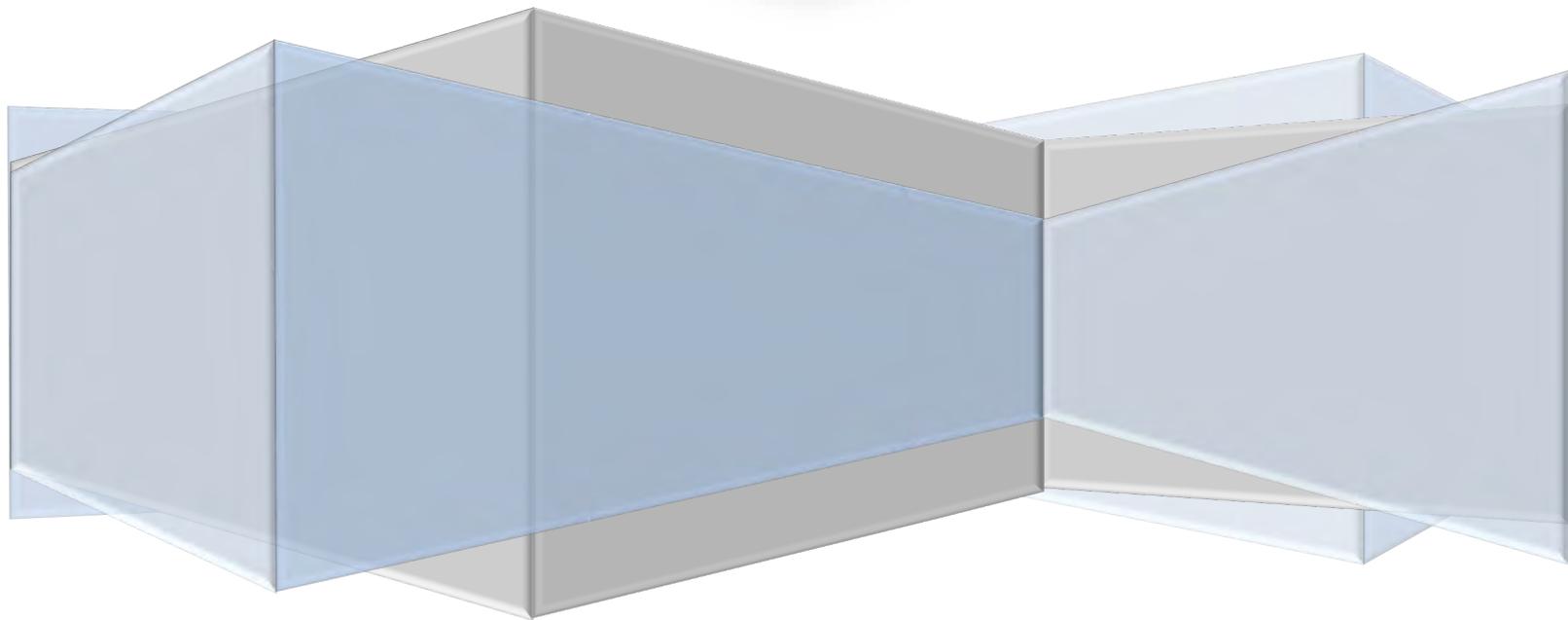


# Brown County Foster Care

Policy and Resource Manual



**Table of Contents**

<b>Alcohol/Drug Use</b>	<b>P. 2</b>
<b>Animal Ordinance</b>	<b>P. 3</b>
<b>Automobile or Motorcycle Use by Foster Children</b>	<b>P. 4</b>
<b>Babysitting</b>	<b>P. 5-6</b>
<b>Car Seats</b>	<b>P. 7-8</b>
<b>Child Care While Working</b>	<b>P. 9-10</b>
<b>Child Care: Foster Home SHARES/Co-pay Reimbursement Policy</b>	<b>P. 11</b>
<b>Clothing Allowance</b>	<b>P. 12</b>
<b>Confidentiality</b>	<b>P. 13</b>
<b>Confirming Safe Environments</b>	<b>P. 14</b>
<b>Discipline</b>	<b>P. 15</b>
<b>Electronic Surveillance of Clients/Consumers</b>	<b>P. 16</b>
<b>E-mail Communication</b>	<b>P. 17</b>
<b>Emergency Contacts</b>	<b>P. 18</b>
<b>Firearm Declaration and Hunting</b>	<b>P. 19</b>
<b>Hazardous Machinery</b>	<b>P. 20</b>
<b>Health and Safety Standards</b>	<b>P. 21</b>
<b>Holiday Cards</b>	<b>P. 22</b>
<b>Income Taxes</b>	<b>P. 23</b>
<b>Independent Investigations</b>	<b>P. 24-25</b>
<b>Independent Living</b>	<b>P. 26-27</b>
<b>Insurance Program for Foster Parents</b>	<b>P. 28</b>
<b>Missing Children in Out of Home Care</b>	<b>P. 29-30</b>
<b>Notification Policy</b>	<b>P. 31</b>
<b>Out of State Travel with Foster Children</b>	<b>P. 32</b>
<b>Out of Country Travel with Foster Children</b>	<b>P. 33</b>
<b>Paperwork Required at Placement</b>	<b>P. 34</b>
<b>Perks Program</b>	<b>P. 35</b>
<b>Prudent Parenting</b>	<b>P. 36-37</b>
<b>Removal of Child in Foster Care</b>	<b>P. 38-39</b>
<b>Resources for Foster Parents</b>	<b>P. 40</b>
<b>Respite Policy</b>	<b>P. 41</b>
<b>Safe Sleep</b>	<b>P. 42-43</b>
<b>Social Media Usage for Foster Parents</b>	<b>P. 44</b>
<b>Social Media Usage for Youth</b>	<b>P. 45</b>
<b>Support for Foster Children</b>	<b>P. 46-47</b>
<b>Support for Foster Parents-Local</b>	<b>P. 48</b>
<b>Support for Foster Parents-State</b>	<b>P. 49</b>
<b>Things Foster Parents May Encounter</b>	<b>P. 50-52</b>
<b>Training</b>	<b>P. 53-54</b>
<b>Trampoline</b>	<b>P. 55</b>
<b>Well Testing</b>	<b>P. 56</b>
<b>WIC</b>	<b>P. 57</b>

**Alcohol/Drug Abuse**  
**Effective Date: December 2014**

Foster parents need to use caution when consuming alcohol.

1. Legal drinking age in the State of Wisconsin is age 21. Foster children should not have access to alcohol.
2. Foster children are often removed from homes where alcohol is abused, illegal drugs are used, or prescription/over-the-counter drugs are abused. They may experience anxiety when observing anyone drinking alcohol or taking medication.
3. A foster parent cannot transport a foster child except with absolute sobriety. Absolute sobriety means there can be no alcohol or drugs in their system in any amount.
4. A foster parent should never allow a foster child to drink even if it is for “a taste” of the drink.
5. Foster parents should use good judgment when consuming alcohol at home or in the community because they are always viewed by the community as representatives of the Brown County Foster Care Program.
6. In the event that a foster parent would be found to have been Operating While Intoxicated (OWI) with **any** child in their vehicle, the foster parent(s) would be at risk of having their license revoked. This action is considered to be a Felony Child Abuse charge.
7. If you are arrested, cited, charged, or convicted with any alcohol or drug related offense, you must contact your Foster Care Worker or Supervisor within 24 hours.

**Animal Ordinance**  
**Effective Date: September 2016**

According to DCF 56.08 (3) all household pets must be vaccinated for rabies and other diseases as required by local ordinances.

Foster parents are not to keep a vicious or infection animal on their premises.

**\*\*Please reference your local city ordinance to learn more information pertaining to the types of animals allowed on your premises and the quantity.**

**Automobile or Motorcycle Use by Foster Children**  
**Effective Date: September 2016**

As part of case planning, to promote independent living skills, a foster child may obtain a learner's permit or driver's license.

Driving is a key independent living skill that will benefit the child in preparing for a successful adulthood. Children under the age of 18 are required to have a sponsor in order to be issued an instruction permit or license. The out-of-home care provider may act as a sponsor for the child if the parent or legal guardian is absent or refuses to be a sponsor, which is not new with the Reasonable and Prudent Parent Standard (reference Ch. Trans 102 Administrative Code). This sponsor accepts liability for any damages caused by negligent or willful misconduct while driving. The liability limitations of the Reasonable and Prudent Parent Standard do not apply to the acceptance of liability when sponsoring a child for their instruction permit or license. Children must meet all requirements for the issuance of a license or permit by state statute and administrative code in order to obtain a permit or license while in out-of-home care. This includes obtaining adequate insurance coverage in order to operate a vehicle.

As with any Reasonable and Prudent Parent Standard, the individual child and their maturity and developmental level should be considered. The out-of-home care provider should also consider the child's behavioral history and level of responsibility. Assisting the child in obtaining his/her driver's license does not mean that the out-of-home care provider must allow the child to drive anywhere or anytime he/she wants. Should the child obtain their license, the out-of-home care provider should continue to use the Reasonable and Prudent Parent Standard to make decisions regarding the child's driving to and from different activities.

If an out-of-home care provider is unable or unwilling to be a sponsor for the child or to assist the child with insurance coverage and the parent or guardian is also unable or unwilling, the out-of-home care provider should still pursue assisting the child in preparing for obtaining a driver's license. This may include signing the child up for driver's education classes or for studying for tests so that when the child turns 18 they are prepared to obtain a driver's license.

