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Employees' Manual Title 12 Chapter B Appendix

FOSTER FAMILY HOME LICENSING

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Certificate of Completion, Form 470-3378

Purpose	The <i>Certificate of Completion</i> shows that the prospective foster parent has completed the one-hour self-instruction module on universal precautions required for initial licensure.
Source	This form is issued by the recruitment and retention contractor.
Completion	The recruitment and retention contractor issues the certificate after the prospective foster parent has completed the universal precautions training.
Distribution	The recruitment and retention contractor:
	 Mails the original certificate directly to the participant;
	 Keeps a copy of the post-training questionnaire in the family's file; and
	 Sends a copy to the Department licensing worker for the Department's licensing file.
Data	A <i>Certificate of Completion</i> is prepared for each prospective foster parent, listing the parent's name and the date of completion.

Certificate of License, Form 470-0727

Purpose	The <i>Certificate of License</i> , form 470-0727, authorizes a foster family home to operate for the time period of one or two years per policy.
Source	Complete this form on line using the template in SharePoint under Employee Manual/Forms.
Completion	Service area staff prepares the Certificate of License when:
	 The service area manager or designee approves a new application or reapplication for a foster family home license, or
	• The conditions on an existing license change.
	Enter the period of the licensure on the blank space after "for the time period."
Distribution	Send the original to the foster family home. Make a photocopy and file it in the Department licensing file.
Data	Complete:
	 The type of license (full or provisional). The names of the licensees. The maximum capacity of the foster family home (1-5). The address of the home. The period of the license.

Communicable Diseases General Agreement, Form 470-3226 or 470-3226(S)

Purpose	Form 470-3226 or 470-3226(S) verifies a foster parent's willingness to care for a child who is at risk of HIV or has the HIV-positive diagnosis, or has Hepatitis or Meningitis.
Source	Complete this form on line using the template in SharePoint under Employee Manual/Forms.
	Print the Spanish version of this form from:
	 The on-line manual, or SharePoint under Employee Manual/Forms.
Completion	The home study worker and the foster parent complete the form:
	At initial application for foster home license.At each renewal.
	NOTE: If the family refuses to sign this form, enter a statement in the family's record, e.g., Family refuses to accept a child who is: at risk or tests positive for HIV, has Hepatitis or Meningitis. Sign and date the form on the contractor home study worker line.
Distribution	The recruitment and retention contractor:
	 Sends the original to the Department for the licensing file. Gives a copy to the foster parent. Keeps a copy for its file.
Data	Enter the family's name.
	Have the family:
	 Check which conditions the family will or will not accept and whether the family has or will have training on care of children who are HIV-infected.
	 Sign and date the form.

DHS Criminal History Record Check, Forms 595-1396 or 595-1396(S)

Purpose	DHS Criminal History Record Check, form 595-1396 or 595-1396(S), is used to obtain permission for a check of Iowa criminal records on people aged 14 or over (other than foster children) who live in a foster family home.
Source	The English version of the form is printed in pads of 50 two- part carbonized sets. Order supplies of this form from Iowa Prison Industries in Anamosa.
	Supplies of the Spanish version can be printed from the sample in the manual.
Completion	The recruitment and retention contractor home study worker completes this form for each person aged 14 or over residing in the home at the time of initial application for a license. The form is also completed:
	 When the person has moved into a licensed home. When there is an indication that the person has a criminal record (at license renewal or any other time).
	Obtain the person's signature in the waiver section, acknowledging that a criminal record check will be conducted.
Distribution	The contractor:
	 Sends the original to the Department with the rest of the home study information.
	• Keeps a copy in the family's file.
Data	Complete the form as follows:
	• Enter the home study worker's name in the "From:" space.
	• Check "foster care" as the purpose for the request.
	• Enter the name, maiden name, sex, social security number, and birth date of the person whose records are requested.
	• Both the home study worker and the person sign the form.

Eco-Map, Form 470-4086 or 470-4086(S)

Purpose	Form 470-4086 or 470-4086(S) is used to help families assess the balance between the stress and support they have and whether foster care and or adoption is right for them.		
Source	Print supplies of these forms as needed from the samples in the manual.		
Completion	The foster or adoptive parent applicants complete the form during PS-MAPP.		
Distribution	The family shares this self-evaluation with their home study worker during family consultations.		
	The recruitment and retention contractor:		
	 Submits a copy to the Department with the home study. Keeps a copy in the family's file. 		
Data	Page 1 of the form includes sections for the applicant to:		
	 Draw a central circle with names of all the people who live in the household. 		
	 Draw circles outside the central circle representing systems that give and take away energy. 		
	• Describe the relationships between the outside systems and the family.		
	 Describe the flow of energy: Is this system a source of support or stress for the family? 		
	Page 2 of the form includes sections for the applicant to:		
	• List five additional "systems" that will likely be added to the family if they become a foster or adoptive family.		
	 Develop preventive strategies to reduce their stresses and increase their support. 		

Family Foster Care Referral, Form 470-5508

Purpose	The <i>Family Foster Care Referral</i> , form 470-5508, provides demographic, medical, behavioral, mental health, educational, and other relevant information about a child in need of foster family care to the contractor responsible for matching activities.
Source	Complete this form on line using the fillable PDF file in SharePoint under Employee Manual/Forms.
Completion	When time and circumstances allow, the Department caseworker as the "referral worker" completes the form when seeking a foster family home for a child.
Distribution	Submit this form electronically to the contractor responsible for matching responsibilities. Keep a copy in the child's case file.
Data	Referral Information : Enter the date of the referral, the time of the referral, and the date and time the foster family is needed.
	Referring Worker Information : Enter the name, email, office phone, city, county, and cell phone information of the child's Department caseworker.
	Referring Worker Supervisor Information : Enter the name, email, and cell phone information of the child's Department caseworker's supervisor.
	FSRP Care Coordinator Information : Enter the name, email, and cell phone number of the child's FSRP Care Coordinator if the child is receiving FSRP services.
	Child Information at the Time of Referral : Enter the child's name; gender; date of birth; state identification number; race; language; ICWA eligibility; current address including city, state, and ZIP code; financial county; discussion of the child's strengths and needs; child's special interests or activities, and continued contact with siblings on every child referred.

