licensed foster home and the overnight was approved 10 days prior.

[See Respite and substitute care](#)

Diversity

Foster parents care for children from diverse cultural backgrounds. Consider how you can best support the cultural needs of the children in your home.

- Increase your knowledge of different cultural groups by attending community events and foster parent training sessions, and by developing connections with individuals from diverse cultures.
- Create an atmosphere in your home that reflects an appreciation of diverse cultures.
- Celebrate holidays and share foods enjoyed by different cultural groups.
- Take the time to learn about your foster children’s diverse background and experiences. Provide books, toys, music, food, and experiences that affirm the value of each child or youth’s unique cultural background, sexual orientation and gender identity.

Discipline

Foster parents must complete a Child Foster Care Discipline Policy, agreeing to abide by MR 2960.3080 Subp 8 about Discipline. [See Appendix B: Child Foster Care Discipline Policy.](#)

Sexual boundaries

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

Clothing

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, including a winter jacket, boots, snow pants, mittens, and scarf.

Clothing inventory

- Inventory children's clothing and belongings when they are placed in your home and when they leave.
- The inventory should include 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 the child.
- If an initial clothing allowance is approved, you will be issued a check for an appropriate amount to purchase the needed clothing.
- You are required to save the receipts and identify each item on the receipt.

The initial clothing allowance maximums change annually and are based on a child's age.

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 plan to care for a teenager, discuss clothing during the preplacement visit. Decide whether the child will shop for their own clothes, how often the child will be given money, and the amount to be given each time.

Foster Care Minimum Clothing Standard

Below 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 when they leave your home, whether the child is going to another foster home, relative, adoptive home or facility, or will be returning home or living independently.

Infants (under 12 months)

- 7 – 10 outfits/pajamas
- 7 onesies or t-shirts
- 1 pair of shoes
- 1 outfit for special occasions
- 1 coat appropriate for season; snow pants, hat, and mittens, if winter
- 1 comb or hairbrush
- 1 duffel bag or suitcase
- 1 bag containing: 1 bottle, 6 disposable diapers, 1 blanket, 1 bib, 1 unopened can of formula
- Any gifts given to the child while in foster care

Age 1 through 11

- 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, hat, 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

Age 12 through 18

- 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 backpack
- 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 child's 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 available at hennepin.us/fosterparents. Give a copy to the child's placing worker.

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 haircuts, permanents, relaxers or other chemical processes without permission from the child's parent or guardian, obtained by the child's worker.
- If you are caring for a child with textured hair and you have limited experience with styling, detangling, and washing the child's particular hair type, be sure to ask your licensing worker, check websites, or attend a Hennepin County training on the topic.
- If you have a foster child who is a different race from you and you are unfamiliar with the special products they may need for hair or skin care, contact the child's worker. In some cases, 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.

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, guardian, or court order obtained by the child's worker.

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:

- Music lessons
- Other special lessons
- Community activities

Authorization of these expenditures must include:

- That the lessons are part of the child's casework plan.
- Prior approval by the child's worker's supervisor.

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

Driver's license and 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 at an approved driver's education location
- 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.

Sports and recreational equipment

Bike helmets

If you allow a foster child to ride a bicycle, the child must wear a 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 and recreational equipment

Sports and recreational equipment includes items such as sports uniforms, sleeping bags, bicycles, and bicycle helmets.

- Reimbursement for sports and recreational equipment for a foster child may sometimes be allowed with supervisory approval.
- Reimbursement may not exceed \$10 per month during any calendar year for the number of months the child has been in placement.
- The activity 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 Casa Cares Grant Program. Discuss this with the child's placing worker.

School information

Foster parents play a key role in supporting school success. Talk to your licensing worker about how foster children and youth are doing in school. If students need additional support, your worker can help.

Foster parent permission letter

- At the time of placement, you will receive a foster parent permission letter provided by the placing worker or placement support worker. This letter gives you permission to communicate with the school as well as to attend school conferences and receive school reports.
- Please note, any other major decisions regarding a foster child's education must be made by the parent or legal guardian/county. This would include decisions like authorizing special education services or changing the school a child attends.

School enrollment

- To ensure educational stability of children in foster care, the Every Student Succeeds Act (ESSA) entitles them to protections that promote school stability. As long as it is in the best interest of the child, they should continue to attend their school of origin.
- The school of origin is the school that the child was last enrolled in prior to the out of home placement date.
- Placing workers and schools determine what school the child will attend. Foster parents are not able to make that decision. If you believe it may be in a foster child's best interest to enroll in a different school, contact the placing worker to discuss.
- Hennepin County and local school districts work together to ensure that children receive transportation from their foster homes to their school of origin, if their foster home is outside of the attendance area. It can take time for

transportation to be arranged, so foster parents may be asked to assist with transportation to school initially.

- It may be determined that attending the school of origin is not in a child's best interest. In that case, a child could be enrolled in a school near the foster home.

Educational assessments

- If a child needs educational testing to determine the need for special educational services, please contact the placing worker. The placing worker may be required to work with the child's parent to begin that process.
- If the foster parent notes any potential learning disabilities or education challenges, inform the placement worker who will assist with the process.

Private schools

- ESSA requires that a child remain in their school of origin. A foster parent cannot make the decision to enroll a foster child in a new school, whether private or public. If you believe it may be in a foster child's best interest to enroll in a private school, contact the placing worker to discuss.
- The county is not able to pay for tuition or books, but some private schools may 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.

Report cards and school reports

- The child's worker will ask about children's school performance, including 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 the school or your 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 access to lunch until approved.

School expenses

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

Some unusual expenses (see examples below) 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.

Examples of reimbursable expenses, with prior approval

- Field trips
- High school graduation expenses (pictures, announcements, senior class functions, etc.)
- Sports uniforms for school-age children. [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.

Independent Living Skills (ILS) programs

Hennepin County offers a number of different Independent Living Skills (ILS) programs and services for youth ages 14–21 who are in foster care.

These programs are aimed at providing youth with the necessary independent living skills and helping them to identify supports as they transition to adulthood.

Independent living skills education, and the opportunity to experience and practice these skills, is crucial for youth to successfully enter into adulthood.

Eligibility

ILS programs and services are aimed at all foster care youth ages 14 to 21 who are in out of home placement through a CHIPS (child in need of protection and services) petition or a voluntary children's mental health placement.

More about ILS programs

Hennepin County partners with private agencies to provide ILS programming to youth in foster care. ILS case managers help youth to learn the skills they will need to be self-sufficient, such as completing a resume, applying for jobs, preparing for college, and completing the FAFSA. They can also help youth with important life skills, such as how to shop for groceries, engage in healthy relationships, or cope with stress.

Hennepin County also offers at least three ILS classes/workshops each month on a variety of topics. You can ask the social worker assigned to the youth about those classes/workshops as emails are sent to all workers each month. Some of the programming that is offered includes:

Educational support — Exploring colleges and post-secondary options, assistance filling out FAFSA, college applications and scholarships, Education and Training Voucher (ETV) financial assistance through DHS, and resources on furthering education through certificate programs, vocational or trades training. Hennepin County also recognizes foster youth who have earned their diploma or GED with a graduation ceremony each spring.

Housing resources and supports — Could include rental assistance, help with security deposits and application fees, assistance searching for affordable market rate housing and transitional living programs. Rentwise training is also offered and encouraged for all youth prior to them living on their own for the first time and covers such things as how to read and sign a lease, what to look for when looking for your own place, working with a landlord and what it means to be a good tenant.

Healthy transitions — Classes and courses on mind, body, soul, healthy relationships and sexuality.

Transportation — Assistance with Drivers Education Training, classes on how to purchase and maintain a car, how car insurance works, or assistance with buying a bike to help a youth become more independent.

Financial literacy — Budgeting, tax assistance, how to start and maintain a checking and/or savings account, how credit cards and interest work, credit workshops and assistance in interpreting and completing a credit report.

Leadership and self-advocacy — Youth Leadership Council, conference fees and attendance for workshops, participation in Tomorrow's Leaders 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.

Contact the youth's social worker for more information.

Foster parents can help

As a foster parent, you have the opportunity and responsibility to help launch a youth into adulthood with the skills they need to be self-sufficient and successful. Help your foster youth learn independent living skills:

- Teach youth how to cook, do laundry and keep a home clean.
- Give youth an opportunity to earn an allowance and create a personal budget.
- Ensure youth have a state ID or help them find a driver's education course.
- Teach youth how to grocery shop and compare prices.
- Help youth fill out job applications or research college or technical schools.

Youth in Transition Conference (YTC)

A Youth in Transition Conference (YTC) is a series of meetings involving a foster youth (typically age 16 and older) and their circle of support. The purpose is to help the youth actively discuss their goals for independence. The process helps youth to:

- Develop a vision for their future
- Learn how to set goals, accomplish tasks, and monitor results
- Challenge themselves by trying new things and making their own decisions
- Recognize their strengths, capacities and sense of control over their lives
- Develop and stay connected to a network of supportive people

As a foster parent, you may be asked to participate in a YTC. Your active support and understanding are critically important as foster youth transition to adulthood.

Foster children as babysitters

Foster parents are tasked with encouraging and supporting developmentally appropriate experiences for foster youth. Apply the prudent parenting standard when determining whether a foster youth can provide occasional supervision for the other children in your home. You will need to determine if the youth is interested in babysitting and if they are sufficiently responsible to do so. Have a discussion with the youth's worker about whether the foster youth is developmentally prepared for this type of responsibility.

Section 2

Home and vehicle safety



Follow these important requirements and other guidelines to help provide a safe environment for foster children and youth.

Beds and bedrooms

Infants up to age one:

- All non-relative foster homes must have a crib if caring for an infant.
- Relative foster parents may use a pack-n-play for infants, with placing worker approval. If a relative foster provider chooses to use a pack-n-play, they must ensure that it is safe by checking the Consumer Product Safety Commission website (www.cpsc.gov). Check the website to make certain that the pack-n-play has not been recalled.
- A car seat cannot be used for sleeping.
- To sleep, infants must be placed on their backs on a firm mattress with a tight-fitting sheet. (Adult sheets may come loose and entangle an infant).
- Use cribs with slats close enough together that a 12-ounce soda can cannot slide through the slats.
- Have pillows, bumper pads, stuffed animals, quilts, or comforters removed from the crib or pack-n-play, 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.

All foster children must:

- Sleep in a bedroom. (In some cases, a variance to this rule can be granted to relatives or kin to allow a foster child to sleep in a room that is not a bedroom. Prior authorization is required and the foster child's needs for privacy and space must be prioritized.)
- Have their own bed that is large enough to match the size and age of the foster child.

Sharing bedrooms:

Decisions about children sharing bedrooms must be made thoughtfully and in consultation with the child's worker and your licensing worker. Considerations include gender identity, preferences of the children/youth and desired boundaries, space, and more.

Foster youth must be given privacy to ensure their comfort and safety regarding their sexual orientation and gender identity. Privacy may include having a space for children to store their gender affirming belongings.

Non-relative foster providers and sleeping space:

It is preferred that non-relative providers have a separate bedroom available for foster children even if they only plan to have infant placements.

In some circumstances, a non-relative applicant may plan to share their bedroom with an infant or have children already in the home share with a foster child. This requires pre-approval from a licensor and placing worker, and involves careful assessment of the needs and preferences of all of the children involved. This is not approved in all circumstances.

It is preferred that applicants do not disrupt the family's living space in order to accommodate a foster child. It is preferred that no one sleep in the common areas, however if there is adequate space in the home, the adult foster provider may choose to use a family room, den, or living room as a bedroom space for themselves.

Crib safety

Foster parents with infants under one must assure the crib is in compliance with Consumer Products Safety Commission (CPSC) standards 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.

Playpens or pack-n-plays

Before placing an infant in a playpen or pack-n-play with mesh sides, be certain that the sides are securely locked into place.

If using a playpen for any reason, check with the US Consumer Product Safety Commission regarding the safety of your playpen. [See Where to Call](#) or visit their website at www.cpsc.gov.

Playpens may not be used for sleep in non-relative foster homes. Babies must be placed in a crib to sleep.

Relative foster parents may use a playpen or pack-n-play for infant sleep, with approval.

SUID (Sudden Unexpected Infant Death)

SUID is the sudden and unexplainable 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, sheepskins, 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.
- Do not place infants down to sleep wearing clothing or sleepwear that has weighted materials, a hood, or a bib.
- Placing a swaddled infant down to sleep is not recommended for an infant of any age and is prohibited for any infant who has begun to roll over independently. A swaddle can only be used with the written consent of a parent. If a swaddle is used with parental consent, it must be wrapped over the infant's arms, fastened securely across the infant's upper torso, and not constrict the infant's hips or legs. Like other clothing or sleepwear, a swaddle cannot have weighted materials, a hood, or a bib. It must not be so tight that it restricts the infant's ability to breathe, or so loose that the fabric could cover the infant's nose and mouth.
- Remove pillows, quilts, comforters, stuffed toys and other soft items from cribs, as these may cause suffocation

- If a pacifier is placed in the crib, it must not have any type of attachment..
- Make sure no one smokes around the baby.
- Before placing an infant in a playpen or pack-n-play with mesh sides, be certain that the sides are securely locked into place.
- Slats of a crib or playpen must be close enough together that a 12-ounce soda can cannot fit between the slats.
- Check with the United States Consumer Product Safety Commission for up-to-date safety information. Visit their web site at www.cpsc.gov, or see [Where to Call](#).