## **Babysitting**

### **Effective Date: September 2016**

Most out-of-home care providers, those in family like settings, can arrange for occasional, short-term babysitters. Out-of-home providers must note that an occasional short-term babysitter is different than respite. Out-of-home care providers should use the Reasonable and Prudent Parent Standard to decide if using a babysitter is appropriate, and to decide how to select an appropriate babysitter. Some examples of times an out-of-home provider may arrange for a babysitter are: for when they have medical appointments, training classes, adult social gatherings, or grocery shopping.

If the out-of-home care provider needs to make plans for the care of a child in their care by any other person or for the child away from the home for any period longer than 48 hours or on a regular basis, the out-of-home care provider must secure approval from the supervising agency.

Background checks/approval for hiring an occasional, short-term babysitter is not required. Agencies may not implement policies or procedures that would require the person responsible for supervising the child to submit information necessary for the completion of a formal background check. The agency may obtain the first and last name of the responsible party and seek out information on that individual that is a matter of public record through methods such as checking CCAP and running a sex offender background check. Out-of-home care providers should consider what any parent would do, such as, have a conversation with the babysitter, ensure they understand any necessary care needs of the child (medical or otherwise) and ensure that a proper level of supervision will occur, and provide emergency contact information in the event it is needed.

Out-of-home care providers should consider whether there are any court orders or safety plans in a place that does not allow the child to interact with certain individuals. The out-of-home care provider should consider the needs of the child and how that will impact the information the babysitter needs in order to care for the child. The out-of-home provider should provide the babysitter with information related to caring for the child including any emotional, behavioral, medical, or physical conditions, as well as emergency contact information for the out-of-home care provider. The out-of-home care provider must maintain confidentiality requirements and the information provided should be related to the babysitter's ability to care for the child.

Other rules with regard to temporary caretakers (babysitters) include:

- A foster child is permitted to babysit. The out of home provider should consider the child's age, maturity, developmental level, behavioral history, history of responsible behavior, and any behavioral issues that may put the child they are caring for at-risk. Other considerations include the needs of the child that they would be babysitting for, and whether the child is comfortable with the responsibility of babysitting.
- All out-of-home day care providers when the foster parent is working shall be licensed or certified.
- All babysitters shall be at least 5 years older than any foster child that is being cared for unless otherwise approved by the agency.

**You must notify the Department in advance if someone will be caring for your foster children for more than 48 hours.**

**Car Seats**  
**Effective Date: September 2016**

Both DCF 56 and Wisconsin Statutes require the use of car seats for children. Foster parents (or anyone acting on behalf of a licensee) shall follow all State and Federal regulations regarding car seat and booster seat usage.

The National Highway Traffic Safety Administration (NHTSA) recommends that all children ages 12 and under ride in the backseat, properly restrained at all times. Child safety seats, including boosters, are very effective in keeping children properly restrained. Car seats cannot be used past the expiration date printed on the bottom of the seat or if there has been a recall. All child seats shall be in good repair with all buckles in working order. Please check the seat for recalls on this website:  
<https://www.nhtsa.gov/recalls>

Foster parents (or anyone acting on behalf of a licensee) shall use proper child safety restraints based on the height, weight, and age of the child.

Passenger-side airbags have saved the lives of hundreds of people in front-end crashes, but they inflate with such force, they can cause serious injury or death to a small child sitting in the front seat. Therefore, all children age 13 and under will be required to ride in the backseat, unless passenger side airbags are deactivated.

While state law has not changed car seat requirements, we recommend all foster parents follow the safety standards from the American Academy of Pediatrics as outlined on the following page.

<b>Age Group</b>	<b>Type of Seat</b>	<b>General Guidelines</b>
<b>Infants/Toddlers</b>	Infant seats and rear-facing convertible seats	All infants and toddlers should ride in a <i>rear-facing car safety seat</i> until they are 2 years of age or until they reach the highest weight or height allowed by their car safety seat's manufacturer.
<b>Toddlers/Preschoolers</b>	Convertible seats and forward-facing seats with harnesses	All children 2 years or older, or those who have outgrown the rear-facing weight or height limit for their car safety seat, should use a <i>forward-facing car safety seat</i> with a harness for as long as possible, up to the highest weight or height allowed by their car safety seat's manufacturer.
<b>School-aged children</b>	Booster Seats	All children whose weight or height is above the forward-facing limit for their car safety seat should use a <i>belt-positioning booster seat</i> until the vehicle seat belt fits properly, typically when they have reached 4 feet 9 inches in height and are between 8 and 12 years of age. All children younger than 13 should ride in the backseat.

## **Child Care While Working** **Effective Date: December 2014**

The licensing agency may provide an exception to licensing rules to allow both foster parents to be employed outside of the home when caring for foster children. Licensing rules in DCF 56.09 (2) (c) require that all out-of-home childcare providers for foster children must be certified or licensed. Therefore, for out-of-home care for foster children while foster parents are both working, a certified daycare provider or licensed daycare center must be used. The child's case manager may assist the foster parents in locating a center or provider appropriate to meet the needs of the foster children.

The cost of the childcare during times that the foster parents are working is paid through Brown County's Economic Support Department, Wisconsin SHARES Childcare Subsidy. The foster child's case manager will provide the foster parents with information outlining the procedures to obtain childcare assistance. Application for SHARES funding is the responsibility of the foster parent. The foster parent will be required to provide information about their household income and hours of work.

If the foster parents live in another county, they will apply for childcare assistance through the county in which they reside.

**Please note that this is time sensitive and the process needs to be initiated at the date of placement.**

### **Steps for Setting up SHARES:**

What to Bring to the Intake Interview:

The following lists are examples of acceptable forms of verification. The applicant will need only one item from each list for each member of the group. The documents will be scanned and electronically stored for use in documenting the eligibility decision.

#### **1. Identity Verification (bring one of the following):**

- Driver's License
- State issued ID card
- Employee ID card
- Student ID card
- US Government ID card
- Military ID card
- Native American ID card issued by a federally recognized tribe
- A photo ID issued by the USCIS
- US Passport

- An unexpired immigration document
2. Social Security Number or application for Social Security Number for Foster Child
  3. Citizenship Verification of the Foster Child (bring one of the following)
    - Certified copy of birth certificate
    - Hospital birth record
    - Native American ID card or other tribal membership documentation issued by a federally recognized tribe
    - Certificate of Naturalization
    - Certificate of Citizenship
    - US Passport
    - Qualified Aliens must provide evidence of alien status
  4. Wisconsin Residency (bring one of the following)
    - Lease agreement
    - Utility bill for water, natural gas, electricity, or telephone that includes name and address
    - Mortgage receipt
    - Subsidized housing program approval letter
    - Weatherization program approval letter
    - Pay check stub showing name, address, employer's name, address and phone number
    - Wisconsin Driver's License
    - Wisconsin ID card
  5. Foster Parent Employment Information (for verification of employment)
    - Paycheck stubs
    - Letter from the employer
    - Self-employment business tax records
    - Other documents that verify earned income
  6. Verification of child's foster care placement (the placement agency can FAX verification to the eligibility or determination agency)
  7. Foster child's birth or adoptive family income at time of placement (the placing agency can FAX verification to the agency)
  8. Proof of participation in an approved activity, e.g. employment

\*Please follow the link provided for more information:

**<https://dcf.wisconsin.gov/wishares/parents/foster>**

**Resource for Child Care:**

Regulated Care and YoungStar Participation: Foster parents choose their own child care provider, but they must be one of the following regulated types of providers: a county certified provider, state licensed home or center, public school program, or day camp licensed for child care. In addition, child care provider must be also participating in the YoungStar, and at minimum a 3 star center.

A link to locate regulated child care providers and to confirm that they are YoungStar rated is located at:  
**<http://childcarefinder.wisconsin.gov/Search/BasicSearch.aspx>**

**Child Care: Foster Home Parent SHARE/Copay Policy**  
**Effective Date: February 2017**

Foster homes will be expected to go through the Wisconsin SHARES Childcare Subsidy process through economic support in their home county to qualify for day care assistance.

Families who use Wisconsin SHARES Childcare Subsidy will use an EBT card to pay their childcare provider, similar to using the Quest Card for FoodShare. Your EBT card, called MyWIChildCare, will be sent to you via mail. Your childcare authorization will be based on a monthly average of your childcare needs. A monthly subsidy will be added to your card the first day of the month. Amounts for new authorizations are added the next business day. You will have up to 90 days to use your monthly amount. After 90 days, the unused balance will be removed from your card.

If the licensed or certified day care provider charges a weekly co-pay beyond what MyWIChildcare/SHARES covers the Department will cover that co-pay (also known as parent share amount) through the monthly foster care reimbursement (exceptional payment line). If there are irregular charges above and beyond what is covered by SHARES and the co-pay, the foster parents will be expected to pay this amount to their provider. The foster parents may then contact their foster care worker and request a reimbursement for the out of pocket charges. The foster parents will need to supply a receipt to the Department showing the child's name, day care provider's name, date of charges, and what the charges were for. The Department will reimburse charges that are not within the foster care providers control such as; when a child is sick, an extra day of care is needed for foster parents to attend to work or family emergencies, etc.

Please do not assume the extra SHARES charges will be reimbursed without getting the approval of the assigned foster care worker. If you have a child placed in your care who is receiving SHARES, make sure to communicate the co-pay amount to your foster care worker.

Any changes in childcare including: hours of employment, number of children in your care, location of licensed or certified childcare, etc. need to be reported to the Bay Lake Consortium via Telephone: 1-888-794-5747. This is the responsibility of the foster parent to notify the Consortium of these changes.