Enter if youth has a driver's license, school information, church attendance, sexual identity, and sexually active when applicable.

Physical Health and Medical Concerns: Using the scale on the form, complete as applicable for each known medical or health need of the child and explain or describe the severity. Leave items blank if not applicable to the child.

Mental Health Diagnosis: Using the scale on the form, complete as applicable for each known diagnosis of the child and explain or describe the severity. Leave items blank if not applicable to the child.

Serious Behavioral Issues: Using the scale on the form, complete as applicable for each known behavior of the child and explain or describe the severity. Leave items blank if not applicable to the child.

Current Formal Information: Provide the child's current mental health or medical diagnosis, the medication the child is taking, and the reason for the medication.

Transportation Needs: Check yes or no for all items.

Risk Management: Complete all items as applicable providing as detailed information as is known.

Form Prepared By: Enter the name of the person who completed the form.

Family Map, Form 470-4087 or 470-4087(S)

Purpose	Form 470-4087 or 470-4087(S) is used to help families explore the relationships in their family and the possible changes that may take place in those relationships should they decide to become a foster or adoptive family.
Source	Print supplies of these forms as needed from the samples in the manual.
Completion	The foster or adoptive parent applicants complete the form during PS-MAPP.
Distribution	The family shares this self-evaluation with their home study worker during family consultations.
	The recruitment and retention contractor:
	 Submits a copy to the Department with the home study. Keeps a copy in the family's file.
Data	The form includes sections for the applicant to report:
	 Circles representing all of the people who live in the household.
	 Connecting lines between the household members representing the relationships between the members.
	 Ways they might manage their family's relationships with the addition of a child to their home.
	 Strategies for managing changes in family relationships.

Final Strengths/Needs Worksheet, Form 470-4022 or 470-4022(S)

Purpose	Form 470-4022 or 470-4022(S) is used to collect information for the completion of the home study process.
Source	Print supplies of the English and Spanish versions of the form as needed from the samples in the manual.
Completion	The foster or adoptive parent applicants complete the form at the end of the PS-MAPP training process.
Distribution	The family returns the worksheet to the home study worker.
	 The recruitment and retention contractor: Gives a copy to the Department as part of the home study. Keeps a copy in the contractor's file on the family.
Data	 The form includes sections for the applicants to report: What role they are ready to commit to and why What their strengths are Where they will need help What special needs they can handle Their preferences regarding children to be placed What has kept them involved with the program What support they will need to remain committed What other ways they might help children

Firearms Safety Plan, Form 470-4657

Purpose	Form 470-4657, <i>Firearms Safety Plan</i> , is a written safety plan to keep firearms secure from children in the foster home who are in the guardianship or custody of the Department.
Source	The foster parent can print this form from the on-line policy manual or the contractor home study worker can provide a copy of the form to the foster parent to complete.
Completion	The foster parent who has a permit to carry a firearm or does not have a permit but has firearms:
	 Completes the form, and Attaches a copy of their current, valid permit to carry firearms.
	The safety plan describes how children will not have access to firearms, the gun lock, and key to the gun safe. It will describe how the foster parent will monitor.
Distribution	The foster parent completes the <i>Firearms Safety Plan</i> and gives it to the home study worker. The recruitment and retention contractor includes the form in the home study provided to the Department.
Data	The form documents the type of permit or lack of permit, the permit number, and the safety plan.

Floor Plan, Form 470-5097

Purpose	Form 470-5097 provides a specific guide for completing the floor plan of a foster family home.
Source	Print supplies of this form as needed from:
	 The on-line manual, or SharePoint under Employee Manual/Forms.
Completion	The recruitment and retention contractor completes the floor plan with the foster family.
Distribution	The recruitment and retention contractor:
	 Puts the floor plan in the foster home licensing packet. Sends the packet to the Department licensing social worker for the foster family.
Data	Check the box indicating either an initial or revised floor plan.
	Use one floor plan page per floor of the home. Enter the family name and date on each page of the floor plan.
	Show all rooms on each floor and label accordingly, i.e., kitchen, bathroom, etc.
	Show all exits to the outside and include stairs from one level to another.
	Use the icons to label smoke detectors, carbon monoxide detectors, and fire extinguishers on each floor.
	When drawing the bedrooms (including the foster parents' bedroom) in the floor plan:
	 Number each bedroom (MBR #1, BR #2, etc.).
	 Write the first names of the foster family's own children in the bedrooms they sleep in.
	 Draw each of the beds in the bedroom.
	 Draw where the closet and dresser are located.
	• Draw the bedroom door and the way it swings (in or out).
I	 Indicate which bedrooms will be used for foster children.

- Draw each bedroom window
- Indicate the window's opening height and width measurements.
- Show how the window opens.
- Label the type of window (single- or double-hung, slider, casement, hopper, awning, bay or bow windows, louvered, or fixed [picture] window).

At the bottom of each page indicate what floor it represents. Number each page of the floor plan and staple the pages together.

Foster Care Private Water Supply Survey, Form 470-0693

Purpose	Form 470-0693 is used to collect information on private water supplies.
Source	 Print supplies of this form as needed from: The on-line manual, or SharePoint under Employee Manual/Forms.
Completion	The recruitment and retention contractor home study worker completes this form when a foster family applicant does not obtain water from a public water supply system at initial license and change in address.
Distribution	 The recruitment and retention contractor: Sends the original to the Department for the licensing file. Keeps a copy in the contractor's file.
Data	Complete Items A through D for the initial evaluation and a change in address.
	A sketch showing location of house, well, garage, septic tank, roads, ponds, streams, and any other items is needed only:
	 At initial evaluation. When any changes are made to the well area.

