Foster Parent Handbook

Department of Family Services

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Foster Parent Documentation Log

References to the male gender throughout the handbook were used to enhance the flow of communication and are intended to include the female gender. Also, the term “parent(s)” refers to the foster child’s birth (biological) parents.

NATIONAL FOSTER PARENTS ASSOCIATION

CODE OF ETHICS

Each foster parent has an obligation to maintain and constantly improve the practice of fostering; to examine, use and increase the knowledge upon which fostering is based; and to perform the service of fostering with integrity and competence.

Principles:

1. I regard as my primary obligation the welfare of the child served.
2. I shall work objectively with the agency in effecting the plan for the child in my care.
3. I hold myself responsible for the quality and extent of the services I perform.
4. I accept the reluctance of the child to discuss his or her past.
5. I shall keep confidential from the community information pertaining to any child placed in my home.
6. I treat with respect the findings, views, and actions of fellow foster parents and use appropriate channels, such as foster parent organizations, to express my opinions.
7. I shall take advantage of available opportunities for education and training designed to upgrade my performance as a foster parent.
8. I respect the worth of all individuals regardless of race, religion, sex, or national ancestry in my capacity as a foster parent.
9. I accept the responsibility to work toward assuring that ethical standards are adhered to by any individual or organization providing foster care services.
10. I shall distinguish clearly in public between my statements and actions as an individual, and as a representative of a foster parent organization.
11. I accept responsibility for working toward the creation and maintenance of conditions within the field of foster care that enables foster parents to uphold the principles of this code.

FOSTER PARENT HANDBOOK

1 INTRODUCTION

A. PHILOSOPHY

We believe foster care, in most cases, is not a permanent solution for a child. Instead, foster care provides for the physical and emotional needs of a child until a more permanent plan can be achieved. "A child deserves permanency" is the philosophy of the Department of Family Services (DFS), whether with his own family or through an alternate plan. We believe each child is an individual and each situation must be weighed individually. We support periodic outside case review of all children in placement to work toward achieving permanent and positive case solutions for the children in our care.

B. THE FOSTER PARENT'S ROLE

Your job is unique because each foster child is unique. For reasons beyond his control, separation from the home and family has occurred. The many fears, worries and anger looming large to the child need special attention and understanding.

You meet a foster child who may be in shock. You will care for, worry about, scold and love this child as you do your own, but he is not exactly like one of your own. You are raising someone else's child without the backup of family kinship and supportive comfort.

You take the foster child "as is." You will not start at the beginning as you did with your own. Your foster child will come to you with a definite personality, range of habits, expectations and attitudes – all shaped by relationships formed in the past. This is a child you will share: a child to be enjoyed by your family; a child destined to bring both sunshine and rain; but most importantly, a child needing your ever-present love and support. Being a foster parent requires love, understanding and sensitivity to feelings never experienced by you.

Foster parents should be persons:

- Who care about others and respond to them,
- Who can love a child though they may not love all of his behavior,
- Who can (and do) enjoy being parents,
- Who can give affection and care to a child without expecting him to be loving and grateful in return,
- Who, if married, have a stable and happy marriage,
- Who are able to get along with and respect people from all walks of life,
- Who have a natural liking for children and enjoy caring for them, playing with them, and talking with them, and
- Who are able to accept the fact the foster child is not entirely theirs; his own parents and DFS have important roles in his life.

C. THE CASEWORKER'S ROLE

During the time you have the children placed in your home you may work with a number of caseworkers. In some field offices the same caseworkers will be involved with you from the investigative to the more permanent state of foster care. In other offices, you may have contact with several caseworkers:

- The foster home placement caseworker does the study of the foster home and a yearly review and evaluation. This is the primary person to whom you can relate your concerns and who will remain a constant through the various placements of children. This person is there for you.
- Many foster children's first contact with this agency occurs when the DFS caseworker investigates a complaint of abuse or neglect. This caseworker may remain involved for a month or longer until the investigative procedure is complete.
- Meanwhile, the child may have been placed in your home by another caseworker who suggested your home as the best placement for this particular child.
- Sometime after the first month, a more permanent caseworker may be assigned to the child.