For additional information, [See Crib Safety and SUID/AHT Training](#).

Foster parents must place infants, age 12 months or younger, on their backs to sleep. It is only allowable to place an infant in an alternative sleeping position when there is a written directive from the infant's physician or advance practice registered nurse to do so.

If a parent or guardian asks a foster parent to have their baby sleep in a position other than the baby's back, direct the parent to talk with the child's worker.

Additional sleep considerations for infants

If an infant under one year of age requires a helmet for their development and would wear it while being placed down to sleep, license holders must use the DHS-approved form [DHS-8531 \(Helmet Approval for Sleeping Infant\)](#) to obtain signed documentation from a physician, advanced practice registered nurse, physician assistant, licensed occupational therapist, or licensed physical therapist. A copy of the completed form must be provided to your licenser.

If a parent or guardian requests the use of a cradleboard for a cultural accommodation, license holders may request a variance using the DHS-approved form [DHS-8529 \(Cradleboard Variance Request Form\)](#). It is important to note that a cradleboard variance may only be issued by DHS and cannot be issued by Hennepin County.

Safely soothing teething pain

Pain associated with teething is a normal and sometimes painful experience for babies and toddlers. Foster parents are encouraged to follow the current guidance from the American Association of Pediatrics and the U.S. Food and Drug Administration regarding safe methods to help relieve discomfort. Two safe options include rubbing a child's gums with a clean finger or using a firm rubber teething ring for the child to chew on. Foster parents should supervise children while they are using teething rings.

Using teething necklaces, bracelets or other "jewelry" is not recommended and foster parents should not use them. These items pose a risk of choking, strangulation, and injury. The FDA does not recommend the use of over-the-counter topical gel medications or homeopathic teething tablets as they also carry risks and provide little to no benefit.

Fire safety

Prior to placement, foster parents must have the following in place:

- Smoke detectors leading to all bedrooms or sleeping areas. All smoke detectors must be in working order.
- 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 Emergency Escape Plan that is discussed with your licensing worker and is on file in your foster care file. Your Fire and Emergency Escape Plan must be posted in a common area of your home.

Practice a fire exit drill with your foster children.

Carbon monoxide detectors

Carbon monoxide (CO) is an odorless, colorless gas that can cause sudden illness or death when inhaled. This is called carbon monoxide poisoning.

Carbon monoxide is in fumes from cars, portable generators, heating systems and similar appliances or engines. Each year in Minnesota, especially in winter, unintentional carbon monoxide poisonings result in emergency department visits, hospitalizations, and even deaths. Carbon monoxide poisonings are tragic and costly, and many poisonings can be prevented with proper use and maintenance of carbon monoxide alarms.

Minnesota law requires single and multiple dwelling residences to have carbon monoxide detectors installed within ten feet of each bedroom.

Guns and other weapons

- All weapons, including guns, must be kept in a locked area and separate from ammunition.
- Guns and other weapons must not be visible or accessible to the foster children.
- Ammunition must be kept in a second locked area, separate from the weapon.
- You must report to your licensing worker if you have a permit to carry a gun.
- If you decide to purchase a gun or obtain a permit to carry a gun at any point after becoming licensed, you must inform your licensing worker.

Any foster child using a gun must have:

- Written permission from the parent or guardian, **and**
- Written permission from their worker, **and**
- Successfully completed a state-certified gun safety program, **and**
- An adult present during any use of the gun.

It is also important that foster parents safely store and prevent foster children from having access to items such as BB guns, airsoft guns, and pellet guns. If you have one of these items in your home, please inform your licensing worker and make a plan to store the gun and ammunition separately, just as you would any other weapon.

Smoking in foster homes

Minnesota Statute 260C.215 subd. 9 prohibits exposure to secondhand smoke for children in foster care.

A child in foster care shall not be exposed to any type of secondhand smoke in the following settings:

- A licensed foster home or any enclosed space connected to the home, including a garage, porch, deck, or similar space
- A motor vehicle while a foster child is transported
- In outdoor areas on the premises of the home, if a foster child is present and exposed to the secondhand smoke

Smoking in outdoor areas on the premises of the home is permitted, provided that a foster child is not present and exposed to the smoke.

The home study must include a plan to maintain a smoke-free environment for foster child. If a foster parent fails to provide a smoke-free environment for a foster child, the child-placing agency must ask the foster parent to comply with a plan that includes training on the health risks of exposure to secondhand smoke. If the agency determines that the foster parent is unable to provide a smoke-free environment and that the home environment constitutes a health risk to a foster child, the agency must reassess whether the placement is based on the child's best interests.

Minnesota Statute 260C.215 subd. 9 should not be interpreted to interfere with traditional or spiritual Native American or religious ceremonies involving the use of tobacco.

Car safety and car seats

Car seat training is required for anyone transporting a foster child under the age of 8 and must be taken at least every five years.

Caregivers must consider both the size and age of the child to determine the safest way for them to ride in a car. Previously, the law stated that car seats were to be used according to manufacturer instructions. The law now has much more specific guidelines:

- From birth to 2 years old, children **must** be rear-facing in an infant or convertible car seat.
- A child who is 2 years old **AND** has outgrown the rear-facing seat based on height or weight should be in a forward-facing seat with an internal harness.
- A child who is 4 years old **AND** has outgrown the forward-facing seat based on height or weight can ride in a belt-positioning booster seat using the lap and shoulder belt.
- A child who is 9 years old, **OR** who has outgrown the booster seat **AND** can pass the “five-step test” below can ride with the seat belt.
- Finally, children under 13 years old must sit in the back seat whenever possible.

What is the “five-step test?”

The five-step test gives you the information you need to assess whether a child who is 9 years old or has outgrown a booster seat is able to travel safely with only the seat belt as a restraint.

Ask the following:

1. Does the child sit all the way back against the seat?
2. Do the child’s knees bend comfortably at the edge of the seat?
3. Does the belt cross the shoulder between the neck and arm
4. Is the lap belt as low as possible, touching the thighs?

5. Can the child stay seated like this for the entire trip?

If you cannot answer ‘yes’ to all five questions, then the child should be in a booster seat.

Always use the safer option

If a child falls into more than one of the categories above, then they must be placed in the safer restraint for them. For example, a child who has passed their second birthday but still falls within the weight requirements for their rear-facing car seat must remain rear-facing.

In addition:

- Minnesota law requires that everyone in a car must be wearing a fastened seat belt.
- 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 belt systems.
- Choose a seat that can be held tightly against the car seat’s back. Try the car seat in your car before using it.
- Replace your car seats according to the manufacturer guidelines. Most car seat manufacturers recommend replacement between every five and eight years.
- Destroy any car seats that have been involved in accidents even if there is no obvious damage.
- Car seats and booster seats need to meet current federal safety regulations and be appropriate for a child’s age and height/weight. Visit the website at www.cpsc.gov or see [Where to Call](#).

Pets

Foster families that have pets must ensure that the animal's immunizations are up to date and provide your licensing worker with a copy of the current shot records. This needs to be done for initial licensing and annually at relicensing or annual review.

Foster homes may not have pets that pose a threat to foster children.

All pet owners must be in compliance with the relevant city and county requirements.

If you have chickens, ducks or reptiles as household pets in your home, notify your licensor.

Phone

According to MN Rule 2960.3050, subp. 1, there must be an operable phone in the foster home for safety reasons. If there is no landline in the home, the applicant/license holder must read, sign and comply with the conditions of the Landline Exception Agreement.

Foster homes that do not have a landline must have a charged, functioning cell phone in the foster home at all times. Personal cell phones that are typically only used by the license holder/foster parent may not be used as the phone for the household. Foster providers should review the Landline Exception Agreement carefully and understand the requirements.

Any time you get a new phone number (landline or cell phone), notify your child's worker and licensing worker immediately.

Moving

If you are planning to move, notify your licensing worker and the foster child's worker as soon as possible and always 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 Hennepin 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. Let the workers know as far in advance as possible so that appropriate arrangements can be made.

Internet and foster children

The internet has a large presence in much of our daily lives. Being an involved and attentive foster parent is the most important thing you can do to ensure online safety for children in your home.

- Have an open conversation with children and youth in your home about the expectations regarding internet use in your home.
- Talk openly with children in your home about the importance of telling a trusted adult if someone breaks their boundaries or rules online, or makes them uncomfortable. Children and youth report that they may not tell an adult for fear that their device will be taken away. Let them know that you won't punish them for telling you about concerning interactions initiated by others.
- Learn about filtering software and resources that service providers offer to limit content seen on a cell phone or other device.
- Supervise internet use. This can mean keeping computers and devices in areas of the home that allow for supervision as well as checking in on what sites children are viewing.
- Be particularly cognizant about interactions children are having on sites that allow for interaction between individuals, such as social media sites or some online games.

- Talk with children and youth in your home about being kind to others on the internet and teach them to walk away from online interactions that make them uncomfortable or when they are angry.

Children in foster care can be particularly vulnerable to predatory or exploitative behavior online. It is extremely important for foster parents to set appropriate boundaries and supervise internet use.

Social media

Hennepin County foster parents must sign a policy regarding use of social media. While social media can be a useful tool for learning, sharing of information, and finding support from other foster parents, it also creates privacy and safety concerns. Foster parents must be careful to protect the privacy of foster children.

This means foster parents **may not:**

- Identify a foster child in a social media post or elsewhere on the internet
- Post pictures of foster children or share any information about a foster child
- Discuss specific case details, including school locations or information about a child's family

If you have any questions about the use of social media, refer to the Child Foster Care Use of Social Media Policy or ask your licensing worker.

Television and video games

- Monitor what your foster children are watching and playing.
- Limit foster children's television viewing and video game playing time. Talk with the children about what the limits are and why you have set those limits.
- Turn off the television during meal times.
- Ensure that the programs and video games that your foster children are exposed to are developmentally appropriate. Talk with the children about what is appropriate for them to view or listen to and what is not.

[See Internet use](#)

Television and video game usage by other family members or babysitters

You are responsible for ensuring foster children are not exposed to developmentally inappropriate material. Make sure that visitors to your home understand your limits and expectations as well.

Section 3: Foster parent requirements and licensing process



Find the information you need to receive and maintain your child foster care license.

The licensing process typically takes between 3 and 6 months to complete. Your licensing social worker will help you through the process. All applicants need to complete background checks, training, required forms, and a home study before being licensed. Licensing standards and requirements are set by Minnesota rule and statute. In some cases, agencies may have requirements that exceed those; Hennepin County requires some training that is not in rule or statute. A variance to some requirements and standards may be requested in circumstances that do not jeopardize the health or safety of a child.

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 commissioners of the Minnesota Department of Human Services (MN DHS) and Minnesota Department of Children Youth and Families (MN DCYF) 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. All foster parents receive a copy of MN DHS's Agreement Between Foster Parents and

Placement Agency and the document is signed by both the foster parent(s) and their licensor.

In addition to Minnesota Department of Human Services rules and regulations, Hennepin County also requires that if you take the foster child out of the home for one night or longer, you contact the child's placing worker.

Confidentiality

Information about foster children and their families is protected by the Minnesota Government Data Practices Act.

- Foster parents must not share information about a foster child or their family with neighbors, friends, or family members.
- **Foster parents must not share information about foster children or their family on social media.** This includes photos and videos.
- Foster parents can share information about foster children with agency-approved service providers.

Keeping the child's information private may be particularly difficult when your foster child is a relative or kin. If someone in the family system has questions, you can refer them to the child's worker.

The Minnesota Government Data Practices Act:

- 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.

If you are unsure about whether you can share information with someone, you should discuss it with your foster child's placing worker.

Juvenile court and 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.](#)

On occasion, a foster parent may be asked to testify in court. 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 and 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 holiday cards, other cards or print material
- Anywhere online, including sites such as Facebook, Instagram or GoFundMe
- As part of a presentation for a class
- In any publication, such as newspapers, company newsletters, magazines, etc.

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

Training

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

Initial training requirements

Both relative and non-relative foster parents must complete training before being licensed.

Initial training for relative foster parents should be completed within 30 days following the initial placement.

For those interested in pursuing the Concurrent Families program, an additional training is required.

For non-relative foster parents

- Nuts & Bolts: Foster Care the Hennepin Way
- Introduction to Children's Mental Health
- Prudent Parenting
- Cultural Issues in Parenting
- Discipline in Foster Care
- Developmental Impact of Trauma
- Mandated Reporter
- Introduction to LGBTQ+ Inclusion
- Car Seat Safety (if foster children under 8 years old)
- Sudden Unexplained Infant Death (SUID)/ Abusive Head Trauma (AHT) (if foster children under age 6)

For relative foster parents

- Nuts & Bolts: Foster Care the Hennepin Way
- Introduction to Children's Mental Health
- Prudent Parenting
- Mandated Reporter
- Car Seat Safety (if foster children under 8 years old)
- Sudden Unexplained Infant Death (SUID)/ Abusive Head Trauma (AHT) (if foster children under age 6)

First-year training requirements

Non-relative foster parents

Non-relative foster parents must complete at least 12 hours of training during the first year of licensure. The following trainings are required:

- Hennepin County Foster Parent Guide test
- Fetal Alcohol Spectrum Disorder (FASD)
- One hour of mental health training
- Mandated Reporter
- Best Practices for Serving LGBTQ+ Youth

For non-relative foster parents, the following trainings are recommended:

- QPI: Comfort Calls
- MAPCY: Foster Care Supplement Rate
- Foster Parent Court

Relative foster parents

Relative foster parents must complete at least 12 hours of training during the first year of licensure. The following trainings are required:

- Hennepin County Foster Parent Guide test
- Cultural Issues in Parenting
- Discipline in Foster Care
- Developmental Impact of Trauma
- Fetal Alcohol Spectrum Disorder
- Mandated Reporter
- Introduction to LGBTQ+ Inclusion
- Best Practices for Serving LGBTQ+ Youth

Ongoing training requirements for relative and non-relative foster parents — after the first year

A minimum of 12 hours of training is required each year:

- Five hours minimum from the in-person training options listed on Hennepin County's foster care training calendar
- One hour of mental health training must be completed every year
- One hour of FASD training must be completed every year

You may count up to six hours combined from the following categories:

- Up to three hours of relevant reading or videos of your choice, related to the needs of foster children
- Up to three hours individual training such as special staffings or meetings about a child in your care
- Up to three hours of webinar training related to the needs of foster children
- Up to six hours from the online video options listed on Hennepin County's foster care training calendar. Online training options are listed on Hennepin County's foster parent website (hennepin.us/fosterparents)

Training hours may not be carried over into the next year.