**Clothing Allowance**  
**Effective Date: September 2016**

Foster parents may be provided with an initial clothing allowance if:

- 1) It is your foster child's first placement; or
- 2) It has been at least four months since the child was last in out-of-home care.

Initial Clothing Allowance is a one-time reimbursement and is a set amount based on the child's age:

Ages 0-4: Up to \$225.00

Ages 5-11: Up to \$263.00

Ages 12-14: Up to \$300.00

Ages 15-18: Up to \$300.00

Eligible items for reimbursement are for clothing items and shoes only. This does not include: diapers, blankets, bottles, formula, toiletries, or school supplies.

Periodic clothing allowances, such as for seasonal clothing, are not allowed. An amount is included in the basic rate for this purpose each month.

Please consult with your Foster Care Worker regarding the status of the child's clothing allowance.

Clothing allowance is reimbursed on your monthly check. To receive reimbursement, foster parents must submit itemized receipts for clothing items (ie: the child's initials next to each clothing item purchased). If receipts are not properly itemized or illegible, foster parents may not receive reimbursement or experience a delay in reimbursement. In order to guarantee reimbursement, receipts must be submitted on a monthly basis.

Any clothing item purchased for a foster child, or otherwise given to child, belongs to child and shall be given to him or her upon leaving the foster home.

Another resource to foster parents for purposes of initial clothing supplies, is Foster the Village. Please see page 48 for more information.

**Confidentiality**  
**Effective Date: September 2016**

The foster parents and other persons in the household having access to confidential information about the foster child and his or her biological family, may not discuss or otherwise disclose that information to anyone while the child is in the foster home or after the child leaves the foster home, except:

1. To the licensing agency or agency placing the child in the care of the licensee:
2. To another foster parent or respite care provider as authorized by the agency, such as when another foster parent is being considered as a placement for the child or the person is providing respite for the child.
3. By order of a court; or
4. As otherwise provided by law.

Under no circumstances should confidential information be share with anyone not directly involved with the case (e.g., neighbors, relatives, friends, other foster parents). It is the natural tendency for all of us to be inquisitive about others; however the right to privacy must be maintained by everyone involved in a case.

A Release of Information, signed by the parent or guardian, is required before confidential information can be shared with anyone not employed by the Department of Human Services. Sharing confidential information with someone not related to the case can result in a personal liability suit being brought by the child and his/her family. The Health Insurance Portability and Accountability Act, otherwise known as HIPPA, makes it a crime to disclose health information, including mental health information, without a proper release of information. Violations of this law are punishable by a fine up to \$10,000.00 and/or one-year prison term.

Any confidential information kept in a foster home should be kept in a secure place that is not readily accessible to the child or anyone in the home not authorized to access the information. It should be given to the child's social worker when the child leaves your home or destroyed without possible trace (i.e. shredding).

Please refer to your pre-placement training materials for more written information regarding confidentiality. Prudent Parenting does not supersede confidentiality.

**Confirming Safe Environments**  
**Effective: December 2014**

A caseworker places a child in out-of-home care when 1) threats to child safety cannot be controlled in the child's home or 2) a child requires either specific services or sanctions that cannot be met in the child's home or community. One responsibility prior to placing a child is to assess and confirm the placement is safe for the child. This obligation exists for all placement settings whether the care is provided by family members, friends, neighbors, or professional providers such as foster families.

Assessing for a safe environment is distinctly different from licensing the placement home. Licensing occurs bi-annually and focuses on specific requirements for the provider and environment rather than the safety of a specific child in the placement. Therefore, assessing and confirming a safe environment in placement settings occurs every time a new placement is considered.

Within 3 working days (not including more than 5 calendar days) following the initial placement, a Worker from BCHSD will conduct a CSE home visit to assess and evaluate the safety of the placement, discussing expectations, the role of the out-of-home care provider, and providing information related to the child.

Within 7 days of the initial home visit, another home visit needs to be conducted to continue to assess and evaluate the safety of the placement, and to assure the child's needs are being met.

## **Discipline**

### **Effective Date: December 2014**

Foster parents should know and model the difference between discipline and punishment.

**Discipline** teaches children how to develop self-control and be responsible for their own actions. **Punishment**, on the other hand, tells children in a painful way- and after the fact- that a bigger, stronger person doesn't like something they did. Punishment is a means of control.

1. Disciplinary action by a foster parent or any other person (including other agents of Brown County Human Services) serving as a substitute caretaker in the absence of the foster parents shall be aimed at encouraging foster children to understand what is appropriate social behavior.
2. The type of discipline imposed shall be appropriate to the child's age and understanding.
3. Physical punishment, i.e. inflicting physical pain on a child by such means as hitting with objects or without, slapping, spanking, punching, shaking, kicking, biting, washing out a child's mouth with soap, etc. is prohibited with all children in the home.
4. Verbal abuse, profanity, derogatory remarks about the child or his or her family threats to expel the child from a placement shall not be permitted.
5. Any child or other person not responsible for providing care may not be allowed to discipline a child placed by Brown County Human Services.
6. Children in placement may not be punished by being deprived of meals, mail, phone calls or family visits.
7. No child placed by Brown County Human Services may be punished or ridiculed for bed-wetting or other lapses in toilet training.
8. No child may be mechanically restrained or locked in any enclosure, room, closet, or other part of the house or elsewhere for any reason.
9. Children placed by Brown County Human Services may be punished by being restricted to an unlocked room or area of the home as long as they are within hearing of a responsible caretaker and are permitted to use the toilet if necessary. The length of time the child may be restricted to the area depends upon the age of the child.
10. Foster parents may not remove a foster child's bedroom door for any reason.
11. No exception may be made to any of the above items. Failure to comply with these requirements could result in one or more of the following consequences: special training of the service provider; removal of a child; no future placements of children with the provider; removal of the provider's license; and when abuse potentially exists, referral for child abuse investigation.

**Electronic Surveillance of Clients/Consumers**  
**Effective Date: September 2016**

For the purpose of this policy, the term “electronic monitoring device” shall include, but is not limited to: video cameras, video monitors, web cams and audio monitors. This term does not include apnea monitors or infant audio listening devices/walkie-talkies that are designed to be placed in or near a foster child’s crib/bed. This term also does not apply to electronic monitoring bracelets that may be used by the Agency’s Electronic Monitoring Program or as a condition of juvenile or adult court supervision.

No child placed in a foster home licensed by Brown County Human Services shall be monitored or supervised through the use of electronic monitoring devices unless the electronic monitoring device is placed in a **common living area** or the home. No device shall have the ability to record and/or save images or sound.

The use of any type of monitoring device shall be with the knowledge of the child **and approval of the case manager and foster care coordinator.**

**E-mail Communication**  
**Effective Date: September 2016**

There are some rules to keep in mind when using email to communicate in the role of a foster parent.

1. Email communications are not confidential. Identifying information about the child or child's family should be avoided. You should consider using initials when communicating something specific about the children in your home, or their families.
2. Emails are documents that become part of the permanent case file. Foster parents should communicate in a professional manner in emails and report facts only. Your personal opinions about parents, family members, etc. should be avoided. As part of the court processes, attorneys and the attorney's client have a right to view emails that are in the file if they request such information. Emails are not an appropriate place to "vent" your frustrations about a case or a family.
3. Do not email case sensitive information from your workplace about your foster child or the family. The email is property of your employer when you email from your workplace. Employers can view the email activity of their employees at any time. Therefore, these emails are not confidential and would be a violation of confidentiality.
4. Email should not take the place of other direct forms of contact, such as telephone calls or meetings. Misunderstandings often occur when team members rely too much on email. Direct communication should be the main form of communication in a case, where email can be one tool to facilitate the communication process.

**Emergency Contacts**  
**Effective Date: September 2016**

**Children In-Care Not Returning After a Visit:**

1. During work hours, call case worker. If unable to get reach case worker, call foster care worker.
2. After hours, call the non-emergency police dispatch and ask to get dispatched through to the on-call CPS worker.

**Significant Injury or Illness:**

1. Go to hospital immediately.
2. During work hours, call case worker or foster care worker.
3. If unable to reach anyone, leave a voice mail.
4. If after hours, and depending on the nature of the situation, call 911 or non-emergency police dispatch and ask to get dispatched through to the on-call CPS worker.

**Significant Violent or Out of Control Behavior (Hurting Others or Property):**

1. Call 911 for assistance.
2. Notify agency by contacting your case worker or foster care worker. If unavailable, leave a voicemail.

***ANY CHANGES IN CARE, THE AGENCY NEEDS TO BE NOTIFIED IMMEDIATELY!***

If you are unable to make contact with your case worker or foster care coordinator, always leave a voicemail. During business hours, call 448-6001 and you will talk to the Human Services receptionist. Tell the receptionist you need to talk to someone in Child Protection. A worker will be able to provide you with further assistance.

If you have any additional questions regarding an emergency, please contact your foster coordinator.

**Firearm Declaration and Hunting**  
**Effective Date: September 2016**

During the licensing process, all foster parents are required to sign the Firearm Declaration form. Below is a reminder of what the form encompasses.

Foster parents declare that they understand and agree to abide by all current licensure and statutory requirements regarding said firearms (if applicable) and subject to change to revision by statute or legislation. The agency will advise me of any further changes or revisions.