Every effort is made to minimize change of caseworkers after this point to give the child and the foster parents a sense of stability. Sometimes, however, circumstances may force a change and you may find another caseworker involved with your foster child.

The caseworker serves as a communication link between the agency and the foster parents. Please do not threaten the child with the caseworker, as present and future contact will have to be maintained. This caseworker will also act as the "go between" in arranging visitation between foster children and parents, unless otherwise arranged.

Remember, although we specialize in our roles, all of us need to work together as a team. Therefore, we encourage frequent and collaborative contact among foster parents, caseworkers, and family assistance workers.

D. THE LEGAL SYSTEM: HOW THE CHILD ENTERS CARE

It is the caseworkers in the agency who are mandated to do the overall planning for a child. This will include decisions regarding where he is to live, the nature of his contacts with his own family, and planning for his future. In the event of protective custody, a court hearing must be held within 72 hours, which will determine whether the child is placed in the legal and/or physical custody of DFS or is returned to his parent(s). If placed in DFS legal and physical custody, frequent reviews of the placement and parent's progress are required, and some of these reviews are conducted through the court.

There are many reasons for placing children in foster care; among these are the following:

1. A child has been seriously abused or neglected, either physically or emotionally, and all reasonable efforts to work out the problems in the home have failed. (Court ordered)

2. A child has been abandoned or left alone for unreasonable lengths of time without supervision. (Court ordered)

3. Parents have filed a Petition with the court. A *Child in Need of Supervision (CHINS)* means any child who is habitually truant, has run away from home or habitually disobeys reasonable, and lawful demands of his parents, guardian, custodian or other proper authority and is ungovernable and beyond control. (Court ordered)

4. For a variety of reasons, a parent is unable to care for their child and asks the agency to intervene by placing their child in foster care for 30 days. (Voluntary)

2 WHEN THE CHILD ENTERS YOUR HOME

A. PLACEMENT

When placement of a foster child in your home occurs, you need to think about how he is feeling, in addition to how you are feeling. He probably feels he has been rejected by his parents, whom he loves despite their inadequacies. They are persons known to him. You are unknown. His home, no matter how cramped or dirty, is home and your home may seem bewildering, even terrifying to him. Feeling rejected, his view of you and your home could be seen as punishment.

A foster child knows how his parents have reacted to him, but he doesn't know how you will react. An early discussion of limits may help avoid a need to test them. Testing may occur anyway to see if you mean what you say. He may refuse to eat, or his may overeat. He may cling to you, or he may flee from you. He may act out his anger by hitting you, breaking things, or he may keep his anger inside. He may wet his bed because of anger or insecurity. It will take time, patience, skill and love to resolve these problems and those prompting the need for foster care. He may be an angel for several days (or weeks) through a "honeymoon" period. The following is a list of hints other foster parents have found useful in helping a foster child settle into their homes:

1. Welcome the child quietly. Do not overwhelm him with attention or a show of affection, this can be extremely threatening.

2. Help the child settle into a regular routine as quickly as possible.

3. Let the child know the rules of your home and be as consistent as possible in enforcing the rules.

4. Do not be disappointed if the child does not respond to you immediately.

5. Give the child opportunities to talk to you, but do not pry into his past life or criticize his parents. NEVER – NEVER – NEVER say negatives about his parents. Reinforce the parents' relationship with their child whenever possible.

6. Do not threaten the child with his caseworker as a means of dealing with his behavors.

7. Help the child develop a feeling of pride and confidence by giving him tasks within his by giving him tasks within his ability.

8. When the child succeeds at something, express your pleasure and recognition of his abilities.

9. Be sure the child has a place to keep personal things.

10. Refrain from ridiculous or severe punishment. (In the case of bedwetting, shame or punishment will only in crease the problem).

11. Do not threaten the child with giving up. He will be helped most by your love and understanding and a feeling of security.