If foster parents have not completed the required annual training at the time of relicensure/annual review and are not able to show good cause as to why the training was not completed, the foster parent may not accept new foster children until the training is completed. A correction order may be issued as well.

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 142B.49.

See [Medical Equipment](#).

Car seat training

This training is required every five years for foster parents taking children under the age of eight. The training must be done by a certified Department of Public Safety trainer. Babysitters and others who help transport foster children under age eight 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 under age six. Babysitters and others who help care for foster children under age six 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 Essentials foster parent newsletter.

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 on the Hennepin County Foster Care training calendar at hennepin.us/fosterparents and in the Essentials email newsletter.
- Trainings offered during agency-sponsored support groups
- Foster Parent College trainings (requires registration assistance from the foster care training coordinator)
- Community education classes
- College courses
- Relevant trainings offered by churches
- Relevant trainings offered by private agencies
- Special staffings or meetings about foster children in your care (see limits listed above)

Cancellations of Hennepin County trainings will be announced via email by 5 p.m. for evening classes, and 8 a.m. for Saturday classes.

Recording your training hours

You are responsible for noting your training hours in the training form in Binti or on the Provider Record of Training form available in the forms section of hennepin.us/fosterparents

SUID/AHT training

Non-relative foster parents must take training on Sudden Unexpected Infant Death and Abusive Head Trauma (SUID/AHT) before accepting a child under age six.

Relative foster parents must take SUID/AHT training at the time of licensing, if caring for a child under age six.

All family members, extended family, babysitters etc. who help with the care of a foster child under the age of six 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 under the age of six.

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.

Fingerprinting

The federal Adam Walsh Child Protection and Safety Act of 2006, known as the Adam Walsh Law, and Minnesota Statute Section 245C.05 require background studies to be conducted on all household members 13 years and older who live in a foster home.

Any individual who is over 18 years of age must complete a fingerprint background study. This is also the case for any substitute caregivers you plan to use.

When someone new moves into your home or you want to use a new substitute caregiver, they will have to do fingerprints beforehand.

All background studies for foster parents, household members 13 years and older, and substitute caregivers will be completed by the Department of Human Services (DHS) in a process called NETSTUDY 2.0.

Communication about the results of your background studies will come to you directly from DHS rather than from Hennepin County.

Relicensing

Your child foster care license has an expiration date. Prior to that date, your licensing worker will meet with you to complete your relicensing process. The licensing worker can then make a recommendation to the Minnesota Department of Human Services for a license renewal.

Prior to your relicensing home visit:

- Complete all the electronic relicensing forms in Binti. Make certain that the forms that require signatures are signed.
- Ensure that all of your required training hours have been completed. If you have questions about your specific requirements, talk with your licensing worker or [see the Training section](#).
- Check your smoke detectors to make sure they are working. Fix them if needed.
- Check your fire extinguisher, and be sure it has been serviced and tagged. Your fire extinguisher must be a 2A10BC or larger.

Evaluations

Every year, your licensor and the placing worker(s) will collaborate with you to complete an evaluation. The placing worker is asked to complete a foster home evaluation and share their thoughts on the care you have provided to the child. Your licensor will complete a similar evaluation and share it with you. You will have an opportunity to share your thoughts about how placements have gone. You can provide input about the agency's support of you as a foster parent.

Section 4

Foster parent support



As a foster parent, you have a big job. Lean on these supports to help.

Important note: Respite and substitute caregiver policies and procedures described in this section apply to foster parents caring for children placed by Hennepin County only. If you are caring for a foster child who was placed by another county or state, you must speak with that placing agency about whether respite reimbursement is available to you.

Respite and substitute care

Caring for foster children can be challenging. We encourage foster parents to take care of yourselves as well. One option to consider is using respite or substitute care.

Licensed foster parents and relative foster providers currently in the licensing process are eligible to receive up to 21 days per calendar year of reimbursed respite care or substitute care.

- The 21 days is per foster family, not per child.
- Respite care during the last two weeks in December will not be approved. It is very difficult for children to be in an unfamiliar respite home for the holidays. In addition, few foster homes are available for respite placements in the last two weeks of December.
- Foster parents may not request respite or substitute care and at the same time take another foster child into their home for respite or a foster care placement.

- All respite must be arranged and approved through the foster parent's licensing worker.
- Respite providers receive the regular foster care reimbursement rate, including the MAPCY. The foster parents will also continue to receive that same rate while the children are in respite care.

Information for foster parents requesting respite care

Respite care is the term used when your foster child goes to another licensed foster home while you take a break.

The foster parent who requested the respite will still receive the foster care rate, including the MAPCY level, for each child during the time of the respite.

To use respite care, complete the following steps:

1. Notify your licensing worker at least 30 days in advance of 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. Your licensing worker will identify a licensed home for the respite placement.
2. Notify the child's worker that you are making this request.
3. Complete the Child Foster Care Respite Provider/Substitute Caregivers Information form for each child needing respite, and give a copy of the form to the respite provider. This form must be signed by both you and the respite provider before the respite begins. [See Appendix F: Child Foster Care Respite Provider/Substitute Caregiver Information Form Instructions.](#)

4. Complete the top two sections on the Child Foster Care Respite Reimbursement Form (including your name, your licensor's name, the child's worker's name, dates, and information about foster children). Give the form to the respite provider.
5. Provide the Child Foster Care Respite Reimbursement form to the respite provider, along with contact information for your licensor. Your licensor will need to approve final payment. [See Appendix G: Child Foster Care Respite Reimbursement form instructions](#)

Respite care: information for respite care providers

If you are a foster parent who provides respite care for children living with their parent or legal guardian, or for children who live in a foster home other than yours:

- You may not care for more children than what your maximum capacity states on your foster care license.
- Your licensing worker and the child's placing worker must preapprove the respite plan.
- If you have any questions, contact your licensor.

Steps you must complete for each respite placement:

- Ensure that your licensor is aware of all respite placements in your home.
- Before providing respite, you must receive a copy of the **Child Foster Care Respite Provider/ Substitute Caregiver information form** from the child's foster parent. The bulk of the form is completed by the foster parent. You must complete the section on page 3 of the form. [See Appendix F: Child Foster Care Respite Provider/ Substitute Caregiver information form instructions.](#)
- After the respite placement, you will need to sign the **Child Foster Care Respite Reimbursement form** and send it to the child's foster parent's licensor. (Your licensor cannot approve payment; the reimbursement

form must be signed by the licensor for the foster parent who requested the respite care.)

[See Appendix G: Child Foster Care Respite Reimbursement form instructions](#)

- The signed Child Foster Care Respite Provider/ Substitute Caregiver Information form must be attached to the Respite Reimbursement form in order to get reimbursement. If the respite is three days or less, all three days are reimbursed. If the respite 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.
- Reimbursement for the respite care will be sent directly to you.

Substitute care: information for foster parents using substitute caregivers

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. Foster parents identify who they would like to be an authorized substitute caregiver and then work with their licensor to meet the requirements.

If a foster parent chooses to use more than 21 days of substitute care in a calendar year, those additional days would not be reimbursed except under special circumstances.

Short-term substitute care

Short-term substitute care is caring for a foster child for **less** than 72 hours in the foster home. The following is required before using short-term substitute care:

- The foster parent and the agency must agree that the identified substitute caregiver is able to meet the needs of the child.
- Provide documentation of training from an appropriate training source on any medical equipment used by the foster child. [See Medical Equipment.](#)

- The substitute caregiver must have completed SUID and AHT training if caring for a foster child under age six.
- The substitute caregiver must have completed car seat training if they will be transporting a child under age eight.

Long-term substitute care

Long-term substitute care is caring for a foster child for **more** than 72 hours at a time, or for more than 30 cumulative days in a 12-month period.

Long-term 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.
- Have completed DHS/DCYF children’s mental health training.
- Have completed one hour of FASD training.
- Provide documentation of training from an appropriate training source on any medical equipment used by the foster child. [See Medical Equipment.](#)
- Have completed car seat training if transporting a child under the age of eight.
- Have completed SUID and AHT training if providing care for infants or children under six.
- Substitute caregivers must also meet all other babysitter requirements. [See Babysitters.](#)

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 the following:

- Must submit a signed statement attesting to good health and being physically able to care for foster children
- 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.

To request 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.
- You must complete the **Child Foster Care Respite Providers/Substitute Caregivers information form** for each child needing substitute care, and give the copy of the form to the substitute caregiver. Both the foster parent and the substitute caregiver must sign the form. [See Appendix F: Child Foster Care Respite Provider/Substitute Caregiver Information form instructions.](#)

Reimbursement for substitute care:

- The agency will reimburse you \$45 per day, to be used to pay the substitute caregiver, regardless of the number of children in your home.
- To request reimbursement, complete the **Child Foster Care Respite Provider/Substitute Caregivers information form** for your licensor, along with the signed Respite Provider/Substitute Caregiver Information form. [See Appendix G: Child Foster Care Respite Reimbursement Form Instructions](#)
- Mail or email both forms to your licensing worker.
- 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 MAPCY level for each foster child during the period that substitute care was provided.

Respite care: special circumstances

Using a licensed day care provider

Up to five of the 21 days of respite may be used for bringing your foster child to a licensed day care home or center for less than 24 hour care.

- It is up to you to find the licensed day care home or center.
- The home or center you use for day care 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 day care, 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.
- Day care providers must also meet all other babysitter requirements. [See Babysitters.](#)
- If you decide to use five of your respite days towards day care, you pay the provider and the agency reimburses you. You will need to use the **Miscellaneous Expense Voucher form**, which is available at hennepin.us/fosterparents, to request reimbursement. Write the names of the foster children and the name of the licensed day care provider or facility on the form and send the voucher to your licensor.

Special respite (foster child in respite for more than 21 days in a calendar year)

In rare circumstances, such as when a child's needs are exceptional, there may be a need for more than 21 days of respite in a calendar year.

- The foster parent and licensor must obtain supervisor approval for special respite before the respite is provided. Not all special respite can be approved.
- For additional information about using special respite, talk with your licensor and child's placing worker.

Vacations

Inform the child's worker before taking the child on any trip of one or more overnights. You must obtain permission from the child's worker before taking a child outside of the state.

- 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.
- 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 and substitute care.](#)

Family Response and Stabilization Services

Family Response offers immediate in-person support and stabilization for children and youth (ages birth–18) and their caregivers. Services are driven by the child's cultural, community, and clinical needs.

If you feel overwhelmed by your foster child's mental, behavioral, or emotional needs, Family Response can help. There are no specific criteria required to initiate Family Response, but concerns may include children or youth who are:

- Having a hard time with a family member or change in the home
- Showing aggression or anger
- Feeling down or less engaged
- Experiencing worry and concern
- Having issues at school

The goal of Family Response is to keep youth and families — including foster families — stable at home by helping you determine and connect to the support you need to thrive.

Call Family Response

- 612-979-9511
- Available 24/7

Support groups

Participating in support groups can be a valuable tool to avoid stress and burnout as a foster parent. For information about support groups for foster parents, talk with your licensing worker or review the information available on hennepin.us/fosterparents.

Self-care

Stress is a normal human reaction that happens to everyone. Both a physical and emotional reaction, stress is experienced when encountering changes or challenges in life. Stress responses help your body adjust to new situations. In some cases, stress can be positive: keeping us alert, motivated and ready to avoid danger. But stress becomes a problem when stressors continue without relief or periods of relaxation.

Prolonged stress may lead to something called “burnout.” Foster parents are frequently attempting to meet the many demands of children with special needs over a period of time. Without relief in those circumstances, burnout may occur. Physical, emotional and behavioral symptoms associated with burnout are:

- Physical exhaustion or aches and pains
- Headaches, dizziness or shaking
- Difficulty sleeping
- Anxiety or irritability
- Depression; feelings of sadness and hopelessness

- A quickness to anger
- Resisting change
- Increased alcohol use
- Reduced capacity to fulfill requirements of the foster parent role, such as supervision of children or completion of necessary paperwork.

Ways to prevent and reduce stress

- At the end of each day, think about what you’ve accomplished — not what you didn’t get done.
- 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. [See Respite and substitute care](#)
- Take time for yourself and your family.
- Focus on the positive things rather than on the negative, and spend time with others who do the same.
- Celebrate your foster children’s successes, no matter how small, with them.

The key to preventing burnout is to keep 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 with your licensing worker right away.

