



UNDERSTANDING THE REGULATIONS:

What Alaskan Foster Parents Need to Know

#7

Record Keeping
1.0 Training Credit



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The Alaska Center for Resource Families
1-800-478-7307

Funded by the State of Alaska
Office of Children's Services



UNDERSTANDING THE REGULATIONS:

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Recordkeeping **7 AAC 50.130**

This series was compiled with help from the State of Alaska Office of Children's Services to help foster parents understand the foster care regulations. This series is a guide to the regulations, but is not a substitute. In all discrepancies between the information in this series and the regulations, the regulations are the final authority. Contact your licensing worker for a complete copy of the regulations.

FOSTER PARENT COMPETENCIES

This self-study module addresses part or all of the following Child Welfare League of America Competencies for Foster Caregivers:

905-1 *The foster caregiver knows the state's/province's licensing rules and the mandates and expectations of foster families to remain licensed.*

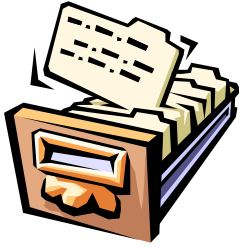
910-5 *The foster caregiver knows how to identify cognitive, behavioral, social and emotional strengths and problems of children in care, can verbally communicate this information to the worker in assessment and planning conferences and knows how to document pertinent information in writing.*

910-7 *The foster caregiver knows the agency's policies regarding reporting, including reporting of emergencies, vacation planning, the adjustment of the foster family and the child in care or in respite care; and procedures for reporting grievances.*

940-3 *The foster caregiver knows strategies to engage and involve family members to remain active participants in the lives of their children while the children are in foster care placement.*

A recordkeeping system helps you have an organized way to find information regarding a child. These records will be returned to the agency when the child leaves your home. They will be passed along to the next caregiver of the child. The more complete your information, the better the continuity of care for the child. In addition to keeping records for the child, foster parents need to keep records for themselves. *The record for you and your spouse* is a record that you have met the standards set by the State of Alaska for being a foster parent.

WHEN A CHILD IS PLACED WITH YOU-- *What records do you need to keep?*



The record for your foster child is modeled on the Placement Packet you receive when a child is placed with you. If you do not get a Placement Packet, **ask for it**. OCS developed the Placement Packet for use throughout Alaska. You should use the Placement Packet as the central place to keep your records. You have the right to ask for the information that is in it. The child's placement worker should give you a Placement Packet within five working days of placement of a child. If you do not get it, *ask for it*. The Placement Packet includes the forms listed below.

- Review the **Foster Care Placement Plan and Agreement*** with your worker. This includes information about visitation, medical information, education information, reason for placement, foster care payment, and behavioral issues.
- If this is an *emergency placement*, complete the **Emergency Shelter Care Health Review***. This is to provide a brief review of a child's general health appearance. Return to Social worker. Keep a copy for child's records.
- Each Placement Packet should include the **Consent for Emergency and Routine Medical Care***. This gives you authority to obtain medication, dental and emergency care for the child. Within the next 30 days, arrange for a health exam for all children over three years who have not had an exam within the last year or for all children under three years who has not had an exam within the last three months.
- Inventory what the child comes with and fill out the **Clothing Inventory and Request Form***. If a child needs some things immediately before your first foster care payment comes in, make the necessary arrangements or submit the request to your placement worker. This form also serves as the **Clothing Inventory** when the child leaves your care.
- Your Placement Packet should include a copy of the **Authorization and Invoice Form (A & I)**. Your placement worker fills out the left side. You will fill out the right side and send it in at the end of the month for payment. If you do not get an **A & I**, contact your placement worker.

** Samples of these forms are included in back of this information packet.*

What records do you need to keep while the child is with you?

Keep a *log of significant events and experiences* of child. Keep school photographs, report cards, drawings, photos of home, family and pets, and photos of holiday or school events. Keep these in the envelope included in the Placement Packet or in a file or binder you provide. These are very important records! These are the tangible memories of the child's history that go with the child when he leaves your home.