12. Ask your caseworker and other foster parents for suggestions if your methods don't seem to work.

B. SEPARATION

One of the most important and potentially difficult tasks you have to deal with is "separation." The foster child must deal with his initial separation from his parents, with his leaving them to come back from visits, with the daily separations he may have from you and his final separation from you when he returns permanently to his parents (or some other permanent plan is made for him). This will be difficult for the child and he will need your help in coping with his feelings about these separations. It is normal for a child to be confused, angry, feel deserted, helpless and a multitude of other feelings and these all come out in different behaviors. A child tends to tell us by his behaviors what he is feeling.

When the child separates from his parents, the feelings the child has will depend on his age, length and nature of the relationship with is parents, other life experiences and his ability to understand what is happening. Regardless of why a placement is made, the child will usually feel a sense of helplessness. In order for the separation to be more acceptable to the child and to feel more in control of the situation, the child will blame himself. Then he does not have to feel helpless if he feels he caused the separation. Therefore, he can be at fault and not his parents. It will be necessary to work closely with the caseworker to work through these problems. Separation is complex and has many sides, and these feelings may occur at various times during the placement.

C. STAGE I: SHOCK OR THE HONEYMOON PERIOD

The child displays very shallow feelings or none at all. He may show some false happiness, uncontrollable giddiness, docility, and robot-like actions. He does everything he is asked to do and never mentions his family. He is agreeable to have around. Perhaps he will have nightmares or be unable to eat and frequently has a physical complaint (i.e., upset stomach, cold). But generally, foster parents think he is "adjusting beautifully." This period can last from one to three weeks.

D. STAGE II: ANGER

A child may begin to come out of his shock and give up the expectation of returning home soon. When he fully realizes what has happened, he may begin to exhibit certain negative behaviors. He may become preoccupied with his loss and angry at the people nearest him, at his parents, at himself, and at God, perhaps wondering, "Why did this happen to me?" He may stop being so obedient; he may wonder if his behavior made him made him so unloved and unwanted. He may be fighting a raging battle inside, with the whole force of his being directed at an efforts to regain what he has lost. His behavior may include sleeplessness, night wandering, night terrors (he can't be brought out of them as he could nightmares), or weeping without apparent reason. The child may make active efforts to contact his lost family by running away, even though he is angry with them. He may show an obvious desire for help, but backs off when it is offered. He may refuse to be comforted, or express feelings of guilt about behaviors which he may believe contributed to his being removed from the home. Children have an amazing knack of choosing the means of protest which is most threatening to parents. One child may break things, another may get sick, or lash out at his foster family.

E. STAGE III: DESPAIR

When his active efforts to get what he has lost are unsuccessful, he,

- Becomes discouraged,
- Gives up,
- Hurts,
- Stops fighting
- Makes no efforts at anything, or
- Is more concerned with things than people and probably wants to be left alone.

Pain can be seen on his face. He may have a sense of complete helplessness and apathy. He may go to bed, get sick, hide in the garage, go into a fetal position. This is similar to the shock stage with its robot-like actions, simple motions, no plans, no desire to take care of himself, even to bathe. He may not start anything new, may regress to thumb sucking, bed-wetting, and playing with toys. Even teenagers display some infantile behavior.

Stages II and III may last several months each, depending upon the child's adjustment and his capacity to handle extreme stress. He can't be comforted, nor should you try to do more than just say, "I know this is a rotten day. I am here if you need me and I care about you."

F. STAGE IV: DETACHMENT/REATTACHMENT

Finally, one day the child wakes up and finds there is something to look forward to after all. There is still a sense of loss, but the child is able to be realistic about it. He has hope, a sense of mastery over his situation and relates to the world. He shifts from having a lack of involvement to feeling response to people. He stands straight, gives attention to his grooming, takes an interest in his surroundings, and shows more organized and purposeful behavior. This change can bring some sense of reward for those months when you accepted him when his behavior was unacceptable.