Essentials newsletter

The Hennepin County Foster Care program publishes the Essentials newsletter by email.

The newsletter contains foster care information, policies, and training opportunities. New and important updates for foster parents will be shared in this newsletter. Be sure to read each issue and contact your licensing worker if you have any questions.

Babysitters

A babysitter is someone who provides short-term care (less than 24 hours) for a foster child, either in your home or in the home of the sitter.

Apply the reasonable prudent parenting standard when choosing a babysitter. Make sure to consider the needs of each foster child when you select a babysitter. You are ultimately responsible for the care a babysitter provides the foster children in your home. Not using good judgment about babysitters could lead to a negative licensing action for you.

If you are using a licensed family 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 their 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.](#)
- Have completed required car seat safety training if there is any possibility they will be driving a child under the age of eight. [See Car seats.](#)
- Have completed Sudden Infant Death Syndrome (SIDS) reduction and Shaken Baby Syndrome training if caring for children under age six. [See SUIDS/AHT training.](#)
- 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 the child's parents 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.

If you plan to use a babysitter in your home for more than 24 hours, that is considered "substitute caregiving" and there are important additional requirements. [See Respite and substitute care](#) for more information.

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.

Section 5: Partnering with the county, court, tribes, and guardian ad litem



Foster care is part of a complex system. Learn about the major areas and how foster parents play a part.

Abuse and neglect reporting

Foster parents are mandated reporters. This means you are obligated to report incidents of suspected child abuse and/or neglect. Minnesota law protects people who report abuse or neglect in good faith.

If you have reason to believe that child abuse and/or neglect may have occurred, you should:

- Call 911 if the child is in immediate danger
- Call Hennepin County Child Protection Intake 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, be sure to do all of the following:

- Contact Child Protection Intake, [See Where to call](#)
- Contact the child's placing worker
- Contact 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 Intake, [See Where to call](#)
- The child's placing worker
- Your licensing worker

Documentation is very important. Document any observations, bruising or scars for your records.

Child Protection System

Child Protection Screening

When a report of child abuse or neglect is made, Child Protection Screening gathers the information and determines whether the report meets criteria to open a child protection investigation.

Child Protection Investigation

If it is determined that the report meets criteria, a child protection investigator is assigned. The child protection investigator gathers information, conducts interviews, and works with a team to determine if there will be a finding of maltreatment.

A finding of maltreatment does not always mean that a child protection case will be opened. At times, there may be a maltreatment finding, but the caregivers have taken appropriate steps to resolve the problem and it is determined that the child is safe. The department does not assign an ongoing child protection worker to a family in those situations.

Ongoing Child Protection Services

If there is a maltreatment finding and the children and family are found to be in need of additional help, the case is transferred to an ongoing child protection worker for services and monitoring. Sometimes, the children are placed in foster care as well. Child protection workers focus on helping the parents or guardians resolve the child protection issues by engaging them in case plans and services.

If the child is eligible under the Indian Child Welfare Act (ICWA), a child protection worker who specializes in ICWA will be assigned.

In some cases, a child services worker will be assigned to work with children who are in foster care. Child services workers work in partnership with child protection workers. While child protection workers are directly involved with providing services to parents and children, child services workers are more exclusively focused on the needs of the children while they are in placement.

Child protection workers and child services workers have a number of responsibilities related to children and foster parents. They work with the foster parents to ensure that a child's needs are being met. They assess and monitor a child's well-being. They work with service providers to address the child's mental health, medical and other needs. They visit the child in the foster home, talk with the foster parents, and view the residence to understand the child's routine and experiences. They may also visit the child at school or day care. They work with a team to develop an out of home placement plan for the child.

Permanency

For children who enter foster care, there are multiple potential permanency outcomes.

- **Reunification** happens when a parent or parents successfully complete the case plan and the children are able to return home.

- The court can **transfer permanent legal and physical custody** (TPLPC) from the child's parent(s) to another person.
- The court can **terminate parental rights** (TPR). When parents' rights are terminated, the permanency goal for the child becomes adoption.
- In limited circumstances, when children are age 16 or older, the court can order **permanent custody to the county agency**.

When parents' rights are terminated or the court orders permanent custody to the agency, primary responsibility for the case will transfer from the ongoing child protection worker to a child services worker. In the case of a TPR, a permanency resource worker will also work closely with the child and adopting family. If an adoptive family has not been identified, the permanency resource worker will work to recruit and identify one.

Extended foster care

When a youth is nearing age 18 and is still in foster care, they will be referred for extended foster care services. Minnesota law allows youth who are in foster care on their 18th birthday to receive extended foster care services and payments to age 21, if they remain eligible. If a youth does receive extended foster care after their 18th birthday, the case will transfer to the extended foster care worker.

Court

When children are in foster care, periodic reviews of the case are held in court. Foster parents receive notice of those hearings from the court. Foster parents are not considered parties to the case by the court, but are considered participants. This means that you may attend in person, if you choose to, and that you have the right to be heard.

MN DCYF has published a guide to court proceedings for relatives and foster parents. It includes an overview of how to participate in a court hearing, what to tell the court, and how permanency proceedings happen. <https://edocs.dhs.state.mn.us/lfsrserver/Public/DHS-8016-ENG>.

Guardian ad litem

A guardian ad litem (GAL) 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 ad litem does not directly make decisions about the child but does make recommendations to the court. The guardian ad litem presents written reports to the court that address the child's best interests, including conclusions and recommendations and the facts upon which they are based.
- It is necessary for the guardian ad litem to develop firsthand knowledge about the child's situation. The guardian ad litem will interview the child and other important people in their lives, review records about the child, and may attend meetings with other providers and professionals.
- Foster parents are expected to maintain communication with the guardian ad litem and to help ensure that the guardian ad litem can visit with the child.
- The guardian ad litem remains involved until the court jurisdiction is dismissed.

Indian Child Welfare Act

The Indian Child Welfare Act (ICWA) is a federal law that establishes standards and procedures that state courts must follow before and after American Indian children are removed from their parent's or Indian Custodian's home.

The purpose of ICWA is "to protect the best interest of Indian Children and to promote the

stability and security of Indian tribes and families by the establishment of minimum Federal standards for the removal of Indian children and placement of such children in homes which will reflect the unique values of Indian culture" (25 U.S. C. 1902).

The law requires that notice of hearings involving child protection matters be given to the tribe. The law allows for intervention by the tribe in any state court proceedings where out of home placement is necessary.

The law outlines the following placement preferences for American Indian children:

1. The child's extended family
2. A tribe-approved foster home
3. A state-approved American Indian/ICWA foster home
4. An American Indian-operated or -approved institution.

Because there are a limited number of licensed Indian/ICWA foster homes available in Hennepin County, this means ICWA-eligible children may be temporarily placed in non-ICWA licensed foster homes when necessary. Workers will continue to engage active efforts and work towards finding an Indian/ICWA foster home while also working towards reunification with parents and searching for relatives who can care for the child(ren).

Minnesota Indian Family Preservation Act

Minnesota Statutes, Section 260.751 through 260.835 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."

Minnesota African American Family Preservation and Child Welfare Disproportionality Act

Minnesota Statutes 260.61 to 260.693 contain provisions that support greater protections for African American children and children who are overrepresented in Minnesota's child welfare system. These include, but are not limited to:

- Requiring county agencies to provide active efforts to prevent out-of-home placement and reunify families, and to implement safety plans with specific parameters to allow children for whom the act applies to remain in their home.
- Limiting the use of emergency removals, foster care placements and terminations of parental rights.
- Requiring cultural competency training for case workers, supervisors, judges, guardians ad litem and attorneys working in the child welfare system.

Some sections of this legislation became effective for Hennepin and Ramsey Counties on January 1, 2025. The remaining sections of the legislation will be effective statewide on July 1, 2027.

Termination of parental rights (TPR)

Termination of parental rights (TPR) is the result of a court order that ends the birth parents' rights. Once parental rights are terminated, the child is under the legal guardianship of the state and the department must make efforts towards adoption.

Typically, visits with parents end once the court orders a TPR, but there are exceptions.

A TPR can be either voluntary (i.e., a parent agrees to the TPR) or involuntary.

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 known as the permanent custodian.

Sometimes people refer to a Transfer of Permanent Legal and Physical Custody as a TPLPC or TLC. In the case of a TPLPC, the permanent custodians have primary rights and responsibilities for a child's protection, education, care, supervision, and decision-making on behalf of the child. A child continues to have a legal parent-child relationship with birth parents, but the birth parents' rights are secondary, subject to limits imposed by the rights of the relative custodians.

- Once the court orders a TPLPC, the foster parent becomes the permanent custodian and no longer needs to maintain a foster care license to care for the child. They have the right and responsibility to make decisions regarding the child's care, education, medical treatment and upbringing. If the child develops mental health diagnoses or behavioral problems, that permanent custodian is responsible for seeking treatment for the child.

- The permanent custodian is responsible for that child until the child reaches the age of majority or until a court orders custody be transferred back to the parent.
- When the TPLPC is granted by the court, 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 permanent custodian 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 a person accepts a TPLPC of a child, they may be eligible for Northstar Kinship Care Assistance, depending on the needs of the child. [See Northstar Care for Children.](#)
- Permanent custodians are no longer eligible for foster care reimbursement for that child.
- Once 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.
 - If you remain licensed for foster care, 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 exhibits behaviors 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.

Concurrent Families

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. While this is a foster care program with a potential adoption option, there is no guarantee that you will be able to adopt. Concurrent Families foster parents can take placements of children with a high likelihood of not being reunified with their parents, while also recognizing and supporting the importance of prioritizing reunification and permanency with relatives.

The children in need of placement:

- 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 have not had a completed kinship search, or may not have an identified father. The father or a relative may still come forward to care for the child.

Foster parents interested in this program complete specialized training. Concurrent Families must 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 additional requirements for Concurrent Families foster parents:

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

Section 6

Placement process



The goal of every placement is to find the right foster home, helping support children's well-being.

The placement process

Minnesota statute lists the factors that must be used in determining which placement is the most appropriate for a child. The factors that must be considered are:

- The child's current functioning and behaviors
- The medical needs of the child
- The educational needs of the child
- The developmental needs of the child
- The child's history and past experience
- The child's religious and cultural needs
- The child's connection with a community, school, and faith community
- The child's interests and talents
- The child's relationship to current caretakers, parents, siblings and relatives
- The reasonable preference of the child

Locating relatives or kin who can meet the child's needs and finding homes where siblings can remain together are extremely important factors as well.

Other factors may also be considered, depending on the specific situation:

- Whether the foster parent has had the training, experience and skills needed to meet the child's current needs

- 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, school, or day care)
- Child's need for foster parents who are committed to providing a supportive and affirming environment in terms of sexuality and gender identity
- Foster parents' ability to participate in therapy or other appointments, including school activities, family visits, etc.
- Foster parent's ability to transport
- The licensed capacity of the foster home, meaning how many children the foster parent can be licensed to care for. (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 needs of the other children in the home, including foster children already placed

Matching children and foster families

If you are a non-relative foster parent, it is important that your licensor knows the characteristics of children who would be most appropriate for placement in your home. You will talk with your licensor about the age range of children you can consider, as well as what type of medical, mental health, emotional, developmental, and learning needs you feel prepared to meet. As you become more experienced with providing foster care, you may want to consider changing those parameters. Discuss this with your licensor.

There are a few different ways that a child may be matched with a foster home.

- **Relative placements** — Frequently, children are placed in the home of a relative or kin. The relative or kin family then works to become licensed to care for those children. Most frequently, a child protection worker, investigator, or kinship worker works closely with the relative provider to coordinate placement. A licensor is assigned after placement in most cases.
- **Initial non-relative placements** — Some children will be placed in a licensed non-relative home when they enter out of home placement. Often, children will need placement quickly and workers may have limited information about the children. Workers will be gathering as much information as possible in order to appropriately match children with foster homes that can meet their needs.

In these situations, you may be contacted by your licensor or by someone from our placement coordination center to discuss the potential placement.

- Some foster parents choose to be open to contact about potential placements at any time of day or night. Discuss this possibility with your licensor. While not a frequent occurrence, there are times when placement may be needed immediately and during non-business hours. In these situations, you would likely be contacted by a child protection investigator about the potential placement.

If you are interested in being available for immediate placement during non-business hours, you will need to have some basic supplies ready. Consider what you may need. For example, for an infant placement, do you have a car seat? Do you have basic feeding supplies, appropriate sleeping space, a minimal amount of clothing, etc.?

- **Other non-relative placements** — Our goal is to ensure that children do not need to experience changes in placement while in out of home care. However, sometimes placements do disrupt and a new foster home is needed. In these situations, you will be contacted by your licensor or someone from our placement coordination center to discuss the potential placement. There may be more information available about the children immediately in these cases, because their workers and previous foster parents have had more of an opportunity to get to know them. In some limited circumstances, a preplacement visit may be possible. [See Preplacement visits.](#)

Making a decision

It is important that you gather the information you need to make an informed decision about whether a particular placement is the right fit. It is everyone's hope that children will not have to experience placement changes. We know everyone has different strengths, abilities, and responsibilities. So, if you do not feel confident that you and your family have the time, energy, skills, and commitment to care for a particular child at a particular time, it is appropriate to decline taking a placement and you will be supported in that decision.

Following is a list of questions you may want to ask when talking with a worker about a potential placement. Keep in mind that, depending on the situation, they may not know all of the answers right away.