**HFS 56:06(5):**

- a) Except as allowed under par. (c), no loaded or otherwise dangerous weapon may be kept in a foster home. Unloaded firearms and other dangerous weapons shall be locked in an area not readily accessible to foster children. Ammunition shall be stored and locked separately from weapons in an area not readily accessible to foster children.
- b) Foster children may be permitted to use firearms or bows for hunting or target practice under the following conditions:
  - 1. The child is at least fourteen years of age.
  - 2. The child has successfully completed an approved hunter safety training course.
  - 3. The child is under the supervision of a responsible adult at all times.
- c) If the foster parent is a sworn law enforcement officer who is required to maintain a loaded weapon at all times, the loaded weapon shall be stored and locked in an area not readily accessible to foster children.

**An out-of-home care provider may allow a child to go hunting if it is a reasonable and prudent parenting decision.** This includes ensuring that the child meets any legal requirements such as their age and the completion of approved hunter's education courses. The out-of-home care provider must ensure that they are under the supervision of a responsible adult and that they have all of the necessary safety equipment and gear, such as blaze orange clothing. When possible and appropriate, out-of-home care providers should also engage in conversations with the child's parent or guardian about hunting. They also should consider the child's history and past interaction with guns. Consideration should be given to possible triggers or traumatic reactions a child may have to weapons.

**Hazardous Machinery**  
**Effective Date: September 2016**

Foster parents may allow a child to operate hazardous machinery by using the Reasonable and Prudent Parent Standard within certain restrictions. Ch. DCF 56 Administrative code defines hazardous machinery as:

“Any machine or other equipment generally known to be dangerous to untrained or unskilled operators or to operators who for any other reason are physically or mentally unable to operate the equipment safely, including a motor vehicle, power lawn mower, tractor or other farm machinery or equipment, snow blower, chain saw, power-driven shop tool, snowmobile, all-terrain vehicle and any other machinery or equipment determined by the licensing or supervising agency to be unsafe for a particular foster child to operate.”

Machinery and equipment does not need to consist of a motor or engine to be considered hazardous. For example, "gravity boxes" used on farms for transporting grain can be very dangerous since anyone falling into a full gravity box can "drown" in the grain and suffocate.

When making the decision to allow a child to operate hazardous machinery, a foster parent must ensure that no other laws or administrative code restrictions are violated, which may include age restrictions. The out-of-home care provider should carefully consider the child's age, maturity, and developmental level when deciding if operating the hazardous machinery is safe and appropriate for that child. The machinery and equipment must be maintained in safe and proper condition, and the child should have appropriate adult supervision during operation. The out-of-home care provider must also ensure that the child is properly trained and has the necessary clothing and safety equipment to operate the machinery or equipment.

**Health and Safety Standards**  
**Effective Date: December 2014**

Brown County must ensure the health and well-being of children placed in foster care. As outlined in DCF 56.07 (1) (a) a foster home shall be so constructed, arranged and maintained that it is safe for all occupants and the health of all occupants is safeguarded. To that end, the following standards are set to ensure the safety and well-being of foster children who are placed in Brown County foster homes.

1. Carpeted, linoleum tile and wood floors and rugs must be clean and free of soiled, torn areas and pet odors.
2. Foster children shall not be subject to second hand smoke. No one shall smoke in the home or in a vehicle when a foster child is present.
3. Stairways, entryways, and shared living areas should be free of clutter to ensure safety.
4. Upon request, social workers or other agency staff shall be given access to all shared living areas of the foster home and all bedrooms occupied or intended for use by foster children.
5. Smoke detectors must be placed in each bedroom and on all levels of the home.
6. A fire extinguisher must be maintained in or near the kitchen. Foster parents shall know how to operate the fire extinguisher. Fire extinguishers must be serviced every 4 years.
7. Carbon monoxide detectors must be on each floor of the home, including the basement (however not needed in the attic).

**Service for fire extinguishers:**

- Tyco SimplexGrinnell  
1941 Holmgren Way  
Green Bay, WI 54304  
920-494-8741
- Vorpahl Fire & Safety  
526 Lambeau Street  
Green Bay, WI 54303  
920-497-7200
- Van's Fire & Safety, Inc.  
787 Mike McCarthy Way  
Green Bay, WI 54304  
920-494-3346

**Holiday Cards**  
**Effective Date: September 2016**

The Department encourages children in care to be treated as family members. The Department wants the children in care to participate in family-like experiences, this includes the holidays. If your family normally takes holiday pictures to send to family members and friends, the Department encourages you to share this experience with your foster child. Although the child can be a part of the picture/card, the child cannot be identified by first name or as a foster child as this violates confidentiality. An example would be “Happy Holidays from the Smiths”.

**Income Taxes**  
**Effective Date: December 2014**

The purpose of this policy is to inform the foster parents about the taxable and non-taxable income from Foster and Respite payments. The agency recommends the foster parents seek professional assistance in determining the applicability of various tax rules to their specific circumstances.

- 1) Respite payments are taxable. You will receive a 1099 form if you have provided over \$600 of respite during the year. However, **all** respite income is taxable.
- 2) Foster Care and Kinship payments to families for the care of foster children living in their homes are not taxable.

Please contact an attorney or tax professional for further guidance.

**Independent Investigations within Foster Homes**  
**Effective Date: September 2016, Revised Date: April 2019**

When an allegation is made regarding the care or treatment of a child placed with an out-of-home care provider licensed by Brown County Health & Human Services, the process to address the immediate needs of the child who is the subject of the report is as follows:

1. If a present danger threat has been identified at the time the report is received, A Brown County Initial Assessment (IA) worker will be assigned the same day to complete a safety check on the child(ren). The IA worker will inform the out-of-home care provider(s) of the allegations and explain the initial assessment process to them. The IA worker will assess threats to safety and take immediate action to assure for the child's safety, if warranted. The IA worker will consult with the Foster Care team and other social workers/supervisors who have children placed in the foster home to determine a safety/support plan if the child(ren) are not removed. The decision may be to leave child(ren) in the home, leave the child(ren) in the home with a protective plan, or remove the child(ren) to another setting. The IA worker in consultation with the IA supervisor makes the final decision.
2. The report is assigned to another county's child protective services unit for screening. This will be referred to as the "Independent Agency". There are three possible screening decisions that can be made (Please note: The standard for care for children living in out-of-home care is higher than for children living with their biological families):
  - Screen in;
  - Screen out and refer to the Foster Care team for licensing rules violations;
  - Screen out and inform the Foster Care team of the referral for their information
3. Brown County Human Services must adhere to the screening decision made by the independent agency.
4. Law enforcement may become involved at this point or at any point later in the investigation.
5. If a report is screened in:
  - The Independent Agency will conduct the independent investigation regarding the Brown County out-of-home care provider.
  - The assigned IA worker from the Independent Agency will inform out-of-home care provider of the allegations and explain the independent initial assessment process. The assigned Foster Care Coordinator (FCC) is unable to provide the out-of-home care provider with any prior notice or information prior to the investigation or discuss details of the investigation so as not to impede it. All questions related to the investigation should be directed to the assigned IA worker.

- The Independent Agency will conduct an investigation into the allegations made. This involves the IA worker interviewing the alleged victim of abuse/neglect as well as all other children in the home, including the out-of-home care provider's child(ren). The IA worker will interview the out-of-home care providers individually and, if needed, together.
- The IA worker will interview others with information about the allegations.
  - Because Brown County may initially evaluate child safety and the independent agency will then conduct the investigation, in some circumstances children and other participants will be interviewed more than once.
- If the safety assessment shows the child who is the subject of the report to be unsafe, the safety of all other children in the home will be considered. If it is necessary to remove the child who is the subject of the report, the agency must consider removing siblings to preserve the family group.
- The parents of the child who is the subject of the report will be informed of the allegation and the independent investigation process by the child's assigned Brown County IA/ongoing social worker. The parents of another child placed in the home will only be made aware of the independent investigation if it has been assessed that that child is also unsafe.
- Unmet service needs of the child and foster parents will be identified, if present.
- The contact person for the out-of-home care provider regarding the investigation is the IA worker in the Independent Agency and the assigned IA/ongoing worker in Brown County.
- Once the investigation is completed, the out-of-home care provider will be notified of the results either by telephone or in-person by the IA worker.
- There will be a meeting with the out-of-home care providers to discuss the finding of the investigation. This meeting should occur within 10 business days of the conclusion of the investigation. The Brown County IA/ongoing worker and the FCC should be present at the meeting. (If an FCC is not assigned, a representative from the foster care unit will be present). When the finding is that maltreatment has been substantiated, the foster home license will be revoked, and other arrangements will be made for the care of the foster child(ren), if present in the home. Even if the finding is unsubstantiated, the agency may still choose to remove children or not to return children (if they had been removed).
- If applicable, the Foster Care Coordinator will address any licensing issues/violations.

## **Independent Living** **Effective Date: March 2019**

If a child is placed in foster care, independent living services are required once they reach a certain age. All children and youth need to learn basic life skills in order for them to become successful adults. The state recognizes this and requires certain things from those serving youth.

For example, when a 14 year old has been in care for at least six months, an assessment and plan gets developed. If a youth is 15 or older when entering care, the assessment and plan gets developed as part of the case plan.

Assessments and plans continue to occur as long as the youth is in care.