3. CARING FOR THE CHILD

A. FINANCIAL ARRANGEMENTS

Foster care payments are not salaries but are reimbursement for the costs incurred by foster parents. The foster parents are expected to provide for the needs of the child (i.e., food, clothing, maintenance, including the child's portion of rent and utilities, education expenses, personal supplies, sporting and extra curricular expenses and allowances). The agency requires no receipts or record of how the payment of how the payment is spent, but it is important for the child to receive his full share of clothing and an allowance, depending on his age and capabilities for handling money. A foster child, more than any other, needs training and experience in money matters and will probably benefit from the lessons learned from making mistakes, as he may have to be self-sufficient at an earlier age than most. The agency covers the cost of counseling and medical expenses with the exception of over-the-counter medications.

B. TAXES

Tax laws are complex and subject to change. We recommend foster parents seek professional advice on reporting reimbursement payments in the Internal Revenue Service. As a general rule, foster care payments are considered as reimbursement for what you have paid out for the actual care of the child in your home.

C. CONFIDENTIALITY

When a child is accepted into your home you have assumed a great responsibility. The child will gradually begin to place confidence and trust in you. In time you will have learned (either from the agency or the child) many significant events and specific information regarding the child's growth, development and family life which have shaped him into the person he is today. The agency believes **any information learned from either the child or the agency should be kept in strict confidence**. The agency recognizes foster parents will be asked many questions by friends and associates about foster children. Giving general information, first names, ages, grade in school, etc., is fine; however, the agency requires you not to violate the confidence of the child pertaining to the personal information you have learned about his family. The foster child may also experience many questions by neighbors, schoolmates, and other that will place the child in awkward situations. It is helpful if you can plan with the child how he might respond to these questions in a way that will minimize harm or embarrassment to the child. **IT CANNOT BE EMPHASIZED ENOUGH HOW SERIOUSLY THE AGENCY AND THE LAW VIEW A BREACH OF CONFIDENTIALITY. SHOULD SUCH A SITUATION COME TO THE ATTENTION OF THE LEGAL COMMUNITY OR DFS, YOU COULD LOSE APPROVED FOSTER HOME STATUS.**

D. CLOTHING AND PERSONAL APPEARANCE

A child needs clothing appropriate to his activities, clothing for play, school and special occasions. When possible, it is hoped the foster child will be encouraged to take part in the selection of clothing, as this will help develop a sense of value and awareness of good grooming. All clothing belongs to the child and will accompany him when he leaves the home.

Often a child coming into your home will have a very limited wardrobe. The foster parents are encouraged to make an inventory of the clothing and advise the caseworker. Parents of the children are often requested to provide clothing for their children. If the child entering foster care has clothing needs, contact your caseworker who may help address this need.

If you, as the foster parent, inspect the clothing coming into the home with the child and find it is worn or outgrown, do not dispose of it. Request it to be returned to the parents through the caseworker. If it cannot be returned to the parents, every effort should be made to store it for the child until he leaves the home.

Always consult with the caseworker before making any changes in the child's appearance (i.e., hair cutting, ear piercing, etc.).

E. GIFTS

Any gifts given to a foster child should be given with no strings attached. If the gift is one to be shared by the household, then let this be known to the entire family. The only exception to this is an age inappropriate gift. If the gift is not age appropriate, it should be kept for the child until a later date.

F. ALLOWANCE

An allowance should be provided for children who can accept the responsibility. We ask you to be as consistent with foster children as you are with your own children. Learning to handle money on their own is important for the future growth and responsibility of the foster children.

G. RELIGION

The agency does not always place children with foster parents of the same religious background. If a child of a different faith is placed with you, arrangements should be made for him to go to the church of his choice. If the parents have no religious preference, discuss this with the caseworker. Under no circumstances should a child be baptized into your church.

H. SCHOOL

Schooling is handled no differently for the foster child than for your own, except it may require a little extra attention and patience from the foster parents. A foster child may not achieve as much as you think he is capable of achieving. Please be realistic in your expectations and refrain from placing undue pressure on the child. Social retardation has an affect on his mental and education functions, and may take years to overcome.

The agency is required to furnish certain information to the school your foster child attends. Each caseworker may make arrangements with you to function on behalf of the child as a parent or guardian. You and the child's teacher need to cooperate to help the child over the big hurdles he may encounter after an upsetting time in his life. Your foster child would probably like you to attend school functions, sports events and PTO meetings. Keep your caseworker informed of the child's progress or any unusual events requiring special attention.