1. Has the child been in previous placements?
2. What is the child's relationship to his or her family? Who are important people that he or she may need to have contact with?
3. What are the circumstances that led to the child's placement?
4. What are the child's strengths, interests and hobbies?

5. Has the child been physically or sexually abused or neglected?
6. How does the child feel about being in foster care?
7. How will the child relate to other children in your home?
8. Is there any information about the estimated length of placement?
9. Is the plan to return the child to parents, adoption or another option?
10. Is the child functioning academically and socially at grade level?
11. Does the child have any difficulties with learning or at school?
12. Does the child have any behavioral issues?
13. Is the child using life-sustaining medical equipment? (If so, foster parents must be trained to use the equipment.)
14. Are there special care issues related to toileting, eating, or sleep problems?
15. Does the child need frequent medical appointments? Who transports?
16. Where does the child go to the doctor?
17. How often are visits with parents, siblings, and other family?
18. Who will visit?
19. Who arranges the visits?
20. Where are the visits held?
21. What is required from me regarding transportation for visits?
22. Is the child sexually active?
23. Does the child smoke?
24. Has the child ever received a psychiatric or psychological evaluation? What were the recommendations?
25. Will the child be in therapy? Where? How often? Who transports?
26. Is the foster family expected to participate in therapy sessions?
27. Is the child on probation? Why? What are the conditions of probation?
28. If this isn't the child's first foster home, does the child have an assessed MAPCY level? What is it?
29. Is an initial clothing allowance needed?
30. 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

Children will differ in their responses to placement. Some may show signs that they are depressed, angry or scared. Others may appear have no reaction at all. Most will have responses somewhere in between.

Giving the child permission to be sad or mad about not being with his or her family can decrease some of the discomfort the child feels. This will also help to increase the child's ability to trust you.

Eventually, most foster children will exhibit some behaviors associated with the trauma they may have experienced. Some may test your limits. This can happen in a variety of ways. Sometimes, a child may refuse to eat, cling to you, wet the bed, become defiant, or express anger toward you or other members of your family. With patience, you can help a child to understand that they are safe and that their needs will be met.

When a child first comes to your home, do not assume that they know how to do all tasks that may be typically expected of a child their age. Do not assume that expectations and norms were the same at their previous homes as they will be at your home. Take the time to explain how your family does things like housework or eats meals. Be clear about expectations around privacy, sharing, personal space, etc. Be patient and allow children time to learn the routines and expectations.

In the initial days of placement, the placing worker or placement support team staff will provide you with a Child Information form. Take the time to review the information about the child and sign the form. If you have questions, reach out to the placing worker or placement support team staff.

If your home is the first placement for the child since being removed from the parents' care, someone from the placement support team will be in touch with you to assist with the comfort call (see [Comfort calls](#)). They also will attempt to set up an initial meeting for you, the parent, and the child, if possible. Behind the scenes, they will be working on obtaining information about who the child's primary doctor is and ensuring that any necessary physical exams or check-ups are arranged.

As you get to know the children placed in your care, communicate any concerns you have with the workers. They will assist with setting up services that a child may need, such as mental health or school supports. You and your licensor can collaborate to create a provider support plan that identifies the supports needed and who is responsible for providing them.

When a placement isn't working

Talk frequently and openly with your licensor and the child's 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.

Be a good advocate with the agency, school and medical systems to get the child what he or she needs. Services that can help may include personal care attendants, extra respite, therapy or specialized school services.

If you decide that you need to end a placement, you must work with the agency to ensure a

planned discharge. Foster parents agree, when signing the Agreement between Foster Parents and Child Foster Care Licensing Agency, to work with the agency to find additional strategies and supports to resolve issues before requesting removal of a child. If those efforts have been exhausted and you do want to request removal, you must provide the agency with sufficient time (45 days if possible) to plan for discharge.

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.](#)
- 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 must be packed in appropriate luggage, such as a suitcase or duffel bag. Garbage bags or other disposable bags are not suitable.

This list is not meant to be all-inclusive. If you are in doubt as to what should be sent, consult the child's worker.

Have the Foster Child Minimum Clothing Standard completed and give it to the child's worker on the day the placement ends.

Ongoing contact with former foster children

Non-relative foster parents who would like to maintain contact with a foster child should check with the child's worker first.

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.

Preplacement visits

When non-relative foster parents are considering placement of a child, the licensing worker, placing worker, and sometimes placement support team staff, will collaborate to ensure that information about the child's needs is shared with you.

In most cases, there likely will not be an opportunity for a preplacement visit with the children. However, there are some circumstances where a preplacement visit is possible and is in the best interest of the child.

In these cases, the child's worker would work with you to arrange for a preplacement visit. A preplacement visit can help you, the worker, and the child (depending on development and age) to assess if the placement is a good fit.

Depending upon the age of the child and the child's needs, the preplacement visit may be a matter of hours, days, or a series of weekends.

For any overnight preplacement visit, foster parents may be eligible for reimbursement.

- If the decision is made not to place the child in your home after a preplacement visit, 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. The form is available at hennepin.us/fosterparents.
- If the child is ultimately placed in your home, indicate the days of the preplacement visit(s) on the monthly voucher.
 - A preplacement visit 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 (i.e., the day the child leaves)

Out of Home Placement Plan

When a child is placed in foster care, the parents, child protection worker, foster care licensing worker, guardian ad litem, the child's tribe (if applicable) 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 is a written document that describes the out of home placement, the reason for the out of home placement, the services that will be provided to the parents and child, the visitation plan, and more.
- The OHPP should be completed within the first 30 days of placement.
- Everyone involved with the child, including the foster family, parents, and social workers, helps create this plan.

- Each party signs the plan and is given a copy. You should receive a copy of the OHPP for every child you have in placement. If you do not receive a copy of the OHPP, contact the placing worker.
- Your name and address may be 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.

Initial foster care phone calls (comfort calls)

Minnesota law requires that all agencies coordinate an initial foster care phone call (also known as a comfort call) between a child's parent(s) or legal guardian(s) and foster parents within 72 hours of a child being placed or moved to a new foster home.

The Quality Parenting Initiative (QPI) is an approach to strengthening foster care. See the below QPI recommendations about initial foster care phone calls, and find more information at www.qpimn.org. The goal of the call is to:

- Set the stage for partnership between the child's parent or guardian and foster family.
- Open the door for parents and foster families to ask questions to one another that support the child/youth during the difficult time of initial separation.
- Provide a smoother transition for the child by allowing the foster parent to ask for specific information about the child's needs, routines, likes, dislikes, comforts, etc.
- Provide the child's parent with an opportunity to share what they believe is most important to know about their child with the foster parent.

Recommendations for foster parents:

- The call should occur within the first 48 hours after the child/youth has been placed outside of their family's care.
- This call is not conducted in the presence of the child/youth; its primary purpose is initiating partnership between the child's family and foster parents.
- If the child's family is not ready to participate in the conversation, that is okay. Share that you can answer their questions later if they prefer.
- The removal of children is stressful and overwhelming for parents; there may be another family member they would like to have called and relayed information (such as grandmother or other relative or family friend).

Options to initiate the comfort call:

- The foster family initiates the call. Information needed to make the call is provided by the child's worker.
- The child's worker and foster parent call the child's family together.
- The worker calls the child's family and if they are willing to talk with the foster family, a three-way call occurs or the foster family is given the okay to call the family.

Tips for foster parents:

- Explain why you are calling and who you are. Share information about yourself, such as
 - How long you have been a foster parent
 - Who lives in your home, including pets
 - What activities or hobbies you have
 - Information about your daily routine
- Ask the parent for information that would be good for you to know about their child(ren)/youth while you are caring for them. Examples of specific questions you can ask are
 - What is the child(ren)/youth's favorite food?
 - Do they have a favorite toy or game they like to play?

- What do you do to provide comfort to the child(ren)/youth?
- What is a nickname that they might go by?
- If an infant or baby: Is there a type of formula or baby food they prefer?
- Do they have a primary doctor?
- Any food allergies or medical prescriptions I should know about?
- Tell how the foster child is doing:
 - How their first few nights went and how they slept
 - When their child will go back to school/daycare

What to do if the phone call becomes unhelpful:

- These phone calls are meant to be helpful to all persons and demonstrate care and concern for the child/youth.
- If the phone call is not going well and the child’s parent is not ready and able to have the conversation, end the call in a calm manner by simply restating why you made the phone call and indicate that you hope to communicate in the future.
- If you do have to end the conversation, contact the child’s worker and let them know what happened.

This comfort call is meant to be the beginning of a relationship between the the child’s parent(s) and foster family. We know that children and youth do best when there is strengthened communication and relationship between their caregivers. Be sure to share with the placing worker/agency how the phone call went if they were not involved.

Supervised visits

When children are in foster care, it is vital that they be able to maintain their important family attachments. One way to maintain those connections, and to reduce feelings of loss for children, is supervised visits between children and parents. Sometimes, there may also be supervised visits between children and other family members.

In some cases, placing workers or contracted social workers will supervise visits in the community. In other cases, supervised visits will happen at visitation centers. At times, foster parents may be supervising parent-child visits as well.

Foster parents are asked to be open to supervising visits with a child’s parent(s). It is understandable that there may be circumstances that lead foster parents to be uncomfortable with that role. Foster parents can decline. Speak with your licensor and the child’s worker.

Visitation centers

The visitation center is staffed with workers who guide parents in nurturing, communication and building self-esteem in their children. You may be expected to transport the child to the center. If you are not able to transport the child, the child’s social worker may set up transportation services.

Supervised visits in the community

Supervising agencies provide staff persons to supervise visits between foster children and their parents in the community. The visits will be arranged at appropriate community settings such as treatment centers, parks, government buildings, and foster care residences.

Transportation to supervised visits

Visits with parents can be both exciting and difficult for children. Children experience complex emotions at these times, which is why foster parents are strongly encouraged to provide transportation for them. It is a comfort to the child to have someone familiar and safe taking them to and from visits. It is also an opportunity for the foster parent and birth parent to check in about the child and establish a relationship. If you are not comfortable having contact with the parent, you can talk with your placing worker about other transportation options.

Expectations for supporting visitation

- Arrive on time. Visits are often scheduled back-to-back. If you arrive late, staff cannot guarantee the visit will be extended to give parents and children their full time together.
- Call the visitation supervisor if you are not coming or if you will be late for the scheduled visit.
- You must wait 15 minutes past the scheduled time for parents to arrive. Parents often use public transportation or depend on others for rides. After 15 minutes, you may choose to wait longer, or you can leave. If the parents do not arrive for the visit, email the child's social worker and your licensor to inform them of the outcome of the visit.
- Children, regardless of 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 may be flexible in unique circumstances.
- When dropping off babies or young children, please have extra outfits, diapers, wipes, formula, bottles and any ointments that the child uses, as well as a few healthy snacks (unless food is being provided by the parents). Include a plastic bag for any dirty clothing.

Home visits

Home visiting is a valuable tool used to promote proactive interactions, encourage healthy foster parent-child relationships, ensure safety, and provide access to services.

How you can prepare

When a social worker or other team member comes to your home for a meeting:

- Prior to the meeting, prepare a written list of questions or issues you want to discuss.
- Have the names and phone numbers of others concerned with the foster child available at the meeting so that you can share the information if needed.
- If the children in your home are not to be present for part of 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 private information about the child with the worker.
- The worker may want to view the child's sleeping space or speak alone with the child and foster parents are expected to accommodate that.

Social workers must meet with children outside the presence of foster parents

All children in out of home placement must have a face-to-face visit with their caseworker at least once per month. Most visits occur in the child's residence, but some visits may occur in other locations if it is appropriate for the child, such as school, in the community, etc.

During each monthly visit with children **age 4 or older**, social workers should spend time with the child separate from their foster parent.

There may be situations when the social worker determines it is not in the child's best interest to visit with them alone, but these exceptions should be rare. It is considered standard practice for social workers to have private visitation time with a child every month.

This practice promotes child safety and well-being and keeps the child at the center of our work. It is a way to build a trusting relationship with a child and gives them an opportunity to share information and ask questions that may be difficult with their foster parent present. It also builds consistent expectations for children while they are in placement—they know what to expect during a visit and that they will always have access to a private conversation with their social worker without having to ask for it.

During alone time with child, caseworkers can explore the following:

- Whether child feels safe in the home or placement setting
- Determine child's needs, wants, and progress in case plan
- Understand the relationships between children, parents and caregivers
- Discover child's important relationships, connections to the community and cultural needs
- Learn about child's participation in school and age-appropriate activities
- Determine child's need for medical or other social services

Family Group Decision Making (FGDM)

Family Group Decision Making (FGDM) is a family-centered, strengths-based and culturally relevant approach to engaging families that can aid the collaboration between the family, the agency, and other important people.

In Hennepin County, FGDM is an umbrella term that includes a wide variety of facilitated meetings designed to develop a collaborative plan for the protection, safety and care of children.

FGDM gathers the parents and the extended family of children involved with Hennepin County Child Protection, or other child welfare services, together to thoughtfully and carefully plan for the protection and safety of their children.

Relative foster parents are frequently asked to participate in these meetings. Non-relative foster parents may be asked as well. If you are invited to participate in a meeting, the FGDM facilitator will reach out to you in advance to discuss the purpose and answer any questions you have.



Understanding the assessment and payment process, and what expenses foster parents are responsible for.