The plan and the services available to the youth focus on:

- Education - high school, college, technical training
- Thinking about a career and planning for it
- Getting and keeping a steady job
- Money management
- Finding a safe and steady place to live
- Proper maintenance of your living space
- Transportation
- Understanding medical coverage
- Making healthy choices
- Understanding and be able to get important documents
- Birth certificate
- Social security card
- Wisconsin State ID
- Immigration papers
- Awareness of community resources and support systems
- Creating and keeping lifelong connections to supportive adults
- Having healthy relationships
- Creating goals for the future

The plans should include measurable goals and objectives. The activities should be experiential, whenever possible. Child welfare agencies are responsible for these plans and services. For more information, view the Wisconsin Child Welfare Independent Living Coordinators map to find out who to contact in your county.

**Young adults age 18 and older (up to 21 in most cases) can also receive services if one of the following applies:**

- **They have aged out of foster care**
- **An adoption or court-ordered guardianship for the child happened after the age of 16**

**In most cases, Transition Resource Agencies (TRAs) are responsible for providing these services.**

## **Insurance Program for Foster Parents** **Effective Date: December 2014**

The State of Wisconsin provides an insurance program for damage done by foster children to the property of a foster parent. This is mandated by the Wisconsin Children's Code 48.627. This insurance coverage is an insurance of "last resort", meaning that application to the foster parent insurance program will only be made if the foster parent's own insurance will not cover the claim. The procedure for filing a claim is as follows:

1. Contact your Foster Care Coordinator immediately when the damage occurs. There is a 90-day period from the time the damage occurs to file the claim.
2. Your Foster Care Coordinator will supply you with the DCS 116 to complete. Once completed, the DCS 116 is returned to the Foster Care Coordinator. You must attach receipts for repair or replacement of the damaged item to the claim. You must also attach a statement from your insurance carrier that this claim will not be paid by them. Incomplete claims will not be processed by the state so it is essential that the form be filled out correctly.
3. When your Foster Care Coordinator received your DCS 116, s/he will then complete the DCS 117 reviewing your claim. Your Foster Care Coordinator may request an appointment to view the damages that occurred. The DCS 116 and 117 are then sent to the Foster Parent Insurance program in Madison. The committee to review these claims meets quarterly.
4. The State Foster Parent Insurance program has a \$1000 yearly deductible on claims. The Brown County Department of Human Services will reimburse Brown County foster parents for the deductible if the claim is deemed appropriate.
5. The deductible is assessed each fiscal year. Therefore, if you have a claim under \$100.00, it is important to file that claim. If another incident occurs the Foster Parent Insurance program would reimburse that. (Note, the state's fiscal year is July-June)
6. No claims can be made against the Foster Parent Insurance program for damages to property by anyone other than the foster child(ren).
7. Police reports are mandatory for stolen items and loss of cash.
8. Foster parents may also claim attorney's fees if liability by the foster parent(s) is found in the lawsuit brought against them by a birth parent.
9. Note that reimbursement made by the insurance program can be limited. The state makes decisions on claims on a quarterly basis, limiting funding within each quarter to 25% of the budget for the year. All claims compete for the funding. When claims exceed funds, each claim is given a percentage of the money claimed. If at the end of the year, the state has unspent funds, they will review claims made during the year and they may provide additional reimbursement.

**Missing Children in Out of Home Care**  
**Effective Date: September 2016, Revised April 2019**

Per the Wisconsin Ongoing Services Standards, children and youth are considered missing from out of home care when their whereabouts are either unknown or the child or youth does not have permission to be away from the out of home care setting. More specifically, the Standards state that children and youth are considered missing from out of home care when any of the following criteria are met:

1. The child or youth is unaccounted for a period of time that cannot reasonably be justified by the child's age, maturity or emotional capacity which shall not exceed EIGHT hours.
2. When efforts to locate the child or youth have been unsuccessful.
3. When it is known or suspected that a child or youth has been taken by force or coercion.
4. When the child or youth is in the company of an unauthorized person or located in an unauthorized place.

**If any of the above criteria is met, please contact your local law enforcement agency and then contact the agency that placed the child with you. If a child goes missing after hours, out-of-home care providers will need to request that the law enforcement agency contact the on-call CPS worker to provide notification of the missing child.**

If it is known or suspected that a child or youth has been taken by force or coercion, the out-of-home care provider must immediately call 911, and then contact the placing agency. It is a requirement that the Department notify the National Center for Missing and Exploited Children (NCMEC) within 24 hours of the child being missing from out-of-home care; therefore, it necessary for out-of-home care providers to notify the on-call CPS worker if the child goes missing between Friday at 4:30pm and Sunday at 10:00am.

The out-of-home care provider must provide the following information to the agency:

1. When the youth was last seen.
2. What the youth was wearing.
3. A description of the circumstances immediately prior to the youth's last sighting.
4. Thoughts about whom the youth may be with, including contact information if available.

5. Up-to-date phone numbers for the youth's parents/guardians.

Children Missing from Out-of-Home Care

6. The law enforcement jurisdiction of the caregiver.

In addition, the out-of-home care provider must contact the agency immediately upon learning new information about the youth's whereabouts or upon the youth's return.

### **Child Photograph Requirements:**

You may be asked to provide a photograph of a child placed in your care or the assigned case manager take a picture with their county-issued phone during a home visit. It is important for agency caseworkers to be able to identify a child in out-of-home care for various reasons. Specifically, when a child or youth is missing from out-of-home care, the efforts to locate the child or youth are enhanced when a recent image of the child or youth can be obtained. Statutes require all children and youth in out-of-home care to have a documented child or youth image. The most recent child or youth image shall be used to assist agencies and the National Center for Missing and Exploited Children in locating children or youth missing from out-of-home care.

The statute includes requirements to capture and document child or youth images in the state's database within the following timelines:

- Within 30 days of the child/youth's entry into out-of-home care
- Updated images every 6 months that the child or youth remains in out-of-home care.

#### **Instructions:**

- The photo should be of the child from the shoulders up, focusing on the child's face so that characteristics are easily noticed (eye color, hair color, etc.)
- The photograph shall be a picture of the child which does not have any item obstructing the child's face, such as a mask or a hat.
- If the child regularly wears eyeglasses, these should be captured in the image.
- The photograph shall be taken close enough to the child as to be able to identify the child.
- It is important to capture an image of the child's full body if the child has missing limbs, uses a wheelchair or other assistive device, etc.
- The child shall be the only person in the photograph.

**Notification Policy**  
**Effective: January 2019**

In the event that a foster care provider fails to notify the agency of one of the required notifications, the foster care provider could be issued a licensing violation or face possible license revocation.

A household member is defined as an adult or minor who is residing or will be residing in the home for 30 days or more.

Foster parents are required to inform their foster care worker or licensor of any changes in household composition within 10 days after a household member leaves the home and at least 30 days prior to a new household member entering the home or otherwise as soon as possible if less than 30 days' notice is known.

Foster parents are required to immediately (within 24 hours) notify the Department if any household member has police contact (to include any situation which warrants police response and may/may not result in a warning, citation, pending criminal charge or conviction) to include contact that occurs both within and outside of the home.

Foster parents are required to notify my foster care worker or licensor of any change in address no later than 30 days prior to moving to a new physical residence or a change of a mailing address.

**All changes are to be reported to your assigned foster care worker or licensor. If you are unable to reach your worker/licensor, please call the Foster Care Supervisor.**

**Out of State Travel with Foster Children**  
**Effective Date: September 2016**

An out-of-home care provider may make the decision to take a child out-of-state without prior authorization for a period of time less than 48 hours. If the out-of-home care provider wants to take a child out-of-state for more than 48 hours, they must get authorization from the agency with placement and care responsibility of the child. The out-of-home care provider should use the Reasonable and Prudent Parent Standard to make decisions about traveling with a child placed in their care, including when possible and appropriate, engaging in conversations about the travel with the child's parent or guardian. The out-of-home care provider should consider any court-ordered activities that travel may interfere with.

Reasonable and prudent parenting decisions cannot violate any court ordered visitation, appointments, or treatment planning. If the travel interferes with any of these activities, the out-of-home care provider must secure authorization from the agency and may also need authorization from the court.

**Out of Country Travel**  
**Effective: September 2016**

The out-of-home care provider must get authorization from the agency with placement and care responsibility when taking the child out-of-the country for any period of time. The Department requires notification at least 60 days in advance. The Department Manager must be consulted and in agreement with the travel plans.

**Paperwork Required at Placement**  
**Effective Date: October 2016**

In Wisconsin, agencies are required to give specific forms to foster parents when a child is placed in their home. These forms may be incomplete when the child is placed, but the department will pass on the information we have and will update foster parents as soon as information is learned.

The following paperwork should be provided to foster parents upon placement:

**Medical Consent Form**

This form is signed by the legal guardian, giving consent to approve the provision of routine medical services, including medical and dental examinations and nonemergency prescribed treatment (e.g. tooth repair, immunizations, medications, reproductive health needs assessment). Exceptions are also provided. Further consent and permission is required for any procedures/provisions not considered routine.

**Foster Home Agreement**

This form demonstrates the department has formally placed a foster child in out of home care. This includes the agency placing the child (Brown County Human Services), the name of the child, and the name of the foster parent(s).

**Information for Out-of-Home Care Providers Part A (Foster Care Form A)**

This form contains information that is critical for the care of the child when they first enter placement. Some of the material is repeated elsewhere on other forms. This form should be provided within two days of the child's placement.

**Information for Out-of-Home Care Providers Part B (Foster Care Form B)**

This form contains information that is critical for out-of-home care providers to know as soon as the child first enters placement, but this section contains information that can be more difficult to obtain. Therefore, Part B may be received at a separate time from Part A. This form should be provided within seven days of the child's placement.