If you have children already enrolled in a particular school, be sure to inform school personnel of the addition to your family. The foster child is eligible for free school lunches for which application forms must be completed. The child's eligibility is automatic and the foster parents' income is not a consideration in the free lunch program. Contact local school personnel for assistance.

If you believe your foster child has special educational needs that are not being addressed, contact your caseworker for advocacy services.

I. JOBS AND EARNING MONEY

Young people are often interested in working and earning money to supplement allowances. Your foster youth may want to find part time work. A paying job which does not interfere with schoolwork can help the young person learn responsibility and budgeting. You will need to help the teenager avoid over extending available energy and time. Your caseworker should be involved in these discussions, especially with an older foster teenager who is considering future job choices. There are some programs through Job Service ofr summer employment, which may benefit the child.

J. HEALTH CARE

Every child who is placed into foster care should have a Health Check (well check) examination within 30 days of placement. It is important to schedule this examination as soon after placement as is reasonable. The exam should be scheduled with the child's physician. Any needed follow-up shall be discussed with the caseworker.

It is very important for the foster parent to keep a record of all medical, dental and eye care received by the child, as well as all medication prescribed. (See attachment A.)

All medical expenses are paid by the agency. A foster child should have a written medical authorization when he arrives in your home. Foster parents are trusted to handle minor illnesses and emergencies, call the doctor first, then notify the caseworker or their supervisor. The agency manager, social services manager or the child's parents must sign for any surgical procedures.

FOSTER PARENTS SHOULD NOT PAY ANY DOCTOR OR DENTAL BILLS OR PRESCRIPTION COSTS, AS THEY CANNOT BE REIMBURSED. The doctor or dentist should send the bill to the DFS office of if the child is eligible for Title XIX and has coupons, to the state Medicaid Office. Medicine is paid for only when the doctor prescribes it. When the doctor gives you a a prescription to be filled take it to the pharmacy with your coupons. Costs for the over-the-counter drugs cannot be reimbursed.

For a continuum of care, please take the child to his regular physician. If this information is unknown to you, consult the caseworker.

When traveling out of state, be sure to take the child's coupons and a "To Whom it May Concern" letter verifying the child is in foster care and DFS is to be billed. Your caseworker will furnish you with such a letter. If you have a medical emergency out of state, present these items to the doctor or hospital. With regard to the fees, Wyoming's rates of payment will prevail. Request the bill be sent to the DFS office, and notify DFS as soon as possible.

You are encouraged to use your local public health agency whenever possible. Please be sure immunizations are kept up to date on young children and good records are maintained.

K. DENTAL AND EYE CARE

All foster children should have routine six month dental and eye care exams. It is important to keep a log of these appointments. Medicaid covers all dental care, except cosmetic care. For example, in most instances braces would not be covered. However, for certain medical conditions, such as a jaw alignment, braces may be covered. Prescription eyeglasses are covered by Medicaid. If a child breaks their eyeglasses, these should be replaced. Discuss these needs with your caseworker. Immediate treatment can be given for the relief of pain or spread of infections.

L. DRIVER'S LICNESE, CAR, AND INSURANCE

When a foster child reaches the legal age for driving, the DFS District Manager is the only individual who can sign the application for a permit or a driver's license. Children in the custody of the state can be give permission by the District Manager on recommendation by the child's caseworker. If a child has a driver's license when he enters care, he is asked to surrender the license.

Foster children are not to drive the foster parent's car unless this is cleared by the agency. The agency does not cover the additional expense of insurance coverage. The foster child is not to obtain a driver's license or purchase a vehicle without first obtaining permission from the District Manager.

M. TRAVEL AND VACATION

The agency encourages the foster child's participation in all aspects of your family life – vacations, trips and outings included. Be sure to let the caseworker know in advance when you are planning a vacation because approval is needed for a foster child to travel out of state. Also, if the trip is out of state you will need an authorization for medical treatment. If the child is not going with you on vacation, the caseworker must plan for the child's care during your absence.