During the time your child is placed with you, *keep records of any medical care or counseling sessions* the child received. These records need to include name of child, dental or medical provider, address and phone of provider, dates and type of treatment provided. These records include immunization records, medical or dental treatment, and records of any mental health or substance abuse counseling.



Keep an *“injury log”*-- a running record of serious cuts, bruises, injuries or medications given. This documents all injuries to the child and may protect the foster parents from false allegations.

Keep a *record of any reports made to the placement worker* about suspected abuse or neglect, behavior problems, injuries, and concerns about visitation or child progress. Make a notation in a log or keep a copy of anything you send to the agency.

What records need to go with the child when he leaves?

When a child leaves your home, be sure all the information in the Placement Packet is updated. That includes all medical records, immunization records, school records and report cards. And all those photos and drawings you have been saving during the time the child was with you? Make sure they go with the child! The social worker should pass these on to the child's next caregiver or to the birth parents.

Use the **Clothing Inventory and Request Form*** to document all clothing and personal items and toys that are going with the child. Be sure to include all clothing, toys and personal items supplied by the birth parents.

The **Child Information Guide*** is not mandatory but is an excellent tool to help the transition into the next placement. The Child Information Guide gives information about the child's current interest and abilities in hygiene, school, discipline, bedtime and eating. Some areas encourage foster parents to share this information over the phone.

** Samples of these forms are included in back of this information packet.*

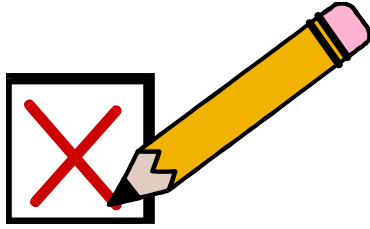


FOR YOUR RECORDS AS A FOSTER PARENT

The records you keep for yourself provide a file of materials that demonstrate compliance with licensing regulations. Your licensing or placement worker may request (and has a responsibility) to review these records.

- ☞ Keep your license and the name and phone number of your primary licensing worker (or local OCS worker) and his or her supervisor. It is helpful to keep a copy of the foster regulations and Alaska Foster Parent Handbook for reference.
- ☞ Any approval of variances should be in writing. Keeping a copy for your file is a good idea, but not required. If the worker who places a child in your home and your licensing worker are not the same person, remember that variances need to be approved through licensing, not just suggested by your caseworker.
- ☞ Record your training hours. (Two parent foster homes need 15 hours in the license year. Single foster parents need 10 hours.) Call the Alaska Center for Resource Families at 1-800-478-7307 to find out about foster parent training.
- ☞ If you use employees in your foster home, you need to keep up-to-date records on each employee, including names, addresses, training, criminal history, and references.
- ☞ Document fire drills you practice with your children. Document when you have drills, who participated and how they went. Post your **FIRE EVACUATION PLAN** in a place where family members can review it.

Retain your records for at least 3 years. These records should be available to your licensing representative to review.



CHECKLIST FOR FOSTER PARENT REQUIRED RECORDKEEPING

GENERAL CHECKLIST:

- Write the date each time you add something or write something in your records.
- Identify who is making each entry using initials or a signature.
- Keep your records in a safe place.

FOR EACH FOSTER CHILD:

- Have a file for each child clearly identified with his or her name.
- In the child's file, keep updated medical information about the child, including the consent for emergency and routine. Establish proof of immunization with a copy of the child's immunization card.
- In the child's file, keep any dental records you may have or make a note of what dental treatment a child has received and from who.
- In the child's file, keep a record of what counseling or behavioral services a child has received and from who.
- In the child's file, keep any education records you may receive (such as individual education plans or report cards).
- Return this record to the placement worker when the child leaves your home.

FOR YOUR OWN FOSTER HOME RECORDS:

- Document your monthly fire drills.
- Keep a record of your completed training hours.

NOTIFICATION OF CHANGES IN YOUR FOSTER HOME

(Reference: 7 AAC 50.140 Reports)

According to the regulations, you must notify OCS or your placement agency when certain changes take place in your home.