Northstar Care for Children

The goal of Northstar Care for Children is to increase the number of Minnesota children placed with permanent caregivers. A uniform assessment process is a central feature of Northstar Care for Children. This assessment is called the Minnesota Assessment of Parenting for Children and Youth, or MAPCY.

MAPCY

The MAPCY is the tool used to determine the supplemental monthly payment amounts for children placed in foster care. This supplemental amount is in addition to the basic maintenance rate.

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.

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?

The MAPCY measures eight domains. The eight domains are:

- 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)

MAPCY assessment process

Up to the first 30 days of a child's **initial** out of home placement, foster providers are paid an emergency foster care rate to cover costs related to settling children into foster care. In Hennepin County, that emergency foster care rate is a Level G. The rates are set and published by the Minnesota Department of Children, Youth and Families on an annual basis.

After the first 30 days of initial placement, the foster care rate is determined by the child's MAPCY assessment, plus the basic maintenance rate. Hennepin County has a team of staff who specialize in MAPCY assessments. You will be contacted by one of them to set up an assessment meeting. Prior to the meeting, a prep sheet will be sent to you. This form will be sent to you by mail or electronically, depending on what you discuss with the MAPCY worker. The purpose of this document is to assist foster parents to prepare for the meeting.

There are multiple questions about each domain. The MAPCY assessor enters information into a database for each domain, based on the information provided by you. The database then determines the level for each domain.

During the assessment, it is important for you to communicate thorough and complete information regarding care provided to the children. This will help ensure the assessment outcome matches the child's needs.

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 MAPCY](#)

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. Do not send your completed voucher to accounting until the first of the following month to ensure accurate dates of placement. [See Where to call.](#)

You can complete your paper voucher and return it to Hennepin County by mail. However, we encourage you to instead submit your voucher using our online invoicing system. Instructions for completing vouchers can be found in [Appendix C \(paper\)](#) and [Appendix E \(online\)](#).

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. You may be reimbursed for up to 14 days in some circumstances. If a child is gone from your home, any reimbursement of six days or more 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 payment

You may receive your foster care payment via check (mail) or direct deposit. If you would like to enroll in direct deposit, complete the direct deposit enrollment form in the “Forms” section at hennepin.us/fosterparents.

If you have payment problems or billing questions, call Accounting. [See Where to call.](#)

- In general, payments arrive within 10 days.
- Wait 10 working days from the date you submitted your voucher online 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.

Miscellaneous expenses

Generally, all expenses of caring for a foster child are reimbursed as part of the basic foster care rate. Some very limited expenses may be reimbursed separately. These could include some portions of:

- School events
- High school graduation expenses
- Driver’s training
- Family vacation expenses
- Musical instruments
- Lessons
- Sports and recreational equipment, including bicycles
- Special hair and hygiene products

Reimbursement for these expenses may not always be available. To request reimbursement, you must:

- Get **prior approval** from the placing worker.
- Complete a Miscellaneous Expenditure Voucher and give it to the child’s worker. This form is available at hennepin.us/fosterparents or can be sent to you electronically by your licensing worker. Contact your licensing worker for further assistance.
- Request reimbursement within 30 days of the expenditure.

Phone expenses

If you purchase a cell phone for a foster child, you are responsible for the associated expenses through your monthly reimbursement ([See MAPCY](#)).

Phone expenses are only reimbursed by the agency if specifically outlined in the child’s case plan or ordered by a court. If that is the case, complete a Miscellaneous Expenditure Voucher and give it to the child’s worker with a copy of the phone bill.

WIC (Women, Infants & Children — Special Supplemental Nutrition Program)

Foster children under the age of five may be eligible for WIC. WIC provides vouchers for free food including formula, fruits and vegetables, cereal, juice, milk, eggs and peanut butter, beans and more.

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](#).

Section 8

Medical



Physical health is key to well-being. Help the kids in your care meet medical, dental, and specialized care needs.

Medical and dental care

- Prior to accepting a child for placement, consider whether the child needs any special health care and whether you are able to provide or arrange that.
[See Medical equipment.](#)
- Foster parents are responsible for arranging routine medical and dental care for foster children and follow-up appointments such as therapy.
- 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.
- Consult your foster child's worker about any medical developments or concerns. It is best to request a visit summary from the medical provider to provide the child's worker so it can be included in the child's file.
- If a foster child has not had a physical exam at or 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.
- If the child already has an established clinic or specialist, it is preferred that the child continue to receive care there, if possible. If you believe it is in the best interest of the child to change clinics or providers, discuss it with the placing worker.

Medical and dental emergencies

If a child in your care experiences a medical or dental emergency, you should:

- 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 the emergency after hours number: 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 coverage

Every foster child is eligible for medical insurance.

Foster children can have medical insurance through the following:

- Their parents’ private health insurance.
- Medical Assistance (MA) Fee-for-Service
- A Prepaid Medical Assistance Program (PMAP). PMAP providers for children in Hennepin County are:
 - Hennepin Health
 - UCare
 - HealthPartners
 - Blue Plus
 - Medica
- Hennepin County funds pay for medical services if no other medical coverage is available.
- A combination of the above options.

It is important to know that:

- When a foster child is placed in your home, you should receive information about a child’s medical insurance coverage from the child’s worker. If you do not, make sure to ask for it right away.
- The child’s worker or placement support worker should give you the child’s PMI number. The number allows providers to look up the most current health insurance information. You should also receive a copy of the child’s insurance card, but it may not always be immediately available. If you have not received an insurance card and need one, speak with the child’s worker.
- The foster parent must not take the child to a doctor or medical provider who is not covered

by the child’s health plan.

- Foster parents should not have to pay any co-pays for office visits or medications. If you are asked to pay a fee, especially for a medication, please pay if you are able and request a receipt. Submit the receipt to the child’s worker 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 received it.

If you are asked to sign any billing-related documents, please write “Hennepin County” as the responsible party on the documents. Do not put your personal information on them.

Medical Assistance — PMAP

Most foster children will be on MA-PMAP (Prepaid Medical Assistance Program). As of January 2025 current MA-PMAP providers for children in Hennepin County are Blue Plus, Hennepin Health, UCare, HealthPartners, and Medica.

Medical services provided through the PMAP 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). If the foster child is on a PMAP, you must ensure that the child is seeing providers who are in that PMAP’s network.

Medical Assistance — Fee-For-Service

Children on MA Fee-for-Service (also known as “straight MA”) may go to any physician, dentist, eye care provider, pharmacy, medical facility, mental health provider or other medical provider who accepts Minnesota Medical Assistance.

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

If you are unsure of PMAP or MA coverage

If you are unsure what health plan a child is enrolled in, but you have the PMI number, you can contact the Eligibility Verification System (EVS). Using this system allows you to verify the foster child's MA eligibility and which plan 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 PMI number OR the foster child's Social Security number and date of birth.

Managed health care plan representatives

Each managed health care plan (e.g. Blue Plus, HealthPartners, Hennepin Health, UCare) has member service representatives who can help you access medical services for the foster child. If a 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.

For managed health care plan numbers, [see Where to call](#).

Medical transportation and mileage reimbursement

- If a foster child who is on a PMAP needs transportation to a medical or dental appointment, call the child's PMAP medical provider.
- If the child is on MA Fee-for-Service and needs transportation to a medical or dental appointment, you can request assistance from Minnesota Non-Emergency Medical Transportation (MNET). Call MNET (1-866-467-1724) at least five days in advance of the appointment.

- You can request mileage and parking reimbursement if you transport a child to a medical or dental appointment. Regardless of the child's medical insurance provider, contact MNET at 1-866-467-1724 to request this in advance of the appointment. MNET will give you instructions for keeping a log and obtaining signatures from the medical providers. You will need to bring the log to the appointments. Keep your parking receipts and send the required documentation to MNET. For additional information about MNET, see their website at www.mtm-inc.net/minnesota.

[See Where to call](#).

Managed Health Care Advocates

Hennepin County has Managed Health Care (MHC) Advocates to help you access medical services through the managed health care plan. [See Where to call](#).

Please call the MHC Advocate hotline if:

- You have not been able to get the foster child's Medical Assistance information from the child's worker or the worker's supervisor.
- A medical provider asks you to pay for medical service.
- You are having problems with the managed health care plan.
- You are having problems getting medical services for the foster child.

Medical equipment

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

- The law covers common medical devices such as nebulizers, as well as 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.
- 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 pre-placement 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 you should send in the documentation of your training to your licensor. 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.
- If you don't have the form, get a letter or note from the trainer to document the training.
- 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.

Medication and prescriptions

- You may give appropriate over-the-counter medications according to the manufacturer's label.
- 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 any 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 18 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.

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 form.
- 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 Medical coverage](#)



Be prepared. Know what to do in emergency situations, and learn how complaints are handled.

Emergencies

If your foster child is having a mental health crisis, notify the child's social worker immediately. If the situation is life-threatening and you need an immediate response, call 911.

If the incident is not life-threatening but still an emergency, call and speak with the child's social worker. If you can't reach the child's social worker call the social worker's supervisor. You can also contact the mobile crisis team.

If it is after hours and/or the workers are unavailable, call 612-348-3552. (This is the number to call to make a child protection report but is also where you can reach a worker to consult about or report an emergency).

Mental health crisis services

If someone in your home is experiencing a mental health crisis, you can contact the Cope mobile crisis team at 612-596-1223.

The mobile crisis team:

- Is available 24 hours a day, seven days a week, 365 days a year
- May come to your home, school, or other public place
- Will attempt to calm the situation and help you to decide what to do next

- Offer other types of help depending on your situation

Reporting emergencies

Following any emergency, it is important to report the incident to the child's social worker and your licensing social worker. Things to immediately report to child's social worker and your licensing social worker:

- 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, call 911 first.
- A child returned to you from a parental visit with unexplained injuries.
- A child telling you of alleged abuse or neglect.
- A parent not returning a child at the end of a visit.
- A lost or runaway child.
- Any time you have called the crisis team.
- Any law enforcement involvement at your home (whether a foster child is involved or not).
- Assault, physical or sexual abuse of any child or adult in your home.
- Any incidents involving weapons or firearms.
- Emergency relocation of the family away from the foster home.
- Physical health situations that require immediate attention, including serious communicable diseases.

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

For all other incidents, be sure to complete an incident report within 24 hours.

See: [Where to call](#) and [Incident reports](#)

Incident reports

Foster parents are required 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. This is part of the “Agreement between Foster Parents and Child Foster Care Licensing Agency” form. Incident reports also give foster parents an opportunity to explain how or why the incident occurred, as well as a way to document that the incident was reported as required.

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. You can use the incident report form that is available on hennepin.us/fosterparents.

The following incidents require the completion of an incident report:

- 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 parents or relatives
- Significant behavioral issues including 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 pre-placement, 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, frostbite, sunstroke and heat exhaustion
- Burns
- Near-drowning accidents
- Ingestion of foreign or poisonous substances
- Puncture wounds, tetanus shots
- Any time you have contacted emergency services
- Extreme or unusual behaviors

The list is not all-inclusive. If you are in doubt about whether to complete an incident report, contact your licensing worker.

If any 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.](#)

Complaints

When the agency receives a complaint about a foster home, whether it is a potential violation of foster care rules or potential maltreatment, it must be investigated.

Avoiding complaints

Complete incident reports and keep social workers informed

The most common complaints involve a lack of cooperation with the agency. Usually that means 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 of situations that require incident reports. [See Incident reports.](#)

Follow the foster care rule about discipline

The foster care licensing rule about discipline says “no hitting, slapping, pinching, shaking, kicking or biting.” Do not use any form of physical discipline. [See Appendix B: Child Foster Care Discipline Policy.](#)

Take children to appointments

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

Cooperate with 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 approved by the child’s placing worker.

Supervise children

Provide a higher level of supervision for foster children than you might for most children, especially initially. Many children in foster care have experienced trauma and monitoring for any concerns with aggressive or harmful behaviors is important.

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, hospitalizations, or changes to a license holder's or household member's physical or behavioral health that might pose a risk to a child
- Involvement in counseling that included a mental health assessment or drug/alcohol assessment or treatment
- Any contact with law enforcement; law enforcement calls to the foster home must be reported to the licensor immediately
- 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
- Any change to the care of a child you are legally responsible for, such as living out of home for physical or behavioral health reasons, modified parenting time arrangements, a change in legal custody, or placement in foster care
- 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

Stay in communication

- Return phone calls from the department within two days

In summary:

- Follow the rules and expectations of the county
- Try to have a cordial, cooperative relationship with the child's parents
- Complete incident reports whenever required and send to workers on time
- 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 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.
- If the complaint is made to child protection intake, an 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 260E.14, subdivisions 1-3. If the complaint does not meet these criteria, the licensing program will investigate the complaint to determine whether there are any violations of the licensing rules.

Complaints against foster families

Complaints containing child protection (maltreatment) issues

Complaints containing licensing issues, but not issues that meet criteria for investigation of maltreatment

Who investigates

A child protection worker will investigate the complaint.

A licensing worker will investigate the complaint.

Notifying law enforcement

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 licensing worker generally will not contact the local police department.

Notifying children's parents

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

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

Investigation process

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 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.

Who meets with you

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.

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

Complaints against foster families, continued

Complaints containing child protection (maltreatment) issues

Complaints containing licensing issues, but not issues that meet criteria for investigation of maltreatment

Possible outcomes

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 investigative findings.

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 investigative findings.

How you are notified of the outcome

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

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

Complaints containing child protection (maltreatment) issues

Complaints containing licensing issues, but not issues that meet criteria for investigation of maltreatment

What happens next

If there is a finding of maltreatment that meets the definition of MN Statute 260E.33 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.