N. RESPTIE CARE

Occasionally, there are times when a foster parent or foster child needs a break from each other. If this becomes the case, arrangements can be made for foster children to spend a weekend or a day with another foster family. Another example might be if there is a family emergency that would provide difficulties for both the foster family and the foster child (e.g., a funeral). In these instances, respite arrangements can be made. Foster parents are encouraged to network with each other to develop respite providers. The caseworker should be informed whenever respite is contemplated.

O. DAY CARE

If day care is necessary for foster children placed in your home, please contact the caseworker.

P. DISCIPLINE

All children, regardless of age, need and want limits set for them by parent figures. Most children and adolescents occasionally behave in ways that are unacceptable and undesirable. DFS, as legal custodian of the children in placement, has many responsibilities regarding their physical, emotional, spiritual, social, educational and medical well being. More often than not, children who have been moved from their own homes and placed in foster care are children who have been too harshly or inconsistently punished by their own parents. Therefore, all disciplinary action taken by foster parents, especially of a negative nature, cannot be physically or mentally harmful to the child. Neither verbal abuse nor physical punishment (i.e., shaking, slapping, hitting, spanking with a belt, paddling) will be tolerated by this agency.

When a situation does arise, requiring discipline of a foster child, DFS recommends alternatives such as:

- Removing the child from the stressful, problem-producing situation.
- Giving a child a “time-out” until he has calmed down. A reasonable time-out rule of thumb is one minute for each year of age.
- Sitting the child on a “thinking chair” for a few minutes.
- Taking away certain privileges. This must be for a realistic period of time. It becomes ineffective if you take away the TV or a bicycle for a month.
- Keep from being drawn into heated arguments and debates. It is sometimes better to remove yourself from the situation and tell the child you refuse to argue but would be willing to discuss the matter later when you are both calm.

If you, as foster parents, find yourselves dealing with any unusual behavior on the part of the child, Please contact the caseworker. Caseworkers can be resources, but cannot help if they are unaware of the problems. Calling the caseworker does not indicate failure on your part. Remember, we all work as a team to achieve what is best for the child.

The intent of this policy is not to make your job more difficult, but instead to find better, more positive methods to help foster children learn to cope more effectively within a family setting and in society in general.

Q. FOSTER HOME SAFETY

All foster homes must meet and maintain a high level of safety. The following practice and procedures must be observed at all times:

1. All medications, poisonous chemicals and cleaning supplies must be kept in a locked place, which is inaccessible to the children. All combustible items must be stored away from sources of heat.

2. All unloaded firearms and ammunition must be stored separately in locked cabinets, and must never be accessible to the children.

3. Every foster home must own and maintain:

   a) Smoke alarms in each sleeping area, which are fully operational. Batteries must be replaced every six months.

   b) A portable chemical fire extinguisher, which is placed in a prominent place and accessible at all times. The extinguisher must be checked and tagged annually by a qualified inspector.

4. Foster parents must keep first aid supplies in an easily accessible place.

5. Foster parents must have a posted evacuation plan and will share the plan with all children entering the home. In order to ensure everyone understands the procedure, frequent fired drills must be conducted.

6. All fireplaces, space heaters, and hot surfaces must be shielded against accidental contact.

7. Pets in the home must be vaccinated and their vaccinations must be kept up to date.

8. Know and consistently practice universal precautions with regard to health care of children in placement.

IV. PARENTS AND FOSTER CARE

A. RIGHTS OF PARENTS

Parents retain rights and obligations during the time the child is placed in foster care. Your caseworker will give you the information you need regarding the legal status of a child placed with you. Unless parental rights are terminated, the child may have visits with his parents.

Foster care is considered a temporary arrangement. The primary goal will be to return the child to his family whenever possible. A caseworker will be involved in helping to bring this about. Should the child's return home become impossible the caseworker will make other plans for the child's future.

Your job as a foster parent may involve either little or extensive contact with the parents. Because of the importance of the parents to the foster child, your attitude toward the child's family and your acceptance of their place in the child's life are important issues. You should talk with your caseworker if you experience difficulty in these sensitive areas.