Notify your licensing worker 30 days or more before the following changes:

- change in operator
- change in name of the foster home
- change in the sex or age of children you are willing to serve
- when wanting to delete or add of a specialization
- addition of an adult to household for 45 days or more
- a change in the household (births, adoptions, etc.)
- when moving to a new location

Contact your licensing worker immediately regarding:

- the death of a child
- injury or illness of child require medical attention
- fire, flood, or other disaster to your home
- any unplanned change in any item in the first list
- an emergency absence of foster parent exceeding 72 hours to confirm or revise the plan of your emergency substitute caregiver

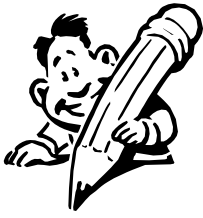
Contact the child's placement worker immediately regarding:

- death of a child in care
- attempted or threatened suicide by a child in care
- life threatening illness or hospitalization of a child in care
- if child is gone without permission for longer than 10 hours

Contact the child's placement worker on first working day regarding:

- pregnancy of a child in care
- severe distress or depression of a child in care
- violation of condition of probation
- allegations of criminal conduct by a child

If a child does not have a placement worker, report the change to your OCS office. Document when and whom you talked to and put that documentation in either the child's file or your foster parent file.



SUGGESTIONS OF OTHER RECORDS TO KEEP

These records are not required but have been found to be helpful.

- Keep a list of phone numbers you call often or have found helpful. If you contact an agency or OCS, always find out whom you talked to and *write it down!* It helps for follow up calls when needed.
- Many foster parents keep notes on behaviors, changes, challenges, sexual or physical acting out behavior, and other events in a child's life such as visits or transitions. This picture into the child's world establishes patterns and can be very helpful in describing behavior to a placement worker or a therapist.
- Keep track of telephone calls. Write down names of people you talk to and note if you were unable to reach someone. When you leave a telephone message, always leave your name, phone number, what it is about and when is a good time to reach you. If you have an emergency, let that be known and ask to talk to someone else who is available.
- Keep copies of letters with OCS workers, agencies, and legal representatives. Date and sign these letters. This is especially important if you are advocating for services, providing information, explaining an action or seeking services.
- Keep copies of anything in writing that concerns complaints, investigations and plans of correction about your foster home. Request a copy of the investigation findings if applicable. If required to make a correction or complete additional training as result of an investigation, request written verification you completed what was required.
- For particularly explosive or difficult cases, you may wish to retain your records for longer than the suggested three years. This is especially wise in cases of abuse allegations, sexually acting out children, or children who are removed from your home.
- Foster parents should be aware that licensing records maintained by OCS are open and subject to public inspection. Some parts of licensing records, however, are closed for reasons of confidentiality. The following records are not available to the public:
 - ✓ Names of children in care and their parents.
 - ✓ Records that would be an invasion of foster parent's personal privacy such as the background information statement submitted with foster care application.
 - ✓ Material protected under state or federal law such as a criminal justice printout on a foster parent or a medical report on a foster parent.

For more information about the **UNDERSTANDING THE REGULATIONS: What Alaskan Foster Parents Need To Know** series, contact the Alaska Center for Resource Families at 1-800-478-7307. In Fairbanks/North Pole, call 479-7307.

FORMS INCLUDED IN THE PLACEMENT PACKET

Supplement to Recordkeeping in the series **UNDERSTANDING THE REGULATIONS: What Alaskan Foster Parents Need to Know** written by the Alaska Center for Resource Families.

Foster Care Placement Plan and Agreement
Emergency Shelter Care Health Review
Consent for Emergency and Routine Medical Care
Clothing Inventory and Request Form
Child Information Guide

Alaska Department of Health and Social Services
Division on Family and Youth Services

FOSTER CARE PLACEMENT PLAN AND AGREEMENT

Child's Name: _____ DOB: _____ Number: _____

Foster Parents: _____ Provider #: _____

REASON FOR PLACEMENT: _____

MEDICAL INFORMATION is on Consent for Medical Care (06-9716) and is appended to this Foster Care Plan
Responsibility to obtain immunization records (Who): _____

EDUCATIONAL INFORMATION

School child is attending: _____ **Phone:** _____

School Child will attend: _____ Phone: _____

School (if changing) to be arranged by: _____.