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

If there is a finding of maltreatment, the written complaint must be kept for 10 years and then be destroyed.

If there is a substantiated rule violation, it is a statute 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 licensing action. This may include the issuance of a Correction Order and/or recommendations to DHS for a conditional license, fines, denial of an application, indefinite suspension of the foster care license, 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 there is no finding of maltreatment, the written complaint must be kept for four years and then be destroyed.

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 into 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 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.

Complaints about the department

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

- Discuss the problem with the department 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 request 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 consider calling the Office of the Ombudsperson for Families or the Office of the Foster Youth Ombudsperson [See Minnesota Ombudsperson Offices](#).
- Understand that the final decision-making authority rests with the department or court.
- Cooperate with the child’s case plan even when you are in the process of requesting that your concern(s) be addressed.

Minnesota Ombudsperson Offices

The Minnesota Office of the Foster Youth Ombudsperson is an independent state agency that handles complaints from anyone, prioritizing concerns from young people about their rights, care, safety, and placement in Minnesota foster care, including youth in Extended Foster Care and those who have recently aged out of care. They are available to provide resources and information, answer questions about children’s rights in foster care and, in some cases, investigate complaints. They can be reached at 651-946-2940.

The Office of the Ombudsperson for Families is an independent state agency that exists to reduce racial and ethnic disparities and disproportionality in Minnesota’s child welfare system, improve outcomes for children and their families involved in child protection cases, and to ensure that laws protecting children and families are adhered to and implemented in a culturally and linguistically competent manner. The office can be reached at 1-888-234-4939.

Insurance coverage

Foster homes licensed by the Minnesota Department of Human Services are covered by a liability insurance policy through the Minnesota Joint Underwriting Association (MJUA). This policy is liability coverage only; it may pay for obligations which are the result of actions taken as a foster care provider. As with any insurance policy, there are some exclusions.

If you have a question as to whether something is covered, call MJUA.

If something happens that may result in a claim against you, you must notify the MJUA as soon as possible.

[See Where to call.](#)

Runaway/missing children

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

On weekdays:

- First, call the police and make a missing child report.
- Call the child's social worker, who will notify the parents and other people who need to be informed. If you can't reach the social worker, call the worker's supervisor. If you can't reach the worker or supervisor, leave a message.
- Call your licensing social worker. If you can't reach them, leave a message.
- Complete an incident report and send it to your licensing social worker within 24 hours.

On evenings and weekends:

- First, call the police and make a missing child report.
- Then, call the after-hours emergency number 612-348-3552 and report the child missing.
- Leave a message for the child's social worker.
- Leave a message for your licensing social worker.
- Complete an incident report and send it to your licensing social worker within 24 hours.

If the missing child returns home, immediately notify the police and the child's social worker. If the police find the runaway child, they may return the child to your home.

Agreement between Foster Parents and Child Foster Care Licensing Agency

When children are placed in foster care, their parent/s, the responsible agency (county or Tribal agency that has responsibility for placement), licensing agency and foster parents work together to ensure children's well-being, safety and permanency. All standards and policies in statute, rule and guidance from the commissioner must be understood and followed. [Summary of child foster care responsible agency requirements \(DHS-0139A\)](#) should be reviewed with, and a copy provided to, foster parents.

This agreement outlines responsibilities of foster parents and the licensing agency.

Foster care licensing agency agrees to:

1. Assist prospective foster parents with the licensing process by:
 - Providing and reviewing information about family foster care standards and licensing requirements
 - Completing the background study process for applicants and household members
 - Visiting the home to complete a comprehensive home study assessment
 - Considering and processing variance requests.
2. Provide orientation and create ongoing training plans with foster parents to prepare them to meet the needs of children. Required topics include, but are not limited to:
 - Trauma and attachment-informed parenting skills
 - Parenting strategies to affirm and support the racial, cultural and religious identities, and respect sexual orientation and identities, of children in foster care
 - Prudent parenting
 - Skills for trauma-informed parenting to care for children with prenatal exposure to alcohol and children with behavioral and mental health challenges
 - Child passenger restraint systems, sudden unexpected infant death and abusive head trauma prevention, and medical equipment, if applicable.
3. Describe the state's liability insurance coverage provided for licensed foster parents caring for children.
4. Help foster parents make informed decisions as to the suitability of their home to care for specific children and understand that a decision not to take a placement of a child will not jeopardize consideration of their home for other children. If 12 months have passed without accepting a child for placement, agency staff may discuss a plan to close the license.
5. Help foster parents understand the differences between foster care, transfer of permanent legal and physical custody, and adoption.
6. Discuss agency practices to assist foster parents interested in becoming a permanency resource through adoption or transfer of permanent legal and physical custody for children who cannot be reunified with their parents/guardians, including children statewide.
7. Investigate licensing reports to determine compliance with requirements.
8. Provide foster parents with written and verbal opportunities to evaluate licensing agency practices.
9. Include foster families in annual evaluations of their performance, including their roles and responsibilities, support needs and outcomes of placements for children in their home.
10. Notify the commissioner immediately upon learning about safety concerns that may affect children.

Foster parents agree to:

1. Allow representatives of the responsible social services and licensing agencies 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. Acknowledge that their role as foster parent is intended to be temporary. Foster parents are expected to support reunification and transitions to foster or permanency homes in accordance with the case plan and court orders.
3. Accept children for foster care placement as described in the statement of intended use.
4. Contact licensing agency to inform of possibility of accepting placement of child/ren if contacted by a placing worker.

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5. Notify licensing worker within 24 hours of accepting placement of a child.
6. Regularly engage with a child's parents/guardians to facilitate a co-parenting relationship when the goal is reunification, unless such a relationship poses a danger to the mental or physical health of child or foster parent/s.
7. Actively cooperate and participate with the responsible agency case manager and other involved service providers to develop and implement child's out-of-home placement plan, including visitation and preserving family relationships.
8. Provide for child's needs, including food, clothing, shelter, daily supervision, school supplies, personal needs and, consistent with the out-of-home placement plan, provide timely access to medical and dental care, including prescription medications and mental health services by qualified professionals.
9. Develop a plan for a smoke-free home environment for children in foster care.
10. Provide supervision in accordance with a child's age and needs, as assessed in the Minnesota Assessment of Parenting for Children and Youth (MAPCY).
11. Immediately report a missing foster child to the responsible county or Tribal agency and provide sufficient information on when they left, what they were wearing and other relevant information that will facilitate the agency staff to actively search for the child. If unable to contact county or Tribal case manager immediately, call their agency's 24-hour coverage line or law enforcement.
12. Report to the responsible agency plans to take child out of state, when they 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 child in their care for foster care.
13. Make meaningful effort to increase understanding of, and demonstrate respect for, the religious, racial and cultural heritage, as well as sexual orientation and gender identity of children in their care and their families.
14. Acknowledge the effect of trauma and difficulties children in foster care 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 out-of-home placement plan or arranged by the responsible county or Tribal social service agency.
15. Ensure child's personal property and funds in the foster home are available for their use (unless restricted in their out-of-home placement plan). 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.
16. Support placement stability for children by asking for consultation and direction from the responsible agency if issues arise that cannot be resolved between foster parents and 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 a request for removal. When all resources are exhausted, provide the responsible agency with sufficient time (45 days, if possible) to plan for discharge.
17. Allow the responsible agency caseworker and child to meet alone.
18. Immediately notify the licensing agency of:
 - Any changes to the license holder or household members' physical or behavioral health that may affect the license holder's ability to care for a foster child or pose a risk to a foster child's health
 - Police contact at the foster home
 - Incidents that may result in criminal or delinquency charges for an applicant or household member
 - Other safety concerns that affect a child.
19. Comply with requirements of the Family Foster Care Confidentiality Agreement, Attachment A, incorporated in this agreement.

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

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

FOSTER PARENT

DATE

FOSTER PARENT

DATE

CHILD FOSTER CARE LICENSING WORKER

DATE

Attachment A: Child Foster Care Confidentiality Agreement

- A. Foster parents, having access to not public information* about a foster child and their family, agree not to discuss or otherwise disclose that information to any other person prior to the child's placement in foster care, while they are in a foster home, or after they leave a foster home, except to the following:
- (1) **The licensing agency.**
 - (2) **The responsible social services agency.**
 - (3) **Those involved in the child's treatment plan.** Foster parents must identify and share information, if appropriate, with persons who are directly involved in the child's treatment plan. A treatment plan is a written plan for intervention, treatment and services for children in a foster setting.
 - (4) **Child's respite care, substitute care providers and short-term babysitters.** Foster parents must give these providers information needed to care for children, including their emotional, behavioral, medical and physical health conditions; medications child takes; and 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 routine or emergency medical and dental care for child, 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 providers necessary information to care for them, including information required in an application for a child care program.
 - (7) **Child's education professionals.** When foster parents enroll a child in school according to their out-of-home placement plan, foster parents may communicate to school staff necessary information to educate children, including information required for enrollment in school.
 - (8) **Child's extracurricular, social or cultural activity programs.** When foster parents enroll a child in extracurricular, social or cultural activities under the reasonable and prudent parenting standard, they may communicate to organization staff necessary information for a child to enroll and participate in activities.
- B. Foster parents agree not to share any not public information about a foster child and their family with neighbors, family members of foster parents not approved by the responsible agency to receive information, or others who do not provide services or care to foster children. Foster parents agree not to share not public information about foster children 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 foster children or record retention, they will discuss these questions with the county or Tribal agency that has responsibility for placement.

*As defined by [Minnesota Statutes 13.02, subd. 8a.](#)

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

Contact the **MDHR** directly to file a complaint:

Minnesota Department of Human Rights
 540 Fairview Avenue North, Suite 201
 St. Paul, MN 55104
 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

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

Contact the **OCR** directly to file a complaint:

Office for Civil Rights
 U.S. Department of Health and Human Services
 Midwest Region
 233 N. Michigan Avenue, Suite 240
 Chicago, IL 60601
 Customer Response Center:
 Toll-Free: 800-368-1019
 TDD Toll-Free: 800-537-7697
ocrmail@hhs.gov



For accessible formats of this information, ask your county worker.
 For assistance with additional equal access to human services, contact
 your county's ADA coordinator. (ADA4 [2-18])

NO ENGLISH



651-431-4660

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

ያስተውሉ፡ ካለምንም ክፍያ ይህንን ዶኩመንት የሚተረጎምሎ አስተርጓሚ ከፈለጉ ከላይ ወደተጻፈው የስልክ ቁጥር ይደውሉ።

ملاحظة: إذا أردت مساعدة مجانية لترجمة هذه الوثيقة، اتصل على الرقم أعلاه.

သတိ။ ဤစာရွက်စာတမ်းအားအခမဲ့ဘာသာပြန်ပေးခြင်း အကူအညီလိုအပ်ပါက၊ အထက်ပါဖုန်းနံပါတ်ကိုခေါ်ဆိုပါ။

កំណត់សំគាល់ ។ បើអ្នកត្រូវការជំនួយក្នុងការបកប្រែឯកសារនេះដោយឥតគិតថ្លៃ សូមហៅទូរស័ព្ទតាមលេខខាងលើ ។

請注意，如果您需要免費協助傳譯這份文件，請撥打上面的電話號碼。

Attention. Si vous avez besoin d'une aide gratuite pour interpréter le présent document, veuillez appeler au numéro ci-dessus.

Thov ua twb zoo nyeem. Yog hais tias koj xav tau kev pab txhais lus rau tsab ntaub ntawv no pub dawb, ces hu rau tus najnpawb xov tooj saum toj no.

ဟ်သုဉ်ဟ်သးဘဉ်တက့ၢ်. ဖဲနမ့ၢ်လိဉ်ဘဉ်တၢ်မၤစၢၤကလီၤလၢတၢ်ကကျိးထံဝဲဒၣ်လံာ် တီလံာ်မိတခါအံၤန့ၣ်, ကိးဘဉ်လိတဲစိနီၢ်ဂံၢ်လၢထးအံၤန့ၣ်တက့ၢ်.

알려드립니다. 이 문서에 대한 이해를 돕기 위해 무료로 제공되는 도움을 받으시려면 위의 전화번호로 연락하십시오.

ໂປຣດຊາບ. ຖ້າຫາກ ທ່ານຕ້ອງການການຊ່ວຍເຫຼືອໃນການແປເອກະສານນີ້ພຣີ, ຈົ່ງໂທໂປທີ່ໝາຍເລກຂ້າງເທິງນີ້.

XHubachiisa. Dokumentiin kun tola akka siif hiikamu gargaarsa hoo feete, lakkoobsa gubbatti kenname bilbili.

Внимание: если вам нужна бесплатная помощь в устном переводе данного документа, позвоните по указанному выше телефону.

Digniin. Haddii aad u baahantahay caawimaad lacag-la'aan ah ee tarjumaadda (afcelinta) qoraalkan, lambarka kore wac.

Atención. Si desea recibir asistencia gratuita para interpretar este documento, llame al número indicado arriba.

Chú ý. Nếu quý vị cần được giúp đỡ dịch tài liệu này miễn phí, xin gọi số bên trên.

HENNEPIN COUNTY
MINNESOTA

Child Foster Care Discipline Policy

Minnesota Rules, part 2960.3080, Subp. 8

Foster Parent(s) Name(s): _____ Provider #: _____

Child Foster Care foster parent(s) must have and follow a discipline policy. In developing this policy, foster parent(s) must consider the child/youth's abuse history and needs relating to their developmental, cultural, disability, and gender needs. Foster parent(s) should discuss the discipline policy with all caregivers.