**If you did not receive all placement paperwork as stated above, please contact your Foster Care Worker immediately.**

**Perks Program**  
**Effective: January 2019**

Things to know about the Foster Care Perks Program:

- All participating businesses are aware of foster parent's commitment to confidentiality. With that said, they know not to ask for the names of foster children so please do not provide that information when using the Perks ID Card.
- You will get a new card upon renewal of your foster care license.
- Don't forget, you must present your Foster Care ID Card to get these special deals!!!

**Ashwaubenon Bowling Alley**

2929 Allied Drive

Adult pays full price. Child is free.

<http://ashbowl.com/>

**Caballos Con Dios Ranch**

3146 School Lane

Free visit to the ranch. Learn about horses

with hands on activities.

Horseback riding

is available. Weekends are best.

Please call to make an appointment.

Cindy Lemke: 920-680-8463

**Children's Museum**

301 N. Washington Street

Adult pays full price. Child is free.

[www.gbchildrensmuseum.org/](http://www.gbchildrensmuseum.org/)

**Hobby Town USA**

2767 S. Oneida Street

20% off all regular priced models and rockets

[www.hobbytown.com](http://www.hobbytown.com)

**National Railroad Museum**

2285 S. Broadway

Adult pays full price. Child is free.

[www.nationalrrmuseum.org/](http://www.nationalrrmuseum.org/)

**Riviera Lanes**

2450 University Avenue

Adult pays full price. Child is free and

receives a free shoe rental!

[www.rivieralanesgb.com](http://www.rivieralanesgb.com)

**Rola-Rena**

731 Morris Avenue

Adult pays full price. Child is free.

[www.gorollerskating.com](http://www.gorollerskating.com)

**Village Lanes of Howard**

3798 Velp Avenue

Adult pays full price. Children are free.

<http://bowlvillagelanes.com/>

## **Prudent Parenting** **Effective: September 2016**

The Federal “Preventing Sex Trafficking and Strengthening Families Act” of 2014 requires that all states implement a Reasonable and Prudent Parent Standard (RPRS) to increase normalcy in out-of-home care. This law requires out-of-home care providers to apply reasonable and prudent parenting when making decisions involving children placed in their care so they can allow children to participate in age and developmentally appropriate activities.

RPRS is a standard of decision making that allows an out-of-home care provider to make certain parenting decisions for all children placed in their care. Reasonable and prudent parenting is built on careful and sensible decisions that promote child participation in **age or developmentally appropriate** extracurricular, enrichment, cultural, and social activities. As an out-of-home care provider, you will use reasonable and prudent parenting daily on a child specific basis to allow children placed in your care to participate in age and developmentally appropriate activities that encourage normalcy, emotional, and developmental growth, while still maintaining the health, safety, best interest, and cultural, religious, and tribal values of the child.

**When making a decision using RPPS, you will consider a combination of factors in relation to the child and the specific situation. Factors include, but are not limited to:**

- Child’s wishes
- Age, maturity, development
- Potential risk factors
- Bests interests of the child
- Opportunity for growth
- Family-like life experience
- Child’s behavioral history
- Court/legal considerations
- Cultural, religious, and tribal considerations
- Parent and guardian values

The Department recognizes when children are placed in out-of-home care there may be differing opinions/thoughts between biological parents and foster parents. The Department encourages strong communication between biological parents and foster parents whenever possible.

While their permission is not required for reasonable and prudent parenting decisions, the parent/guardian may have valuable insight about the child that may help you make decisions and will allow them to remain an active part of the child's life. The parent/guardian does not have to be called or consulted for every individual decision, but their values and input should be taken into consideration.

**Reasonable and prudent parenting decisions may not violate court orders, other laws, administrative rules, or other services that are part of the child's permanency plan, including but not limited to:**

- Court-ordered family interaction**
- Medical approvals/other medical laws**
- Medication authorizations or approvals**
- Confidentiality laws**
- Educational-related decisions based on statute**

If you are unsure if your decision conflicts with any of the above, contact the child's caseworker and/or your foster care licensor.

If a prudent parenting disagreement occurs, whether between the foster parents and birthparents or foster parents and the Department, we will work effectively as a team to make a decision that is best for that individual child.

**The fear of liability should not prevent you from applying reasonable and prudent parenting. State statute limits liability under s. 895.485 Wis. Stats. when the decision was reasonable and prudent.**

**Removal of a Child in Foster Care**  
**Effective Date: December 2014**

Independent of how long a child has resided in a foster home, WI stat 48.64 (1m) provides that the Department has access at all times to the foster child and foster home. *(Note: This policy pertain to children placed under Ch. 48 and 938)*

**REMOVAL OF A CHILD IN THE HOME FOR LESS THAN SIX MONTHS:**

If the child has resided in a foster home for less than six months, s/he may be removed from that home whenever the worker determines that removal from the foster home is in the child's best interest.

The agency is required to give a 10 day notice of a child's removal when the child has lived with them for less than six months. This notice can also provide an opportunity to inform the foster parents of their right to appeal the decision and how to request a fair hearing. Foster parents should be advised that their decision to appeal will not stop or delay the child's removal. If this child is identified as Native American and ICWA (Indian Child Welfare Act) is enforced this protocol may not apply.

**REMOVAL OF A CHILD IN THE HOME FOR SIX MONTHS OR LONGER:**

If the child has resided in a foster home for six months or longer, the social worker must provide written notification to the foster parents at least 30 days before the child is to be removed. This notice must state the reason for removal. The foster parents must also be informed of their right to appeal the agency's decision if they disagree and how they can request a fair hearing. For a copy of the Request for Fair Hearing form, go to this link: [https://doa.wi.gov/DHA/WFSHrgReqForm\\_Burmese.pdf](https://doa.wi.gov/DHA/WFSHrgReqForm_Burmese.pdf)

The child may not be removed from the foster home until completion of a fair hearing or 30 days from the date of written notification, whichever is later. There are exceptions to this requirement. A child may be removed from the foster home earlier than the 30 days if:

1. The court has ordered a removal of the child
2. The safety of the child requires earlier removal due to circumstances outlines in WI stat. 48.18; or
3. The child is placed for adoption under WI stat. 48.833.

*(Note: Foster parents are still entitled to notice and the right to a fair hearing even if the child is removed earlier than 30 days for these reasons.)*

**Removal of a Child in Foster Care- Continued**

**REMOVAL OF A CHILD AT THE FOSTER PARENT'S REQUEST:**

Disruption of a placement is very traumatic for children and must only be done as a last resort. If foster parents need additional resources to support a child's placement, s/he is directed to contact the child's ongoing worker or a Foster Care Coordinator to request additional services. When a placement does disrupt, the agency needs adequate time to plan the subsequent placement for the child.

Regardless of how long a child has been placed in a foster home, the foster parent is required to provide the agency with a written 30-day notice that they would like the child removed.

## **Resources for Foster Parents**

### **1. Foster Care & Adoption Resource Center:**

<https://wifostercareandadoption.org/>

**About:** “We at the Foster Care and Adoption Resource Center (FCARC) are here to provide information and resources for Wisconsin”

### **2. Department of Children and Families:**

<https://dcf.wisconsin.gov/fostercare/parent>

**About:** “The Mission of the Department of Children and Families is to improve the economic and social well-being of Wisconsin’s children, youth and families. The Department is committed to protecting children and youth, strengthening families, and supporting communities”.

### **3. Dentists That Accept Medical Assistance**

#### **Familia Dental**

**Locations: East Green Bay and  
West Green Bay**

Phone: (920) 499-2770 or  
(920) 321-3501

Email: [info@familiadental.com](mailto:info@familiadental.com)

#### **Oral Health Partnership**

##### **Locations:**

-OHP Howe Resource Center

-OHP Kroc Center

-OHP West

To Schedule at Any Location:

(920) 965-0831

## **Respite**

**Effective: September 2016; Revised: April 2019**

Foster parents are encouraged to utilize respite for their foster child as a way to get a break and come back fresh to the care of the child. Ideally, this is an informal resource and natural support to the foster family. The department encourages foster homes to utilize their own informal supports, the foster home may request respite through the foster care program, but this needs to be utilized as an absolute last resort.

For respite services utilized through Brown County Foster Care Program, the respite rate for a 24-hour period will be as follows:

1. For children with basic minimal care needs, the respite rate will be \$50.
2. For children with moderate to high care needs, the respite rate will be \$75.
3. Children's Long Term Support cases will be managed by the waiver worker. Please note these rates are different.

Foster parents are responsible for the respite payment, unless approved by the Foster Care Supervisor. It is a general expectation that foster parents are paying other foster parents the prorated daily rate (uniformed foster care divided by number of days in the month).

The Foster Care Coordinator or Supervisor may make adjustments to this rate based on individual circumstances, such as the level of the child's care needs, the number of children being cared for and/or the length of time the provider watches the children.

If the respite is over 48 hours, foster parents are required to notify the child's worker and a Foster Care Coordinator of the planned respite.

Background checks may be requested of respite providers, if respite is being provided on a regular and ongoing basis.

The agency does not guarantee that all respite requests will be filled. The department will require a 30 day notice for any respite services. The department will not honor requests for respite services on holidays due to lack of resources.

Respite payments are taxable income.

## **Safe Sleep**

**Effective Date: December 2014; Revised: April 2019**

SIDS, Sudden Infant Death Syndrome, is the leading cause of death for infants between one month and twelve months of age. To help prevent SIDS deaths in foster children, foster parents are required to use “safe sleep” practices as recommended by the American Academy of Pediatrics.