Grade Level Performance: At Grade Level Above Grade Level Below Grade Level

Certified Special Ed. Needs: Learning Disability Self-Contained/Seriously Emotional Disturbed

Gifted Resource Help Individualized Education Plan or 504 Plan

Name of Surrogate Parent, if applicable: _____ Phone: _____

VISITATION

Who Shall Visit	When	Supervised By	Transportation	Where
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Who May Not Visit? _____

REVIEWED

1. Expected Length of Stay: _____

2. Religious/Cultural Identification: _____

3. If Working, Child Care Arrangements: _____

4. Behavioral Management Problems: _____

5. Special Training/Consultation to Meet Specific Care Needs: _____

6. Other Necessary Information (specify): _____

ACTION PLAN (Include independent living skills for a child age 16 or older.)

1. Concern/Need		
Objective (outcome statement)		
Who	Activities/Task	Date Due
2. Concern/Need		
Objective (outcome statement)		
Who	Activities/Task	Date Due
3. Concern/Need		
Objective (outcome statement)		
Who	Activities/Task	Date Due

**EMERGENCY SHELTER CARE
HEALTH REVIEW**

This form is to be used at the time of admission of a child under emergency shelter care circumstances. The health review should be done by viewing a child in a clothed condition and asking questions of the child. Its intent is to offer a brief, non-medically based review of a child's general health appearance. The intent is not to reinterview the child about the reasons why the child was taken into placement. This form does not preclude medical attention where symptoms indicate a need for immediate medical assistance. All children received in emergency circumstances should be referred for a full medical exam within 72 hours of placement. You may be asked by the worker to assist in this. After completion, please provide this form to the placement worker and retain a copy.

Child's Name: _____ DOB: _____

Foster parent completing review: _____ Date: _____

Worker making placement: _____ Date: _____

What is the child's general appearance?

Is skin of normal coloring? (flushed in appearance or very pale)

Are there any readily apparent indicators of recent physical injury, such as bruises, hand prints, burns, scratches, etc?

Does the child show signs of soreness, such as limping or having difficulty sitting?

Does the child complain about any pain or discomfort when asked? (including itching, rashes, or existing skin eruptions)

Does the child appear to be running a fever or exhibit symptoms of communicable illness? (such as measles, chicken pox, etc.)

Record the child's response to the following questions: Are you taking any medications? Do you have any medical treatment that you must do? Do you have any illness that requires special precautions to reduce risk to others in the household?

CONSENT FOR EMERGENCY AND ROUTINE MEDICAL CARE

_____ is hereby authorized to give permission for _____
(Out of Home Care Provider's Name) Child's Name)

DOB: _____ to receive emergency medical, surgical, dental, or optical care and routine medical, dental, or optical care, including check-ups, immunizations, and/or treatment for minor illnesses and accidents.

In an **emergency** this form also authorizes the care provider to immediately seek medical assistance for the child. When the incident is life threatening or requires hospitalization the careprovider immediately **informs the placement worker**, so that the child's parents or court can be contacted. When possible/appropriate, the parent will be contacted to give consent for treatment. Parental consent is especially important for any major emergency medical care including surgery or use of general anesthesia.

Non emergency major medical care always requires consent from the parent(s) or the court before the care may be provided. Examples include surgery, anesthesia, psychotropic medication or any drugs prescribed for mental illness or behavioral problems. If parental rights have been terminated, consent from the parent(s) is not required, but Division consent is required.

Provider may contact parent directly in addition to notifying the placement worker. Mother Father
Mother _____ Home Phone _____ Work Phone _____
Father _____ Home Phone _____ Work Phone _____

If practical, the following Medical Providers should be used: Doctor: _____ Phone _____

Therapist: _____ Phone _____ Dentist: _____ Phone _____

Date Last Physical Exam: _____ Conducted by: _____ Phone _____

Child's Allergies, including drugs, any medication the child is taking or medical treatment the child requires: _____

If known, immediate and long term medical or therapeutic needs: _____

Immunization Record attached. If not attached, location of child's record, if known: _____

This child is covered by medical insurance issued by _____ Policy #: _____
(Insurance Co.)