Foster Family Home License Application, Form 470-0689 or 470-0689(S)

Purpose	Form 470-0689 or 470-0689(S) is used to apply for a license to operate a foster family home for children. The form gives the retention and recruitment contractor the right to study and evaluate the home and to conduct necessary record checks.
Source	Print supplies of this form from:
	 The on-line manual, or SharePoint under Employee Manual/Forms.
	The form is normally issued by the recruitment and retention contractor at orientation. Local offices that are asked to issue the form shall print the form from the on-line manual or SharePoint.
Completion	The prospective foster parents and any adults living in the home complete the form when a family decides to apply for a license or re-apply for a license. Each applicant and any other adult living in the home shall sign the form.
	If a person over the age of 14 (other than a foster child) moves into the home during the licensing year, that person must complete this form in order to authorize the necessary record checks. Have the person:
	 Sign the original form on the appropriate line,
	 Enter the date by the person's signature,
	 Enter any out-of-state residence locations in the last five years, and
	• Specify the state and the crime and abuse that occurred.
	NOTE: If a child who has been living in the home turns 14, child abuse and criminal history record checks are not completed.
	Applications shall be completed for license renewal at least 30, but no more than 90 days before the license expires.

Distribution	The applicant family normally returns the form to the recruitment and retention contractor, but may submit the form to any Department office. If so, forward the form to the recruitment and retention contractor.
	The applicant keeps the pink copy of the form. Discard the gold copy, if any.
	The contractor:
	 Submits the original to the Department with the home study so that a decision can be issued on the application, and
	• Keeps the yellow copy in the family's record.
Data	Check the box for "new" when a family applies for a license in lowa for the first time. Check the box for "renewal" when renewing a current license, or when a previously held license has not been renewed and the family again wishes to be licensed.
	The applicants are requested (but cannot be required) to provide social security numbers. They help identify people for record checks.
	A person who has resided outside of Iowa in the last five years must report the locations of those out-of-state residences. This information will be used to check the records in those states for convictions and founded child abuse in other states.

Foster Family Record Check Letter, Form 470-2369

Purpose 	Form 470-2369 explains the process for evaluating criminal convictions and founded child and dependent adult abuse reports on members of the foster family household.
Source	Complete this form using the template in SharePoint under Employee Manual/Forms.
Completion	The DHS licensing worker completes this cover letter any time form 470-2310, <i>Record Check Evaluation</i> , is provided to a person after a foster family licensing record check.
Distribution	Send the original to the person to whom the criminal conviction or founded child abuse applies. File a copy in the licensing record.
Data	In the space between the second and third paragraph, list the specific criminal convictions (e.g., OMVI or founded child abuse reports, physical abuse) identified in the record check, and the dates for each.

Foster Family Survey Report, Form 470-0695

Purpose	Form 470-0695 is prepared to help the Department evaluate the adequacy of a family and home for the provision of foster care. Information from PS-MAPP, the family home study discussion and process, references, medical reports, and checking and observations in the family home is used to complete the report.
Source	Complete this form using the template in SharePoint under Employee Manual/Forms.
Completion	The recruitment and retention contractor home study worker completes the report during initial evaluation or reevaluation of a family that has applied for a foster family home license, moved to a new address, or remodeled or added an addition to the home.
	If a "No" is checked for any item in Sections B through K, explain this item within this form and submit form 470-0698, <i>Recommendation for a Provisional License</i> , or form 470-0704, <i>Recommendation for Denial of a Foster Family License</i> .
I	If you recommend issuing a license when the family fails to meet one or more standards, an explanation is required and the date the standard will be met.
	Forward the completed report to the service area manager or designee within 60 days of the date of application. The service area manager or designee completes the section entitled "Decision."
Distribution	Forward a copy to the DHS licensing worker (along with a copy of forms 470-0698, <i>Provisions for Alternate Water Supply</i> , form 470-0699, or 470-0704, if applicable) with the narrative.
	When the service area manager makes the licensing decision, a copy is returned to the contractor. The original is maintained in the DHS licensing file.

Data

Items are self-explanatory, with the exception of the following:

Use the floor plan, form 470-4657, and draw where the exits, stairways, windows, room dimensions, the smoke and carbon monoxide detectors, and the fire extinguishers are in this floor plan. Identify each room by name. If ceilings are not level, make separate sketches as necessary, illustrating angles of ceilings and indicating wall heights.

Note in this form that areas marked "NA" were discussed with the family and that the family has agreed to comply with these rules.

Foster Home Insurance Fund Claim, Form 470-2470

Purpose	The <i>Foster Home Insurance Fund Claim</i> is used by foster parents to submit a claim to the foster home insurance contractor for damages caused by a foster child.
Source	The Department licensing worker should email or mail a copy of the form to the foster parent. A template is available in SharePoint under Employee Manual/Forms.
Source	Complete this form using the sample in the on-line manual or ask the Department licensing worker to email a copy of the template that is available in the public state-approved forms folder on Outlook.
Completion	The foster parent completes the <i>Foster Home Insurance Fund</i> <i>Claim</i> by describing the loss and damages and submitting the form to the foster home insurance contractor along with a copy of their foster home license.
Distribution	The original is kept in the foster home insurance contractor's case file.
Data	Complete all items on the form.

Foster Home Licensing Corrective Action Plan, Form 470-5404

Purpose	The <i>Foster Home Licensing Corrective Action Plan</i> is a form used to document the corrective action plan. Its purpose is to assist the foster family in meeting all licensing standards and to prevent the denial, revocation or suspension of their foster family home license.
Source	Complete this form using the template in SharePoint under Employee Manual/Forms.
Completion	The Foster Home Licensing Corrective Action Plan is completed when:
	 The Department licensing worker engages the foster family and other team members in developing this action plan,
	 The foster family does not meet licensing standards, or
	 Has issues that may negatively impact foster children.
	Take into consideration the circumstances, the foster family's history, their willingness to take responsibility and make adjustments, and other relevant factors when deciding whether or not to complete a corrective action plan (CAP).
	The foster family may document their responses to the corrective action plan on the form.
Distribution	Keep the original. File the signed form in the licensing case file. Provide a copy of the signed form to:
	 The foster parents, The recruitment and retention provider and, To other begin membrane on provider and,

• To other team members, as needed.

Data

Complete the:

- Names of the licensees.
- Date.
- Address and phone number of the home.
- License renewal month.
- Licensed capacity of the foster family home.
- Start and end date of the corrective action plan.
- Concerns that led to the corrective action plan.
- Legal references.
- Conditions that need to change.
- Action steps.