1. Always place babies to sleep on their backs during naps and nighttime sleep. Babies are less likely to choke when they sleep on their backs.
2. Do not cover them with a blanket. Blankets can cover a baby’s face, so use a sleep sack, not blankets to keep baby warm.
3. Avoid letting the infant become overheated.
4. Place the infant in a safety approved crib or pack-n-play with a firm mattress and a tightly fitted sheet.
5. Place the crib or pack-n-play in an area that is always smoke-free.
6. Keep all toys, soft bedding, bumper guards, fluffy blankets, pillows, stuffed animals and wedges out of the crib.
7. Do not place babies to sleep on adult beds, chairs, sofas, waterbeds or cushions.
8. Because babies need tummy time, give them plenty of awake time to be on their tummies at a time when an adult can supervise them closely.
9. Never lay a baby down on or next to a pillow. Pillows are extremely dangerous for infants as they can cause suffocation.
10. Do not ever use infant sleep positioners. The FDA says there have been 12 known deaths associated with these products.
11. Never let a baby sleep in a car seat or swing.
12. Crib slats must be 2 ¾ inches apart.

**\*\*Tummy to play, back to sleep.**

Your questions about safe sleep practices can be answered at the following:

Brown County Health Department 920-849-1432

CDC: <https://www.cdc.gov/sids/Parents-Caregivers.htm>

### **Co-Sleeping:**

The term “co-sleeping” can be confusing, as it is used both to refer to sharing a bed and sharing a room. To clarify the distinction, many pediatric experts now refer to “bed-sharing” (referring to an infant who is sleeping in the same bed, couch, or other surface

where parents or others are sleeping), and “room-sharing” (referring to an infant who is sleeping in the parents’ room, but in their own crib or bassinet).

Provide a separate, but nearby sleeping environment, meaning: babies (ages 0-1) can share a room with their parents, but not a bed. The risk of SIDS is reduced when the infant sleeps in the same room as the mother.

The American Academy of Pediatrics Task Force has found that rates of bed-sharing are increasing. But the conclusion of the task force is that bed-sharing, as practiced in the US and other Western countries is more hazardous than the infant sleeping on a separate sleep surface. It is recommended that infants not share a bed with adults. Infants may be brought into bed for comforting, but should be returned to their own safe space to sleep when the parent is ready to return to sleep.

**Social Media Usage for Foster Parents**  
**Effective Date: January 2019**

Confidentiality is important when using social media. Foster parents should not post photos or information on social media sites or on any internet-related sites (Examples include: Facebook, Instagram, Snapchat, etc).

There should be no identifying information posted about a child placed in a foster parents' care or about the case plan. Foster parents should never refer to a child by his or her first name or as "foster child." Foster parents should refrain from posting pictures of a child placed in their care, the only exception is for a family or group photo as it is a child's best interest to be included in this interaction vs. excluded for purposes of normalcy.

**Social Media Usage for Youth**  
**Effective Date: September 2016**

Access to social media is a normal activity for a child that allows them to connect with peers and an opportunity to learn internet safety.

The out-of-home care provider should use the Reasonable and Prudent Parent Standard to make decisions about a child's access to and use of social media and other technology. The out-of-home care provider should consider specific knowledge about the child's age, maturity and developmental level. This also includes engaging in conversations with the parent or guardian of the child when appropriate.

Out-of-home care providers should consider whether there are any court orders or safety plans in place that does not allow the child to interact with certain individuals. Out-of-home care providers should carefully consider the child's behavioral history and their safety (such as whether they were a victim of sex trafficking, run away often, etc.), and if there is a need to limit access or monitor messaging. This may include the need to limit use to open and public spaces or getting access to the child's username and password for social media accounts. Out-of-home care providers should use access to social media to teach the child about safe internet practices.

## **Support for Foster Children**

### **1. FosterClub Wisconsin: <https://www.fosterclub.com/>**

**About:** At FosterClub, we believe that youth in care are experts about many aspects of foster care. Acknowledging their expertise, our staff, our board, and our outreach members include young people all across America who have experienced foster care. We believe that great outcomes occur when foster youth tap their amazing inner-resilience and personal power to become forces for change in the system and in their own lives.

**We are a source of support:** We know that successfully navigating life in the foster care system can be difficult, so FosterClub’s support includes practical information about how foster care works, useful connections to resources in the youth’s community, and important guidance about how to advocate for oneself in the system and foster home. We offer emotional support by listening to concerns, connecting to peers, and inspiring with stories of role models who have emerged from foster care to lead successful lives.

**We are a force for change:** We put young people in care at the table to educate and influence policy makers, caregivers, child welfare professionals. We connect youth to their communities and inspire them to give something back. Hand in hand with the young people we serve, we challenge the status quo, raise public awareness, and push for necessary change in the foster care system.

**Contact:**

503-717-1552

[info@fosterclub.com](mailto:info@fosterclub.com)

### **2. TeenCentral.net**

**About:** TeenCentral.Net is a safe, free and totally anonymous site that offers help when you need it most. If you have a problem, question, difficult situation or just want to vent, write your “story” and there will be an answer waiting for you within 24-hours. It’s that easy – so log on and work it out!

**Contact:** <http://www.teencentral.net>

**3. Youth Communication: <https://youthcomm.org>**

**About:** Youth Communication helps marginalized youth develop their full potential through reading and writing, so that they can succeed in school and at work and contribute to their communities.

We publish true stories by teens that are developed in a rigorous writing program. These stories are uniquely compelling to peers who do not see their experiences reflected in mainstream reading materials. They motivate teens to read and write, encourage good values, and show teens how to make positive changes in their lives. For teachers and other staff, our materials and training provide tools to understand and engage hard-to-reach teens while helping them improve their academic, social, and emotional skills.

Our work is grounded in the belief that reading and writing remain the best ways to stimulate the imagination and to encourage reflection and discussion. We believe that literate, thoughtful citizens are essential to the survival of a vibrant, democratic society.

**Contact:**

Youth Communication  
224 W. 29th St. 2nd Fl.  
New York, NY 10001  
Phone: 212-279-0708  
Fax: 212-279-8856

**Support for Foster Parents-Local**  
**Effective: April 2019**

**1) Foster the Village:**

**About:** Foster the Village is a tax-exempt, non-profit organization formed to provide aid to the Brown County Foster Care community. The organization supplies clothing, shoes, diapers, and other care items to children who arrive in foster care without adequate supplies after being removed from parental custody due to abuse or neglect. Immediate access to clothing and other items aids the transition for children and allows foster parents to focus on other urgent needs of children.

**Contact:**

General Foster Homes can contact Foster the Village directly, at [fostervillage@gmail.com](mailto:fostervillage@gmail.com) or (920)660-2221.

**2). Support Group:**

**About:** This group is comprised and facilitated by Brown County Foster Parents. The support group meets on a quarterly basis and is open to all general non-relative licensed foster homes. For more information, please contact one of the facilitators below:

**Contact:**

Foster Parent Facilitators:

Pam Krueger

Claudia Martin

Meghan Phillips

920-639-9027

580-595-1789

920-858-9557

[pkkrueg@gmail.com](mailto:pkkrueg@gmail.com)

[Mrssrm6@yahoo.com](mailto:Mrssrm6@yahoo.com)

[Mjacquet94@gmail.com](mailto:Mjacquet94@gmail.com)

**3.) “We Care Foster Parent Support Group”:**

**About:** This is a Facebook that is comprised and monitored by Brown County Foster Parents. Confidentiality needs to be adhered to at all times. **Please note this page is for general non-relative foster homes.**

**Support for Foster Parents-Statewide**  
**Effective: September 2016**

**1. Coalition for Children, Youth, and Families:** (formerly Adoption Resources of Wisconsin): offers webinars, workshops, support groups, and other assistance to pre- and post-adoptive families.

Contact: <https://wifostercareandadoption.org/>

For more information phone, (414) 475-1246 or (800) 762-8063 or e-mail [info@coalitionforcyf.org](mailto:info@coalitionforcyf.org)

**2. Wisconsin Foster and Adoptive Parents Association:**

**About:** WFAPA is a peer and volunteer-based organization that supports and advocates for foster and adoptive parents by offering training, support program and helps to create and support different legislative measures with our fellow representatives in Madison. WFAPA's conferences bring in highly qualified speakers who help educate on how to handle or better understand tough issues. WFAPA conferences reach a statewide population, and WFAPA encourages networking amongst foster and adoptive parents. You never know who might just have an answer for you!

**Contact:** <http://www.wfapa.org>

## **Things Foster Parents May Encounter** **Effective: September 2016**

As a foster parent, there is a possibility that you may encounter new situations in which you may need guidance in handling. Here are some helpful hints on how to handle some common occurrences.

### **1. Head Lice:**

**About:** Adult head lice are roughly 2–3 mm long. Head lice infest the head and neck and attach their eggs to the base of the hair shaft. Lice move by crawling; they cannot hop or fly.

Head lice infestation, or pediculosis, is spread most commonly by close person-to-person contact. Dogs, cats, and other pets do not play a role in the transmission of human lice.

Both over-the-counter and prescription medications are available for treatment of head lice infestations.