I/we plan to:

- Praise and encourage the child/youth when:

- Use a time-out, depending on their age and stage of development, when:

- Give rewards, such as _____, when

- Take away privileges, such as _____, when

- Other (specify):

- Other (specify):



Appendix B, continued

By initialing below, I/we agree to **NEVER**:

_____ use **corporal punishment**, such as spanking, rough handling, shoving, ear/hair pulling, shaking, slapping, kicking, biting, pinching, hitting, throwing objects at the child.

_____ use **verbal abuse**, such as name calling; disrespectful statements about the child/youth or child/youth's family, race, gender, disability, sexual orientation, religion, culture, statements meant to shame, threaten, humiliate, or frighten the child/youth.

_____ punish a child/youth for **mistakes with toilet habits**, such as bed wetting, soiling.

_____ withhold **basic needs**, such as a healthy diet, water, clothing, hygiene facilities, normal sleeping conditions, proper lighting, educational services, exercise activities, ventilation, proper temperature, mail, family visits, positive reinforcement, nurturing, or medical care.

_____ assign **work that is dangerous** or is not in agreement with the child/youth's case plan.

_____ discipline a child/youth for the **unrelated behavior or action** of another child/youth.

_____ restrict a child/youth's **communications** beyond what is allowed in the child/youth's case plan.

_____ require a child/youth to assume **uncomfortable or fixed positions** for an extended length of time or to march, stand, and/or kneel as punishment.

_____ require a child/youth to **punish other children/youth**.

_____ use **mechanical restraints** or confining a child/youth in a locked room

Foster Parent Guide:

By signing below, I/we acknowledge that I/we have a copy of the current Foster Parent Guide on the date signed below. I/we realize that I/we am/are responsible for complying with all the information in the Foster Parent Guide. I/we understand that if I/we have any questions about the information in the Foster Parent Guide that I/we will discuss them with my Child Foster Care Social Worker.

By signing below, I/we have read and agree to follow this Discipline Policy and each child/youth's case plan regarding discipline. I/we will talk with the Child Foster Care social worker if we have any questions about this policy and will update them with any changes about this policy.

Name of Foster Parent (print)

Signature of Foster Parent

Date

Name of Foster Parent (print)

Signature of Foster Parent

Date

Appendix C

Paper voucher

There are five steps to completing the paper 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 2021, enter 1-1-21 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 1-31-21 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 as early as the first day of the month following services.
6. If the voucher is not signed, or if it is dated, postmarked or submitted prior to the first of the month, it will be returned to you.

Appendix D

Hennepin County HHS Accounting
 Government Center
 300 S 6th St Ste A1500
 Minneapolis, MN 55487-0155

Page No: 4
 Date: 04/28/2021

We have an online invoice system. Contact us to get more information about how to submit electronically.

Our email address is HSPH.FIN.Payables@hennepin.us

DO NOT USE THE DROP BOX AT THE GOVERNMENT CENTER TO SUBMIT YOUR VOUCHERS

ID: 00000 PROVIDER-NAME
 PROVIDER NAME ADDRESS
 Month: April 2021 CITY STATE ZIP

INSTRUCTIONS: Enter service dates for which you have not yet billed. The service end date is the date the child left the home, or if the child is still in the home, the last day of the month. For example, the child was in the home for the entire month of April, 2021. Enter 04-01-2021 in service begin date and 04-30-2021 in the service end date. Sign and date the form at the bottom. Attach any miscellaneous vouchers pertaining to this client and mail to the above address.

Client ID	Service	Description	Service Dates		Units	Rate	Total
			From	To			
CHILD'S NAME (123456789)-client ID#							
123456789	999999999	Child Family Foster Care				22.65	
123456789	999999999	MAPCY				10.75	

Northstar Care for Children is a new program that went into effect on January 1, 2015. Northstar is a set of rules that defines how providers are reimbursed for Foster Care. All children who enter placement on or after January 1, 2015 are part of Northstar Care. The DOC has been replaced by the MAPCY assessment. For children who entered your home on or after 1/1/15 you will see a different rate for the R & B, and a MAPCY rate instead of a DOC. If a name appears twice on your voucher please fill-in both boxes with the full range of dates that the child was in your home. If you have questions, please contact your License Worker.

**** Vouchers will be returned for the following reasons:

No Service Dates Entered

No Signature

Dropped off or postmarked prior to the 1st of the next month

PER MINNESOTA STATUTE 471.391 SUBD.1

I declare under penalties of law that this account, claim, or demand is just and that no part has been paid

SIGNATURE OF CLAIMANT: _____

DATE: _____

Appendix E

Online invoicing user guide

Form link:

http://formcatalog.hennepin.us/hhs/human_services/financial_analysis_accounting/HSPH_Invoicing/html

Completing the form

Open the online invoicing tool from its link. Complete the fields in both the first and second tabs.

- **Information**

- Regardless of whether you are processing a corporate or private invoice (voucher), you must fill in all fields.

HENNEPIN COUNTY
MINNESOTA

Human Services and Public Health Invoicing

Information | Verify Information

Provider name. **Note: Do not use special characters in the name: /" < > [] ***

Provider ID #*

Phone number

Address

City

State
MN

Zip Code
#####

Invoice ID
HC79232218

Email address*

Please re-enter your email address to confirm*

Will this be a corporate, private, or shelter option?*

Corporate Private Shelter

- **Choose the option:**
"Corporate" or "Private."

Appendix E, continued

- **Corporate**

- Download the spreadsheet — this will open in Excel. You will need to 'Save As' to your local computer before completing.
- Complete the spreadsheet and include the Total from the spreadsheet in the space provided on the web form (see below).
- Save and attach to the online invoice page.
- Make sure to include the Total in the space provided (from the Total in the spreadsheet).

Will this be a corporate, private, or shelter option?*

Corporate Private Shelter

Did you bill MA (Medical Assistance) prior to filling out this invoice request?*

Yes No

[Click here to download a blank invoice template.](#)

Click **attach** to update the invoice file: **NOTE: File must be an Excel format (xlsx, xls), and use no special characters, e.g. [], in the file name**

Attach

Are you billing for service dates beyond 90 days?*

Yes No

Total amount (\$)*

This Field is a required field.

Provider Name*	Provider ID*	Facility ID	SSIS Person (client ID)*	Client Last Name*	Client First Name*	SSIS Service Arrangement #*	Service Code* (select from drop down)	Service Date Begin*	Service Date End*	Unit Type (stop down)*	No. Of Units*	Unit Rate (\$)*	Amount (\$)	Client Fee (\$)	Subtotal (\$)
ABC	123111	4561	123456789	Doe	John	123456789	NA	1/1/19	12/1/19	Day	1.5	2.00	3.00	2.00	0.00
													0.00		0.00
													0.00		0.00
													0.00		0.00
													0.00		0.00

- Once you have completed the above information, proceed to the next tab and verify/submit your invoice.

Information **Verify Information**

I declare, under the penalties of perjury, that said claim is just and true; that the money therein charged is for the purposes therein stated; that the services therein charged for, were actually provided and were of the value therein charged; that no part of said claim has been paid.

Signature*

Back

Appendix E, continued

- **Private**

- If completing an invoice as a “Private” provider, you don’t need to fill out the additional spreadsheet. Simply complete the fields below. You can add as many rows and as many people as you need in this section.

HENNEPIN COUNTY
MINNESOTA

Will this be a corporate, private, or shelter option?*

Corporate Private Shelter

Child's last name

Child's first name

Child's middle name

Client identifier #

Service authorization #

Description

Start Date	End Date	Units (Days)	Rate (\$)	Total (\$)
			Subtotal (\$)	

Delete child

Add a child

Total amount (\$)*

This Field is a required field.

Click here to add another row for the child.

- Once you have completed the above information, proceed to the next tab and verify/submit your invoice.

Information **Verify Information**

I declare, under the penalties of perjury, that said claim is just and true; that the money therein charged is for the purposes therein stated; that the services therein charged for, were actually provided and were of the value therein charged; that no part of said claim has been paid.

Signature*

Appendix E, continued

What happens next?

Once you submit your invoice, email confirmations will be sent to the email address provided on the form:

Provider confirmation email — Corporate

From: noreply@hennepin.us <noreply@hennepin.us>

Sent: Monday, October 14, 2019 9:47 AM

Subject: Your Online Invoice has been received

COUNTY will make payment within thirty-five (35) days from receipt of the invoice. If the invoice is incorrect, defective, or otherwise improper, COUNTY will notify PROVIDER within ten (10) days of receiving the incorrect invoice. Upon receiving the corrected invoice from PROVIDER, COUNTY will make payment within thirty-five (35) days.

For your reference, your Invoice ID is: HC94901480

You may check the status of your invoice through the Human Services and Public Health Invoicing tracker.

When checking the status, you may search by the Invoice ID (please copy from above) or by your Provider ID number.

Thank you.

Provider confirmation email — Private

From: noreply@hennepin.us <noreply@hennepin.us>

Sent: Monday, October 14, 2019 9:35 AM

Subject: Your Online Invoice has been received

Your voucher has been received by Hennepin County, we expect to have your payment processed within 10 business days.

For your reference, your Invoice ID is: HC56342459

You may check the status of your invoice through the Human Services and Public Health Invoicing tracker.

When checking the status, you may search by the Invoice ID (please copy from above) or by your Provider ID number.

Thank you.

Provider (corporate or private) email when status is changed

From: noreply@hennepin.us <noreply@hennepin.us>

Sent: Monday, October 14, 2019 12:41 PM

Subject: Invoice status change

Your invoice has been updated.

Invoice ID: HC39170387

Comments regarding your invoice (if any):
testing comments to provider

You may check the status of your invoice through the Human Services and Public Health Invoicing tracker.

When checking the status, you may search by the Invoice ID (please copy from above) or by your Provider ID number.

Thank you.

Status tracker

Provider can check status of individual invoices or all of their online invoices, by clicking on the link in the email they received. They can search by invoice number or provider ID.

Status tracker link:

https://formcatalog.hennepin.us/hhs/human_services/financial_analysis_accounting/HSPH_Invoicing_Tracker/html

Appendix F

Child Foster Care Respite provider/substitute caregiver information form instructions

You may find copies of the form at hennepin.us/fosterparents or request a copy from your licensor.

Instructions for the foster parent requesting respite or substitute care:

- The foster parent with whom the child resides completes the bulk of the form to provide information to the respite or substitute caregiver.
- Complete the form in its entirety and provide it to the respite provider or substitute caregiver before care is provided.
- Be sure to share information about food allergies or sensitivities. If the child has a very specific diet, please consider sending enough of the particular foods for the time the child is in respite care.
- List any current injuries (bruises, bumps, etc.) on the form.
- Make sure to describe any specific hair or skin products the child uses and, in some cases, you should send those products with the child to respite.
- Provide details about the child's schedule (school start time, end time, normal nap times, etc.) and fill in all of the information about any scheduled appointments or visits. These include visits with parents/family, medical/dental appointments and therapy.
- List first and last names of persons who the child can contact, such as birth parents, grandparents, brothers, sisters, and/or friends.
- It is extremely important that you describe the behavioral and emotional needs (e.g. running away, aggression, food hoarding, etc.) of the child.

- Complete the medical information section carefully. You must send all medications and medical equipment with the child to respite care. Send medication in original containers.
- The foster parent requesting respite must complete the box on top of page 3 and sign the form.

Instruction for the respite or substitute caregiver provider:

- The person providing respite or substitute care must complete the box ("Respite Provider/ Substitute Caregiver") on the bottom of page 3 and sign the form.
- If you are providing the respite care, you must have the required training and document it in this section of the form.
 - If the child is under age 6 but you have not completed the SUID/AHT training in the last five years, you cannot provide the respite care.
 - If the foster child is under age 8, you must have completed the car seat training within five years in order to provide respite.
 - If the foster child uses medical equipment, you must have the required training.
[See Medical equipment](#)

Both the foster parent requesting respite and the respite provider or substitute caregiver should keep a copy of the signed form.

Appendix G

Child foster care respite reimbursement form instructions

You may find copies of the form at hennepin.us/fosterparents or request a copy from your licensor.

Instructions for the foster parent requesting respite care:

- Complete the top section, including your name(s), the workers' names, respite dates, and information about foster children.
- Give the form to the respite provider along with contact information for your licensor. Be sure to include a copy of the Child Foster Care respite provider/substitute caregiver information as well.
- Your licensor will need to approve final payment.

Instructions for the foster parent requesting substitute care:

- Complete the top section, including your name(s), the workers' names, respite dates, and information about foster children.
- Complete the section title "In Home Respite," including the substitute caregiver's name. Sign and date.
- Send the form to your licensor who will need to approve final payment.
- The signed Child Foster Care respite provider/substitute caregiver information form must be attached to the respite reimbursement form in order to get reimbursement.

Instructions for respite providers:

- After you provide respite, complete the "Out of Home Respite" section of the form. Sign and date.
- The signed form needs to be sent to the licensor/social worker for the foster parent who requested the respite. The form should not go to your licensor but should go to the licensor of the child(ren)'s foster parent.
- The signed Child Foster Care respite provider/substitute caregiver information form must be attached to the respite reimbursement form in order to get reimbursement.



Hennepin County

Human Services

300 South 6th Street, Minneapolis, MN 55487

hennepin.us