Foster Parent Post-Adjudication Hearing Report, Form 470-4614

Purpose	The <i>Foster Parent Post-Adjudication Hearing Report</i> is a form that the foster family can elect to fill out to provide information to the court about the welfare of the foster child in their care. Foster parents have a right to attend court hearings but are not required to attend.
Source	 The Department licensing worker may print the form from: The on-line manual, or SharePoint under Employee Manual/Forms.
	Give the form to the recruitment and retention contractor. The recruitment and retention contractor will give the form to a foster parent who does not have Internet access to print the form.
Completion	This form is an elective for the foster parents and is not mandated to be completed. A foster parent may complete this form by hand or type in the responses and may add attached pages for any narrative that does not fit on the form.
Distribution	The foster parent may submit the report to the foster child's attorney, the child's Department social work case manager, the juvenile court judge, and other attorneys who are a part of the case, as all parties are entitled to a copy. Keep a copy in the child's case file.
Data	If the foster parents attend the court hearing, they may be called to testify about the information in this report.

Foster Parent Training Application, Form 470-2541 or 470-2541(S)

Purpose	Form 470-2541 is prepared to facilitate the request for foster parent training approval and to document the service area's decision.
Source	The English version of the form is printed in two-part self- carbon sets. Order supplies from Iowa Prison Industries at Anamosa.
	Print supplies of the Spanish version of the form from the sample in the manual. (Access the form by clicking on the form number above.)
Completion	A representative of a licensed child-placing, child-caring agency, a local DHS licensing worker, or an agency, institution, or association with expertise in any of the approved content training areas may submit applications for approval of training.
	The application shall be submitted at least 30 days before the training. Since the Department has 30 days in which to approve or not approve the training, it is recommended that applications be submitted 60 days before the training.
Distribution	When the training is to be offered statewide:
	 Send the form to the foster family program manager in central office at: DHS Division of Adult, Children and Family Services, 5th floor, 1305 E. Walnut St., Des Moines, IA 50319-0114.
	 Upon approval or denial of the request, the program manager will return one copy to the applicant and retain the original with the attached detailed description.
	When the training is offered within one service area:
	 Send the form to the Department office for that service area.
	 Upon approval or denial of the request, the Department office that received the form returns one copy to the applicant and retains the original with the attached detailed description.

Data

The person (applicant) submitting the form:

- Completes:
 - The title of the training.
 - The provider of the training.
 - The dates of the training.
 - The number of credit hours requested.
 - The name and title of the requester.
 - The address and phone number of the requester.
- Attaches:
 - The training description,
 - The names of the training instructors,
 - Their qualifications to provide the training, and
 - The agenda for the training.

NOTE: Credit is not given for introductions of the trainers, break times, and meal times.

The program manager or the local Department office where the form was submitted completes Part C, Decision, within 30 days of receipt of the application and training material attachments.

If the applicant of the training objects in writing within seven days after the notification of the Department's decision to deny approval, the social work administrator shall review the decision to determine if the original decision stands. The decision of the social work administrator is final and is not subject to appeal.

Foster Parent Training History, Form 470-2080

Purpose 	Form 470-2080 provides each individual foster parent a log of training completed during the licensing year.
Source	Print supplies of this form from:
	 The on-line manual, or SharePoint under Employee Manual/Forms.
I	The recruitment and retention contractor gives the form to each individual foster parent at the time of the start of their training year.
Completion	A foster parent enters information on the training history each time training is completed to document compliance with in- service training requirements.
Distribution	At each renewal, the foster parent:
	Gives the completed form to the home study worker.Maintains a copy with the license.
	The recruitment and retention contractor:
	 Sends the original to the Department for the licensing file. Keeps a copy for its file.
Data	The foster parent entries include:
	 The title and content of the training. The number of hours. The instructor. The date the training was received. The expenses claimed for the training.

Foster Parent Training Plan, Form 470-3341

Purpose	Form 470-3341 is used to assist and guide foster parents as they assess and identify their training needs.
Source	This form is printed in pads of four three-part self-carbon sets. Order sets from Iowa Prison Industries at Anamosa. You can also print the form from the sample in the manual.
Completion	This form is completed for every licensing year. The contractor and the foster parents jointly review this form annually to identify:
	 Training needs in relation to the age and needs of children the family intends to care for, and
	 Options for obtaining training during the licensing year.
Distribution	The recruitment and retention contractor:
	 Sends the original to the Department for the licensing file. Gives a copy to the foster parent, and Keeps a copy for its file.

Foster Parent Training Report, Form 470-2540 or 470-2540(S)

Purpose	Form 470-2540 or 470-2540(S) provides:
	 Documentation of the foster parent's in-service training. An idea of the usefulness of the particular training obtained.
Source	Complete this form on line using the fillable PDF file in SharePoint under Employee Manual/Forms.
	Print the Spanish version of this form from:
	 The on-line manual, or SharePoint under Employee Manual/Forms.
Completion	Each foster parent shall complete the form within 30 days of the completion of the training activity and before the expiration date of the license.
Distribution	The foster parent submits the report to the recruitment and retention contractor. The contractor:
	 Sends the original to the Department for the licensing file. Gives a copy to the foster parent. Keeps a copy for its file.
Data	The form contains four sections:
	 Identification of the foster parent. Identification of the training. Evaluation of the training. Audio-visual media or book reviews.

Foster/Adoptive Parent Preparation Training Certificate of Completion, Form 470-2066

Purpose	Form 470-2066 shows that the prospective foster or adoptive parent has completed the 30-hour training requirement for initial licensure or approval.
Source	The recruitment and retention contractor issues the certificate.
Completion	The recruitment and retention contractor issues the training certificate after the applicant has completed all 30 hours of training.
	If an applicant misses part of the 30-hour training program, the certificate is issued only after the person has made up the training hours missed.
Distribution	The recruitment and retention contractor mails the original certificate directly to the applicant. The Department keeps a copy in the licensing file.
Data	Check the applicable box on the certificate for the type of training.
	The certificate shows the:
	 Foster parent's name, Location of the training, Date the training was completed, County, Service area, and Training coordinator.