When you ae discussing with a caseworker whether to accept placement of a particular young person, be sure to ask about how the parents will be involved in the case plan and visits with the child. You may be asked to keep a log of the child's behavior and statements made to you. Your careful observations can be very helpful in planning for the child.

Contact with your foster child's parents may be very frustrating to you. It is important for you to remember the parents and child are in a painful situation. You need to be understanding of the parent's situation. Some suggestions to keep in mind when working with the parents:

1. Support the parent's efforts to be parents. Accept what the parents can do (even if it is very little), as this may help the parents try harder.

2. Play second fiddle to the child's parents. Showing disrespect towards the child's parents is very destructive to the child, who needs to be able to love his parents. Help the child by showing respect and acceptance for the parents and by accepting and acknowledging the child is a member in a family other than yours.

3. Don't play games. Parents may try to manipulate you to cause conflicts between you and the caseworker, or you and the foster child. Avoid letting yourself get trapped in this kind of game. A good, working relationship with the caseworker is the best way to avoid this.

4. Support the caseworker/parent relationship. Often the parents are hostile to the caseworker and the agency. This is understandable, but hostility interfered with the treatment plan for the parent and child. Do not take sides.

5. Do not overreact to criticism. Parents may belittle of criticize you to the child. Try to remember the parents know you are doing a better job and your role with their child is hard for them to accept.

B. RIGHTS OF FOSTER PARENTS

Foster parents have the right to refuse a placement. If the placement of a foster child seems inappropriate because of the child, family travel, or any number of other considerations, we expect foster parents to be honest and say, "Not at this time." Declining a placement will not jeopardize future placements.

Other rights of foster parents include being fully informed of the child's background and physical and mental functioning to ensure provision of appropriate care and protection; being involved in the development of a plan for a child placed with them; having the right to participate in child placement review and to have their opinions expressed in placement hearing reviews. The foster parent's opinion is important to the team.

C. VISITS

Parents or other responsible relatives play an important role in the lives of foster children. Visits between the placed child, parents and brothers and sisters are essential for the child's well being. Foster parents must, therefore, be able to share a youth with his family on a planned basis as arranged by the caseworker with other responsible relatives. Should contacts by parents or relatives be disturbing in any way, discuss it with your caseworker. Your caseworker will want to know what is the cause of the disturbance. At the time of placement, a plan for visitation may be set up. Unless otherwise advised, all phone calls and visitation should be coordinated through the caseworker.

D. WHEN TO CALL THE CASEWORKER

The child's caseworker will keep in touch with you frequently, especially during the initial stage of placement. When the child is settled, there may be less contact. There are situations when you will want to telephone the caseworker for non-emergency calls.

1. NON-EMERGENCY CALLS are to report incidents such as, you are planning to move across town, or the family composition is changing. Non-emergency calls also report any changes in the behavior of the child or any concerns you might have of a general nature about the child.

2. PLANNING AHEAD CALLS – Call your caseworker:

   a) When you have to be away from the family and have arranged for substitute care, or

   b) Before taking the child out of state or allowing the child to go on a trip; before making any significant change in the child's life (i.e., change in schools or a new job).

3. I'M WORRIED CALLS – When something about your foster child seems as if it might develop into trouble; perhaps he is slipping back to his old gang, or you think he has more money than he should have, don't hesitate to call. The caseworker would rather be in at the beginning of a problem than to wait until you are worn out from struggling with it alone and the situation has reached the point of no return.

4. HELP! CALLS – Foster parents seem to encounter more "HELP" calls than other parents. Emergencies when the caseworker should be contacted immediately are:

   - If the child always shows signs of depression, changes in eating habits, withdraws from family and friends, talks about suicide, excessive statements about self-worth, preoccupation with death and sudden proneness to accidents.
   - If the child has run away. You should give the child reasonable leeway to come home. Call friends where he might be. Contact police or sheriff's department. This will mean you will have to go to the station or have an officer visit your home to file a police report giving age, description and possible whereabouts.
   - If the child has a sudden serious illness or accident or dental problem.
   - If there is serious trouble with police, juvenile authorities or the school; or if the child is skipping school.
   - If anyone, including the child's own relatives, tries to take him from your home without prior arrangements by the caseworker.
   - If there is an emergency in your own family making it impossible for you to care for foster children for a period of time.