**Treatment:** <https://www.cdc.gov/parasites/lice/head/treatment.html>

### **Local Resources:**

Lice Clinic of America

124 N Broadway, Suite L1

De Pere, WI 54115

920-280-0099

<https://www.liceclinicsofamerica.com/landing/green-bay>

Nitorious B.U.G. LLC

812 S Fisk St

Green Bay, WI 54304

920-430-0284

<https://www.nitoriousbug.com/>

### **2. Scabies**

**About:** Human scabies is caused by an infestation of the skin by the human itch mite (*Sarcoptes scabiei* var. *hominis*). The microscopic scabies mite burrows into the upper layer of the skin where it lives and lays its eggs. The most common symptoms of scabies are intense itching and a pimple-like skin rash. The scabies mite usually is spread by direct, prolonged, skin-to-skin contact with a person who has scabies.

Scabies occurs worldwide and affects people of all races and social classes. Scabies can spread rapidly under crowded conditions where close body contact is frequent. Institutions such as nursing homes, extended-care facilities, and prisons are often sites of scabies outbreaks.

**Treatment:** <http://www.cdc.gov/parasites/scabies/treatment.html>

### **3. Common Illnesses**

- **Foodborne Illness:** Foodborne illness is caused by consuming contaminated foods or beverages. Many different disease-causing microbes, or pathogens, can contaminate foods, leading to many different foodborne illnesses.<sup>3</sup> Educating students, families, and school staff on simple but effective food safety measures can help prevent the approximately 76 million cases of foodborne illness reported

#### **Things Foster Parents May Encounter- Continued**

in the United States annually, which result in an average of 325,000 hospitalizations and 5,000 deaths.<sup>4</sup>

- Food safety remains a concern in schools, as children can come into contact with contaminated foods on school property.
- Noroviruses are a major cause of foodborne illness, and outbreaks occur in a range of settings, including schools. CDC's Updated Norovirus Outbreak Management and Disease Prevention Guidelines provide information on prevention and control.
- **Influenza:** On average, each year 5%–20% of the U.S. population acquires seasonal influenza (flu), more than 200,000 people are hospitalized as a result of flu complications, and about 36,000 people die from flu. Young children are among the populations at greatest risk for serious flu complications. During the 2004–2005 influenza season, only 34.8% of children aged 2–17 years with high-risk conditions received an influenza vaccination.

Flu viruses are spread mainly from person to person through coughing or sneezing by people with influenza. Sometimes a person can become infected by touching something — such as a surface or object — with flu viruses on it and then touching their mouth or nose. The best ways to prevent seasonal flu is to get a seasonal flu vaccination each year and follow proper respiratory and hand hygiene etiquette.

- **MRSA (Methicillin-Resistant *Staphylococcus aureus*):** MRSA is methicillin-resistant *Staphylococcus aureus*, a type of staph bacteria that is resistant to certain antibiotics and may cause skin and other infections. Invasive (i.e., serious) MRSA infections occur in approximately 94,000 people each year and are associated with approximately 19,000 deaths, most frequently among

persons in hospitals and health care facilities who have weakened immune systems. MRSA can also infect otherwise healthy people in the community at large. Community-associated MRSA cases are usually manifested as skin infections, such as pimples and boils.

**Prevention Tips:**

- **Hand Hygiene:** Keeping hands clean is one of the best ways to keep from getting sick and spreading illnesses. Practicing good hand hygiene gets rid of bacteria and viruses from contact with other people or surfaces. This involves teaching good hand-hygiene practices, providing hand-hygiene information to students and families, and providing the hand soap and paper towels necessary to reduce the spread of infectious diseases in the school environment.
- **Respiratory Etiquette:** Respiratory infections can spread from person to person in respiratory droplets of coughs and sneezes. Droplets from a cough or sneeze of an infected person can be propelled through the air and land on the mouth or nose of people nearby. To prevent the spread of respiratory illnesses, the nose and mouth should be covered with a tissue when coughing or sneezing and the tissue should be thrown in the trash immediately after use.
- **Cover Your Cough**

**\*\*Information obtained directly from the Center of Disease Control and Prevention**

## **Training**

### **Effective Date: December 2014**

#### **Level One:**

- Level One foster homes have to complete pre-placement training prior to being issued a foster license.  
Link: <https://wcwpds.wisc.edu/foster-parent-training/foster-parent-pre-placement/>

#### **Level Two:**

- Prior to being issued a license, each foster parent shall complete six hours of pre-placement training offered online.  
Link: <https://wcwpds.wisc.edu/foster-parent-training/foster-parent-pre-placement/>
  - Within the first 24 months after licensure, each Level Two foster parent shall attend Foundation Training offered by the Milwaukee Child Welfare Partnership  
Link: <https://uwm.edu/mcwp/foundation-courses/>
  - You must contact your licensor for more information.
- 
- For each subsequent year of licensing after the initial licensing period, each Level Two foster parent will be expected to complete ten hours of training. The following is a list of acceptable training methods:
    - Video, audio and web-based presentations: Online courses.
      - Support groups specific to caring for children and, foster parent support group meetings when there is a speaker presentation- only the speaker portion of the meeting may be counted.
    - Books, periodicals, web-based resources, educational videos or TV programs. These must relate to children or foster parenting; two hours total per year.
    - Work-related training and Adult Education courses that has relevance to working with children or the birth families of children.
    - Face to face consultation with professional with expertise in specific identified areas such as time spent with the child's therapist or teacher specific to discussing interventions or strategies for example in addition to working with Birth to Three professionals and so forth.
    - Conferences, workshops, seminars and webinars (completion certificate required)
    - Mentor family consultations

Foster parents must adhere to training standards set by the state and Brown County Human Services.

At the time of renewal, the foster parents and Foster Care Coordinator shall evaluate the foster parent's overall performance and as needed, develop an individualized training plan based on his or her demonstrated need for training in particular topics or in managing specific case situations. Foster parents need to provide documentation of training hours prior to the relicensing home visit OR input training hours on their PDS online accounts.

Foster parents who do not complete ten hours of training credits risk non-renewal. Brown County Department of Human Services reserves the right to not relicense and/or not make further placements in the home if the foster parent(s) fails to comply with training requirements.

**Training Resources:**

<https://wifostercareandadoption.org/>

[www.fosterparents.com/training](http://www.fosterparents.com/training)

[www.fostercare.net](http://www.fostercare.net)

[www.fosterparentcollege.com](http://www.fosterparentcollege.com)

<https://www.drjohndegarmofostercare.com/>

**Trampoline Use**  
**Effective Date: December 2014**

Trampoline jumping poses a high risk of injury for children. The activity can result in strains, sprains, fractures and other injuries — including potentially serious head and neck injuries. The risk of injury is so high that the American Academy of Pediatrics strongly discourages the use of trampolines at home.

If you choose to buy a trampoline despite the risks, follow these important safety rules:

- **Use safety nets and pads.** Install a trampoline enclosure — a special net designed to surround the trampoline — and cover the trampoline's frame, springs and surrounding landing surfaces with shock-absorbing pads. Regularly check the equipment for tears, detachments and deterioration. DCF 56.07 (8) (b).
- **Place the trampoline on level ground.** Make sure it's a safe distance from trees and other hazards.

Information obtained from: <http://www.mayoclinic.org/healthy-living/childrens-health/expert-answers/trampoline-exercise/faq-20058001>

## **Well Testing**

### **Effective Date: December 2014**

Applicants for foster home licenses under DCF 56 whose household water source is from a private well shall demonstrate that drinking water is safe and that arsenic levels fall within federal and state guidelines by providing the department with a well test result from a certified laboratory. If you have had a well water test that includes the below information within the last two years from the date on your application, a copy of your safe water reading will suffice.

License renewals will require another water test. The department can request a safe water test at any time. The foster parent or foster parent applicant is responsible for testing/lab expenses.

**Testing will need to include coliform bacteria, E.coli, nitrate and arsenic.** For further information please visit <https://dnr.wi.gov/topic/wells/privatewelltest.html> or call the Brown County Health Department at 920-448-6400.

Arsenic is an element that occurs naturally in soil, bedrock, groundwater, and ocean water. High levels of inorganic arsenic, the most toxic form, have been found in hundreds of private drinking water wells in Wisconsin. Most of the impacted wells are located in Outagamie, Winnebago and Brown Counties where bedrock is naturally high in arsenic. Experts know the increased water demands have lowered the water table, which has allowed oxygen to get into the aquifer, creating chemical reactions that release arsenic into the water.

Drinking arsenic contaminated water has been associated with the following health effects:

- Skin cancer
- Internal cancers (bladder, prostate, lung and other sites)
- Thick rough skin on hands and feet
- Unusual skin pigmentation
- Numbness of the hands and feet
- Circulatory problems
- Stomach pain, nausea, diarrhea

## **WIC**

**Effective Date: December 2014**

The purpose of the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) is to promote and maintain the health and well-being of nutritionally at-risk pregnant, breastfeeding and postpartum women, infants and children.

WIC provides nutrition education, breastfeeding education and support, supplemental nutritious foods, and referrals to other healthy and nutrition services for children ages 0-5.

**How to Apply:** To apply for WIC, contact a [local WIC office](#) near you. To find out more about WIC and other programs for which you may be eligible, call toll-free: 1-800-722-2295 (the [Maternal and Child Health Hotline](#)). The Hotline is available 24 hours a day, seven days a week. TTY and interpreter services are available.

\*\*Please note that foster parents must bring their Placement Agreement as documentation when applying.

### **NEW Community Clinic**

622 Bodart Way  
Green Bay WI 54301  
Telephone: 920-437-8368

610 South Broadway  
Green Bay WI 54303  
Telephone: 920-431-0243

### **Oneida Community Health Center**

525 Airport Road  
PO Box 365  
Oneida WI 54155  
Telephone: 920-869-4829

**More information:** <http://www.dhs.wisconsin.gov/wic/#apply>