Health Report for Foster and Adoptive Parents, Form 470-0720

Purpose	Form 470-0720 provides health information on the prospective foster family members to satisfy the regulatory mandate that applicants must meet.
Source	Print supplies of this form from:
	 The on-line manual, or SharePoint under Employee Manual/Forms.
Completion	The form is completed before licensing of the prospective family home. Medical re-examination may be required at the discretion of the health practitioner or the supervising agency.
	The recruitment and retention contractor:
	 Completes Section A, addressed to the practitioner, and Inserts the name of the agency to whom the information is to be released.
	Separate forms are required if family members are under the care of different physicians.
	The family completes the history in Section C and signs the form to authorize the release of examination results. (In the case of minor children, the child's parent shall sign the form.)
	The practitioner completes Section B.
Distribution	Give one copy of the form to the applicant. You may make a photocopy as a control.
	When the completed form is returned, the contractor keeps a copy for its file and places the original in the licensing packet sent to the Department for the DHS licensing file.
Data	The form includes the family's reported health history and the practitioner's statement as to whether the family's health would prevent them from providing the needed care or would be detrimental to the well-being of a child placed in their care.

Lead Paint Assessment, Form 470-4819

Purpose	Form 470-4819, <i>Lead Paint Assessment</i> , serves to document that the foster family completed a visual assessment for lead hazards when their residence was built before 1960.
Source	The recruitment and retention contractor can provide a copy of the form to the foster parent to complete.
Completion	A foster parent whose residence was completed before 1960 shall complete the form:
I	 During the initial home study. When the family has moved to a new home. Before renewal.
Distribution	The foster parent gives the completed form to the recruitment and retention contractor home study worker. The contractor includes the form in the home study packet provided to the Department.

License Capacity Variance Request, Form 470-3342

Purpose	Form 470-3342 is used to compile the information needed to request a variance to exceed licensed capacity or a child-specific variance from the service area manager or designee.
Source	Complete this form on line using the template in SharePoint under Employee Manual/Forms.
Completion	The Department licensing worker prepares this form whenever a respite placement is planned which would exceed the licensing capacity. The recruitment and retention contractor worker prepares the form when a match occurs and the placement exceeds licensed capacity.
	The recruitment and retention contractor and the placement worker are responsible for ensuring that the additional children placed receive the same level of care and safety as the other children in care.
	The service area manager or designee must approve all variance requests.
Distribution	Submit the form to the service area manager or designee for approval. The service area manager or designee sends the completed original to the worker responsible for the DHS licensing file.
	File one copy in the child's file. Send a copy to the foster parents for their personal records. Send a copy to the recruitment and retention contractor for their file.
Data	Enter the identifying information for the family.
	Check the kind of variance being requested.
	Explain why the variance is needed and how the family is qualified to provide care for more children.
	If the variance is for specific children, enter identifying information for them.

Notice of Action: Foster Family Home, Form 470-0709 or 470-0709(S)

Purpose	Form 470-0709 or 470-0709(S) is used to notify the applicant for a foster family home license of licensing decisions.
Source	Complete the English and Spanish versions of the form on line using the templates in SharePoint under Employee Manual/Forms.
Completion	The service area manager or designee completes the form when the manager or designee makes a foster family home licensing decision, including:
	 Issuance of a full license on application, reapplication, or completion of a corrective action plan under a provisional license.
	 Issuance of a provisional license on application or reapplication.
	 Denial of a license on application, reapplication, or expiration of a provisional license.
	NOTE: If the applicant fails to return the application for renewal, then the license is not renewed. The notice is effective the last day of the licensing year.
	The service area manager or designee reviews and signs the form.
Distribution	Make three copies of the completed form. Send the original to the applicant. NOTE: Send all denial notices to the applicant by restricted certified mail so that the date of receipt can be recorded for appeal purposes.

	The service area manager may send a letter with this notice of action, especially in the case of adverse actions. Any information contained in the letter shall agree with the information and appeal rights contained on this form.
	File a copy in the Department licensing file. Send a copy to the recruitment and retention contractor.
1	The contractor will initiate payment of the training stipend if the initial license is approved.
Data	Indicate if a new license or renewed license is being issued.
	Check the applicable choice and fill in the dates and license capacity if requested.
	If a full or provisional license is being issued, indicate the effective period of the license and the capacity of the home. If any other limitations are being placed on the home, type the limitation in the space provided.
	If the application is being denied:
1	 Indicate all specific sections of Iowa Code Chapter 237 and of 441 Iowa Administrative Code Chapters 112 and 113 being used as reasons for the denial. Include the number.
	 Explain the specific facts that support the legal basis for the negative action. Use an additional page if necessary.

Partnership Development Plan, Form 470-4020

Purpose	The purpose of form 470-4020, <i>Partnership Development Plan</i> , is to help families turn their needs into strengths and enhance their parenting skills.
Supply	Print supplies of this form from the sample in the manual.
Completion	The contractor home study worker completes this form during the family consultations. This process may be completed as often as necessary. Issues identified must be addressed by the tenth training session.
Distribution	Keep the original of the form in the home study file and make a copy for the family.
	The home study worker shares this information with the PS-MAPP training leaders as feedback indicating what subjects need to be addressed during the training. If PS-MAPP training is waived, this form can be completed and shared with the Department when the initial licensing packet is submitted.
Data	The form identifies the family's need, indicates what action plan will be implemented to address the need, and analyzes the potential outcomes of this process.

Purpose	Department licensing staff uses the <i>Pre-Service Training and</i> <i>License Variance Request</i> to request a variance:
	 For foster parent applicants to complete the 30 hours of pre-service training, or
	 Of a non-safety licensing standard that meets an alternative equivalent licensure standard and does not have a negative impact on child safety.
Source	Complete this form using the template in SharePoint under Employee Manual/Forms.
Completion	The Department licensing worker completes the form.
	To request a variance of a licensing standard:
	 Enter the rule needing approval of the variance. Enter the effective date that the variance is requested. Describe the proposed equivalent alternative to meeting the licensure rule.
	The social work administrator or designee checks the box indicating approval or denial of the request and signs the form.
Distribution	Send the completed original form to the service area manager or social work administrator for a response to a variance request. When the request for a variance is approved or denied:
	 Return the original to the Department licensing worker. Send a copy to the retention and recruitment worker. Send a copy to the policy program manager in central office and enter the date sent.
Data	Document the reasons why the variance to 30 hours of pre-service training and the non-safety licensing standard is an alternative equivalent to the licensure standard.