In all emergencies, take the common sense steps which any parent would to deal with the situation, then call the caseworker or on-call caseworker. You should have both the agency phone number and the caseworker's and supervisor's name. Please remember the caseworker has many clients and must be out of the office much of the time. In any case, an after hours emergency should be referred to the on-call caseworker.

E. CONFLICT RESOLUTIONS

If the foster parent disagrees or has a conflict with the caseworker, communication of the concern is important. The foster parent should first attempt to resolve the problem with the caseworker whenever appropriate and possible. If the problem cannot be solved between the foster parent and the caseworker, the foster parent should contact the caseworker's supervisor or the District Manager.

F. FOSTER ADOPT PARENTS

If your foster child cannot be reunified with their family, the child may become free for adoption. Your home may be considered for the child's permanent, adoptive home, if you concur with the plan.

If you are a foster home, and are ultimately interested in adoption of a foster child, there may be another foster child in the state of Wyoming that needs a permanent, adoptive home that could be considered.

G. WHEN THE FOSTER CHILD LEAVES

You have known all along the agency cannot promise the foster child will stay with you always. Many things can happen. He may return to his own parents, he may go to an adoptive home, or, for some reason, you and he may not be able to make a success of living together and he will be moved. The court and the agency have the legal authority for making long term plans for the child.

All during the placement, a permanent living arrangement has been the goal. Even though you knew this, when the child leaves your home, it is hard on everyone. If you feel like it, don't be ashamed to smile through your tears when he leaves. Tell him you will miss him. At the same time, be supportive of his return to his family or other placement. He can appreciate your honesty without developing guilty feelings about causing your sadness. It is healthy to show controlled sadness, rather than false happiness.

Occasionally you may be asked to cooperate with a plan with which you do not agree. You may think the child is returning to the same situation. Remember, he has been given an example of a good home and some strengths and habits that will stay with him.

When the agency knows a change has to be made, the caseworker will discuss it with you as early as possible and help you prepare the child. He may be upset and need some friendly convincing with regard to his return to his parents.

Communication with the child after he has returned to his home should be discussed with the caseworker. Usually the family needs time to become a family again and outside influences may be tempting and upsetting. Close relationships have been known to develop between foster parents and their foster child and his family. In some cases (maybe years later), a foster child you thought had failed will contact you with memories of the good feelings he had for you. Times such as these are rewarding and any headaches or heartaches you may have experienced with the child seems a small price. You helped a child go on with his life. Foster parenting is not a lifetime commitment to a child, but rather a commitment to be meaningful during a child's lifetime. Family foster care involves families helping families.

Foster parents are special people with a special job!

They are people:
Who can find a place in their hearts and home for a child in need,
Who accept the responsibility for caring for a foster child, and
Who work as part of the team pursuing the child's best interest.

FOSTER
a Future

ATTACHMENT A

FOSTER PARENT DOCUMENTATION LOG

Child's Name_____ Date of Birth_____

DFS Caseworker_____ Phone Number_____

DFS Caseworker_____ Phone Number_____

Child's Physician_____ Phone Number_____

Child's Dentist_____ Phone Number_____

Other Doctor_____ Phone Number_____

Other Contact_____ Phone Number_____

Other Contact_____ Phone Number_____

This log may include doctor visits; medication prescribed and administered; observed behaviors; conversations; significant events; and/or general observations, regarding daily living, school, etc.

DATE	TIME	EVENT/ACTIVITY	OBSERVATIONS/COMMENTS/FOLLOW-UP

FOSTER PARENT DOCUMENTATION LOG (cont'd.)

Child's Name_____ Date of Birth_____

DATE	TIME	EVENT/ACTIVITY	OBSERVATIONS/COMMENTS/FOLLOW-UP