This child has been determined eligible for Medicaid Yes No **MEDICAID NUMBER** _____

Medicaid has been applied for. Until approval is received, forward medical bills to the Placement Worker at address below.

The medical provider is permitted to provide necessary medical information to the payor.

(Signature of Placement Worker) (Title) (Date)

Authority: AS 47.10.084, AS 47.10.230,
AS 47.35, 7 AAC.50.140(c) &
(d), 300(a) & (g), 320(h), 440,
455,610(c) & 7 AAC 53.320.

06-9716 (Rev. 2/96) CPS YC LIC

Distribution: Original Care Provider
Copy OCS file



CLOTHING INVENTORY & REQUEST FORM

No of Items	Items	Current Clothing	Needed Clothing	Price Each	Total Cost	Discharge Inventory
4 5 1	Pants/Slacks/Skirts Shirt/Blouses Dresses					
6 sets w/2 bras	Underwear - including bras, socks, panties briefs					
1 set	Gym clothes (If in school)					
1 1	Dress Shoes School Shoes					
1 1	Pajamas/Gown Robe (opt.)					
1 1 1 1 1 1	Jacket/Sweater Winter Coat Boots Snow Pants (opt.) Knit Cap Gloves/Mittens					
3 1 doz 1 3 4 1 3 3 1	For Infants (0 - 2 years) Blankets Diapers (opt.) Snow Suit Sleepers T-Shirt Diaper Bag Outfits Booties/Socks Shoes/Boots					

Approximate total cost of all items needed: _____ (Cannot exceed \$300.00)

Request by: _____ Date: _____

For: _____
(Social Worker/Probation Officer)

INSTRUCTIONS FOR CLOTHING PURCHASES:

- Determine what clothing is needed. Make a list of existing usable clothing and compare with list on this sheet. Enter items lacking on above form.
- Determine an estimated cost for items needed and enter for each item listed above. (Pre-shop is not requested but amounts must be reasonable.)
- Give completed form to social worker/PO with a request for clothing authorization.
- Make a separate clothing request for EACH child.
- List EACH ITEM separately.

NOTE: A clothing allowance is not automatically issued. The initial clothing purchase is based on need as established by the clothing inventory. Future clothing needs are to be met from the foster care payments and child is expected to leave placement with a full inventory of clothing. If a child does not come to subsequent placements with adequate clothing, special needs funds must be requested. DISCHARGE INVENTORY MUST BE COMPLETED WHEN CHILD LEAVES CARE.

CHILD INFORMATION GUIDE

Foster Parents: Please fill out this form when the child is leaving your home. As your foster child’s caretaker, you are often aware of the special things which make the youngster feel at home. Please take a few moments and pass on this information to the new home. If an item does not apply, please just leave it blank. Thank you for your help.

_____ has lived with me for _____
Name of child Period of time

Eating:

What is the child’s meal schedule? _____

What are favorite foods? _____

What foods are disliked? _____

Does child feed themselves? Yes No

Any special concerns around eating habits? _____

Personal hygiene:

Is there a preference for bath or shower? _____

Is there any fear of water Yes No

If a girl, does she menstruate? Yes No

If a boy, does he shave? Yes No

Is there special hair/skin care? Yes No

Does the child require monitoring of personal care? If yes, please explain. _____

Please indicate any preferences the child may have for personal products. _____

Bed:

Is there a regular time for going to bed? Yes No If yes, what time. _____

Are there any special needs, i.e., lights on, door open/shut, special toy, music, reading, etc? _____

Discipline:

Please describe what actions seem to work to have the child follow directions. If necessary to discipline the child, what seems to have worked in your home? _____

Visitation:

Does the child seem to look forward to visits? _____

Does the child act out after visitation? _____

Please describe how you have handled any special situations around visitation. _____

Hobbies/Social:

What kind of activities does the child enjoy? _____

Does the child have any special hobbies? List any special supplies needed. _____

Does the child require any special supplies for hobbies? List any supplies needed. _____

Does the child have any friends who they visit with or have phone contact with? _____

School:

Does the child appear to enjoy school? _____

How is homework handled? _____

Does the child need special help in any subject or areas? _____