Child Placement Checklist for Foster Parents

| Things to ASK Ask for DCBS contact number and name Ask about medications the child is currently prescribed, if any Name of current physician or health care professional Child's SS# and Medical Card # |
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| □ Contract DCBS - 111A (when taking an emergency placement this contract should be given to FP in no more than 3 days later from child's worker) ➤ This form should include the name of the child's worker, the worker's supervisor, and their work and home/cell phone numbers ➤ Request an on-call number in case they cannot be reached |
| $\ \square$ Medical Passport for each child (child's worker distributes these binders with specific medical forms included. If more forms are needed these can be found online or request from child's worker or R&C worker; **doctor visit forms can be substituted by printouts from the doctor <u>detailing</u> the visit) |
| DPP-106A (Authorization for Routine Health Care and Authorization for Non-Routine Health Care) - This form should be filled out and given to FP by the 10-day case plan after child is removed - Store in the Medical Passport with the other forms. Administering any medication to a foster child (including over the counter medication) should be logged on the DPP-106H (also kept in the Medical Passport). |
| [] Health screening - a quick overall check-up within 48 hours of removal/placement, however if there is an injury/illness at removal child needs seen within 24 hours |
| $\hfill \square$ If child has to transfer school, Child should be enrolled in school within 3 days of placement. The sooner the better! |
| Schedule child's physical , dental , and visual exams <u>within 2 weeks of placement</u> and then annually until child is returned home (as age appropriate for dental and visual; **when there is medical documentation that the child has already had the dental and visual exam, further discussion with child's worker if this can wait until the next scheduled annual or if it needs to go on and be scheduled again) |
| Mental Health Screening within 30 days of placement. (Refers to basic screening rather than a full diagnostic assessment) *The SAFE screening takes the place of this, right?? Children under 5 receive Early Periodic Screening Diagnosis and Treatment Services (EPSDT) screening from the local Health Department or, if eligible, First Steps assessment. |
| [Educational Screening within 60 days of placement (discuss this need with child's worker) |
| Initial Clothing Approval Letter (If you need initial clothing, ask child's worker to requests a clothing letter from the Billing Specialist to take with you when purchasing clothing Or you can purchase the clothing and then submit receipts to the billing clerk for reimbursement. Reimbursement cannot exceed the amount in policy |

(***if purchasing for more than one child - each child needs to have their $\underline{\text{own receipt}}$ for reimbursement)

| 0-2 | \$25.00 | \$6.00 | N/A |
|------|---------|---------|---------|
| 3-4 | \$30.00 | \$5.00 | \$1.00 |
| 5-11 | \$35.00 | \$5.00 | \$7.50 |
| 12+ | \$40.00 | \$10.00 | \$20.00 |

| □ Day | Care Request | f orm (le | t Foster (| Care Worker | know the cl | hildcare provic | der's informa | tion to submi |
|--------|----------------|------------------|------------|-------------|--------------|-----------------|---------------|---------------|
| to get | approval for p | payment) | *there is | a max amoun | it set depen | ding on county | and age of a | child. |

- Begin working on **Lifebook** for each child by taking pictures and gathering memorabilia (special school papers, programs, drawings, crafts). Submit receipts and Billing Invoice to the billing clerk stating the receipts are for the lifebook \$70 initial allowance and then \$25 every six months.
- Attend 10-day Conference (birth families, foster parents, social worker, etc), if possible with your schedule. If not able to be there in person ask to participate by phone, if possible, for the Partnership Development Plan, child's youth action plan and visitation agreement. Foster parents are often asked to leave at the time they go over details of the birth parents case plan. Being present is best to help initiate a connection with the birth parents.
- Usitation between foster child and birth family (generally these occur weekly, mileage for transportation is included in the daily per diem).
- ☐ Children's worker is to visit monthly & R&C worker visits quarterly (unless otherwise discussed). These are scheduled visits.
- At least every 6 months there should be a Case Plan Conference (birth families, foster parents, social worker, etc) If not able to be there in person ask to participate by phone, but being in person is best.
- Dourt date frequency depends on the county the child is from and how that court system is set-up. Foster parents are encouraged to attend, as that is where you will learn the majority of information on the case, however it is not required.
- □ Reimbursement Pre-approved training expenses: \$100 for basic/Advanced, \$200 for Medically Complex or Care Plus; Senior expenses \$650, Christmas \$60, Birthday \$25, Maintaining Lifebook \$25 (every 6 months after initial \$70); Babysitting during training (max allowable reimbursement is daily childcare rate already set & must provide a receipt signed by the babysitter)
- □ Photography A child in foster placement may not be depicted in a photograph, videotape or audiotape for promotional purposes, or in a manner that would cause the child or family to suffer discomfort or embarrassment. A child should not be identified as a foster child in any type of publication or public platform. A consent form is not required for photographs or videotaping that occur as part of the child's daily routine, and which are not intended for public viewing, such as family photos, photos for the child's lifebook or case file, school/yearbook pictures, or videotape of a special event for the child.