Professional Development Plan, Form 470-4023

Purpose	The purpose of form 470-4023, <i>Professional Development Plan</i> , is to identify training needs for foster families during the first six months after they receive their license to enhance their parenting skills.
Supply	Print supplies of the form as needed from the sample in the manual.
Completion	The home study worker completes this form in consultation with the family so they can work out a training plan for the family.
Distribution	The home study worker maintains the original of the form in the home study file and makes a copy for the family.
Data	The form identifies:
	 In-service training needs for the family, Needs for development of other family members, and The plan the family agrees to carry out to meet those needs.

Progress Notes, Form 470-5438

Purpose

Progress Notes is used to document foster home visits in the narrative of what took place and address:

- People present,
- Location of contact,
- Purpose of contact,
- Home environment,
- Foster child's perception of the home,
- Each foster child's health, education, behavior, and socialization,
- In-service training progress and list training completed
- License capacity discussion,
- The conversation about the child's current medications and review the current therapeutic plan,
- Other issues noted, and
- The next steps (who will do what by when).
- Source Complete this form on line using the template in SharePoint under Employee Manual/Forms.
- Completion The recruitment and retention licensing worker completes the *Progress Notes* after consulting with the Department licensing and placement worker.
- Distribution The RRTS contractor sends:
 - The original to the DHS licensing worker,
 - A copy to the foster child's DHS placement worker, and
 - A copy to the resource parents.

Data Complete a new *Progress Notes* form for each visit and annually for the unannounced visit.

Provisions for Alternate Water Supply, Form 470-0699

Purpose	Applicants whose private water supply is unsafe shall use form 470-0699 to make a commitment to supply safe water to foster children.
Source	Print supplies of this form from:The on-line manual, or
	 SharePoint under Employee Manual/Forms.
Completion	The applicant and the recruitment and retention contractor home study worker complete this form whenever an applicant has a private water supply that is unsafe.
Distribution	Submit the original in the initial or renewal home study packet to the service area manager or designee. Keep a copy until the original is returned with the manager's or designee's decision.
Data	The form:
	 Identifies the place where the family will obtain water.
	 Describes the source.
	 Describes the procedures that will ensure the safety of this water supply.
	 Describes the procedures to prevent foster children from drinking unsafe water.
	 Is signed by:
	The foster parents.The home study worker.The service area manager or designee.

PS-MAPP Family Profile, Form 470-4019 or 470-4019(S)

Purpose	The <i>PS-MAPP Family Profile</i> is used to collect information about prospective foster and adoptive families during the PS-MAPP training, as part of the family home study.
Source	Obtain supplies of the English and Spanish versions of the form from the recruitment and retention contractor.
Completion	PS-MAPP trainers give this packet to the family when the family begins the licensing or approval process. Issue only the sections that apply to the particular family. The applicant family shall complete the profile by the last training session.
	If PS-MAPP is waived, the home study worker provides this form to the family to complete before the last applicant home visit. Completing the profile reinforces that families can best explain their own strengths and needs. Families know themselves better than anyone else does.
	It is the responsibility of prospective foster and adoptive parents to help home study workers get to know them better and to examine fully if adopting or fostering is right for them
Distribution	The family returns the original completed profile to the home study worker. It is retained in the family's DHS licensing file. The recruitment and retention contractor keeps a copy in its home study file.
Data	Part I of the profile includes sections for the applicants to report:
	 General information on household members, including: Demographic information Medical and personal information Legal information Financial information References Special projects (pictures, letters, scrapbook) Personal profile for the mother Personal profile for the father

Part II of the profile collects information about how the family operates and what the family's expectations for a foster child are. There are several optional sections depending on family configuration:

- A couple with children
- A couple with no children
- A single person with children
- A single person with no children
- A parent's profile of children now in the home
- A personal profile for children 12 years of age or older
- A personal profile for children under age 12

PS-MAPP Family Profile Summary, Form 470-4029

Purpose	Form 470-4029, PS-MAPP Family Profile Summary, is used to:
	 Summarize the family's reasons for fostering or adopting.
	 Summarize the family's strengths and needs relative to the 12 criteria discussed in the parent educational meetings.
	 Recommend next steps for the family.
	 Provide guidelines to other agency staff for supporting the family.
Source	Print this form from the sample in the manual. A Word template is available from DHS licensing staff.
Completion	The home study worker completes the form based on information collected at family meetings during the foster home study licensing process.
Distribution	The form is retained in the family's DHS licensing file and a copy is retained in the contractor's file.
Data	The form includes:
	 Demographic and family information Child preferences Family strengths Family needs Worker comments

Receipt of HIV-Related Information, Form 470-3227

Purpose	Form 470-3227 documents the foster parent's agreement to the confidentiality provisions for HIV-related information regarding a specific child.
Source	Print this form from the sample in the manual. (Access the form sample by clicking on the form name above.)
Completion	Issue this form when HIV information is given to a foster parent verbally or in writing. Draw foster parents' attention to the section on the prohibition of further disclosure.
	Generally, the foster parent must sign this document at the time HIV information is given to the foster parents or within ten days of the receipt of HIV information.
Distribution	Send the form to the placement worker for retention in the child's file. Give a photocopy of the completed form to the foster parents.
Data	Fill in the child's name and date of birth. Have the foster parent sign and date the form.

Recommendation for Denial of a Foster Family License, Form 470-0704

Purpose	Form 470-0704 summarizes the grounds for recommending denial of an application or reapplication for a foster family home license and records the decision. (See <u>12-B</u> , <u>Denial of License</u> , for further discussion.)
Source	Department staff can complete this form using the template in SharePoint under Employee Manual/Forms.
Completion	The Department licensing worker completes all but the "Denial Decision" section when recommending the denial of a license. The service area manager completes that section.
Distribution	The licensing worker submits the form to the service area manager or designee and keeps a copy as a control.
	After a decision is made, the licensing worker:
	 Files a copy in the licensing file,
	 Sends a copy to the foster family program manager in the Division of Adult, Children and Family Services along with the documentation supporting the denial, and
	• Sends a copy to the recruitment and retention contractor.
Data	Indicate all substantiated reasons for the denial of an application or reapplication. Attach supporting data for each reason checked when this form is submitted.

Recommendation for Provisional License, Form 470-0698

Purpose	Form 470-0698 summarizes the grounds for recommending issuance of a provisional foster family home license and records the decision.
Source	Print this form from the sample in the manual. (Access the form sample by clicking on the form name above.)
Completion	The Department licensing worker completes the form when form 470-0695, <i>Foster Family Survey Report</i> , indicates that the applicant fails to meet one or more licensing standards, but the licensing worker believes that the situation meets the requirements for issuing a provisional license.
	Refer to <u>12-B</u> , <u>LICENSING DECISION: Approval of License:</u> <u>Provisional License</u> , for a discussion of the conditions for issuance of a provisional license.
	The licensing worker completes sections A, B, D, E, and F. The applicants sign in section C to indicate their commitment to the plan of correction.
Distribution	The licensing worker:
	 Submits the form to the service area manager for a decision.
	 Keeps a control copy until the form is returned with the licensing decision.
	 Sends the applicant a photocopy of the completed form as the approved plan for correction.
	 Maintains the completed form in the licensing file.
Data	The form describes:
	 The applicant home's deficiencies, The applicant's plan, and The time frames for correction of the deficiencies.
	Be as specific as possible in describing the deficiencies in section A and the corrective action in section B. You may need to attach additional information to explain sections C, D, and E. Indicate in Section F whether the provisional license is being recommended and sign in the space provided.

Recommendation for Suspension of a License, Form 470-0710

Purpose	Form 470-0710 documents the conditions requiring an emergency or time-limited suspension of a foster family home license and records the Department's decision.
Source	Complete this form using the template in SharePoint under Employee Manual/Forms.
Completion	The Department licensing worker completes sections A through E when recommending the suspension of a license.
	Each licensee signs section F, along with the licensing worker, to indicate commitment to the plan of correction.
	The service area manager or designee signs section G.
	The administrator of the Division of Adult, Children and Family Services completes section H.
Distribution	The licensing worker submits the copy to the service area manager.
	The service area manager or designee submits the approved copy to the administrator in the Division of Adult, Children and Family Services and keeps a copy until the approved copy is returned with a suspension decision. The completed form is placed in the licensee's record.
Data	Ensure that:
	 The deficiencies are clearly and completely identified in section A.
	 Section D clearly describes the plan for correcting the deficiencies including the completion date.

Request for a One Year Foster Family License, Form 470-5124

Purpose	Form 470-5124 is used to document the request for approval or denial of one-year licensure for foster families.
Source	Complete this form using the template in SharePoint under Employee Manual/Forms.
Completion	This form is completed by the Department licensing worker upon receipt of the licensing renewal packet for foster families who have completed their first two years of licensure. This form is used only for foster families whose performance in the previous licensing year indicates the need for a one year license.
	Mark the reasons for the request as indicated on the form. <i>Other reasons</i> can be for:
	 Continuing lack of compliance with adherence to foster care licensing rules, foster care placement contract, or foster family handbook;
	 Behavior that could have negative impact on foster children, such as alcohol or substance abuse;
	Health or mental health concern.
	The occurrence of one or more of the reasons does not require a recommendation of a one-year license. Take into consideration the circumstances, foster family's history, willingness to take responsibility and made adjustments, and other relevant factors when deciding whether or not to make the request.
	Also document voluntary requests by the foster family in this section. If you need more space to write the information under <i>Other reasons</i> , use another sheet of paper and attach it to this form.
Distribution	Attach the home study, corrective action plan, letter to the foster parents, and other supporting documents or reports to this form. Send the completed form with attachments to the Foster Family Program Manager in Central Office.

The Adult, Children and Family Services Division Administrator reviews the request and indicates on the form approval or denial and an effective date.
The division administrator signs the form. The foster family program manager returns a copy to the Department licensing worker. The Department licensing worker then sends the foster family the Notice of Action and enters the foster home renewal date in FACS. If the division administrator approves the request for a one year license, the Department licensing worker notifies the foster family program manager who completes the override in FACS.

If the decision is for another one year license, document the reasons on the Notice of Action form. Do not send a copy of the request form to the foster family.

Keep the original in the licensing case file until the signed form is returned to you. Then file the signed form in the licensing case file. Provide a copy of the signed form to the recruitment and retention provider.

Data Use all available information about the family for a thorough recommendation to the division administrator including:

- The final home study,
- Discussions with the recruitment and retention provider and other providers, DHS staff, the foster family;
- Corrective action plans, and
- Child abuse assessments.

Request for Revocation of Foster Family License, Form 470-0705

Purpose	Form 470-0698 summarizes the grounds for recommending revocation of a foster family home license and records the decision on the recommendation.
Source	Print supplies of this form from:
	 The on-line manual, or SharePoint under Employee Manual/Forms.
Completion	When the decision is made to recommend revocation of a license, the Department licensing worker completes all sections except "Revocation Decision."
	The division administrator completes Revocation Decision.
Distribution	The licensing worker submits the form with the supporting data to the service area manager or designee for review (and correction or elaboration if necessary).
	The service area keeps a control copy and forwards the form and the supporting information to the foster family program manager of the Division of Adult, Children and Family Services. The program manager reviews the information and writes the revocation notice letter. The letter, form 470-0705, and supporting information is submitted to the division administrator for review and approval.
	If the Division does not approve the revocation, the form is returned immediately to the service area. If the revocation is approved, the Division issues the revocation notice by certified mail. The completed form is returned to the service area:
	 30 days after the licensee receives the revocation notice, or If the licensee appeals the revocation, when the appeal process is completed.
	When the service area receives the completed form, return the form to the licensing worker. The DHS licensing worker enters revocation status including pertinent text into FACS.
Data	Indicate all reasons for revocation of the license. (See <u>12-B</u> , <u>Revoking the License</u> , for a discussion of license revocation.) Attach supporting data describing the circumstances involved and your actions to improve the family situation to this form.

Request for Waiver of Pre-Service Training or Non-Safety Licensing Standards for Relatives, Form 470-4873

Purpose	Department licensing staff uses the <i>Request for Waiver of Pre-Service Training or Non-Safety Licensing Standards for Relatives</i> to:
	 Request a waiver for relatives to complete the 30 hours of pre-service training, and
	 Waive the non-safety licensing standard that does not have a negative impact on child safety.
Source	Complete this form using the fillable PDF file in SharePoint under Employee Manual/Forms.
Completion	The Department licensing worker completes the form, except for the "response" section, which is completed by the service area manager or social work administrator.
	Choose the reason for waiving pre-service training that applies. To request a waiver of another licensing standard:
	 Check the licensing standard that has the deficiency. Enter the effective date that the waiver is requested. Describe the circumstances that warrant the waiver. Describe the impact if a waiver is not approved.
Distribution	Send the completed original form to the service area manager or social work administrator for a response for a waiver request. When the request for a waiver is approved or denied:
	 Return the original to the Department licensing worker. Send a copy to the retention and recruitment worker. Send a copy to the policy program manager in central office.
Data	Document the reasons why the 30 hours of pre-service training may be waived or why a licensing standard could be waived.

Resource Home Concern, Form 470-5510

Purpose	DHS workers use form 470-5510, <i>Resource Home Concern</i> , to document concerns identified regarding a resource home that need to be addressed and to coordinate successful resolution. The form provides a tracking mechanism for the resource home's history.
Source	Complete this form using the fillable PDF file in SharePoint under Employee Manual/Forms.
Completion	The DHS social worker, who has observed a concern, completes Part 1 of the form no later than one business day and sends it to the DHS licensing supervisor in the applicable service area to review and identify concerns requiring resolution.
	The supervisor assigns a timeframe for the RRTS provider to complete the initial home contact. If the concern requires an urgent resolution, the DHS supervisor will call the RRTS provider right away to ensure an immediate response. The DHS supervisor will discuss the concerns and any immediate actions to be taken with the resource home. Any suspected child abuse will be reported to the Child Abuse Hotline: 1-800-362-2178.
	Part 2 is completed by the RRTS contractor of a resolution and any recommendation for a Corrective Action Plan, if applicable, and sends it to the DHS licensing supervisor within 10 business days of receiving the concern form to review.
	The RRTS contractor completes Part 2 with a resolution and any recommendation for a Corrective Action Plan, if applicable. The RRTS contractor sends the form to the DHS licensing supervisor within 10 business days of receiving and reviewing the concern form.
	The DHS licensing supervisor reviews the resolution plan in Part 3 and signs it if the resolution is approved.

Distribution	Send a copy of the approved form to the DHS placement worker, DHS licensing worker, and the RRTS provider to file in the resource family file.
Data	The DHS licensing worker and the RRTS worker monitors the resolution plan and any corrective action plan to rectify the concerns. Maintain documentation in the resource family file.

Resource Parent Home Study, Form 470-5436

Purpose	The <i>Resource Parent Home Study</i> provides an outline for formatting the narrative evaluation of a prospective foster or adoptive home.
Source	Print copies of form 470-5436 from the sample in the manual as needed.
Completion	The recruitment and retention home study worker shall:
	 Complete this form before preparing the licensing or approval recommendation; and
	 Complete an update of this form when significant changes occur.
	NOTE: If an approved home study is more than one year old, then an update is required.
Distribution	The recruitment and retention contractor:
	 Sends the original to the Department for the licensing file. Keeps a copy for its file. Gives a copy to the family upon request.
Data	The <i>Resource Parent Home Study</i> format includes sections summarizing the following:
	 The dates of training and family consultations
	 The family's motivation for becoming a foster family
	 The family's strengths and needs relative to the skills needed
	 The family's commitment to safety
	 A summary of references
	• The family's willingness to work with the child's birth family
	 The family's understanding and support of concurrent planning
	 Plans for supporting the family after placement
	 Placement recommendations for this family
	 Signatures, titles, address, and phone number for the worker that prepared the home study

Strengths/Needs Worksheet – After Meetings 1 and 2, Form 470-4021 or 470-4021(S)

Purpose	Form 470-4021 or 470-4021(S) is used to help families assess their willingness and ability to be foster families.
Source	Print this form as needed from the sample in the manual.
Completion	The PS-MAPP leader asks foster parent applicants to complete this worksheet after meeting 2 during the foster home licensing process.
Distribution	The completed form is returned to the recruitment and retention contractor. The form is included with the home study report and is retained in the licensing file. The contractor keeps a copy for the family's file.
Data	The form includes sections for the applicants to report their strengths and needs in relation to:
	 Communicating effectively Knowing the children Building their strengths and meeting their needs

Strength/Needs Worksheet – After Meetings 3 and 4, Form 470-4089 or 470-4089(S)

Purpose	Form 470-4089 or 470-4089(S) is used to help families assess their willingness and ability to be foster families.
Source	Print supplies of these forms as needed from the samples in the manual.
Completion	The PS-MAPP leader asks foster parent applicants to complete this worksheet after meeting 4 during the foster home licensing process.
Distribution	The completed form is returned to the recruitment and retention contractor. The form is included with the home study report and is retained in the licensing file. The contractor keeps a copy for the family's file.
Data	The form includes sections for the applicant to report strengths and needs in relation to:
	 Know your family Communicate effectively Know the children Build strengths; meet needs Work in partnership

• Be loss and attachment experts

Strength/Needs Worksheet – After Meeting 5, Form 470-4090 or 470-4090(S)

Purpose	Form 470-4090 or 470-4090(S) is used to help families assess their willingness and ability to be foster families.
Source	Print supplies of these forms as needed from the samples in the manual.
Completion	The PS-MAPP leader asks foster parent applicants to complete this worksheet after meeting 5 during the foster home licensing process.
Distribution	The completed form is returned to the recruitment and retention contractor. The form is included with the home study report and is retained in the licensing file. The contractor keeps a copy for the family's file.
Data	The form includes sections for the applicant to report strengths and needs in relation to:
	 Know your family Communicate effectively Know the children Build strengths; meet needs Work in partnership Be loss and attachment experts Manage behaviors Build self-esteem Assure health and safety

Strength/Needs Worksheet – After Meetings 6 and 7, Form 470-4091 or 470-4091(S)

Purpose	Form 470-4091 or 470-4091(S) is used to help families assess their willingness and ability to be foster parents.
Source	Print supplies of these forms as needed from the samples in the manual.
Completion	The PS-MAPP leader asks foster parent applicants to complete this worksheet after meeting 7 during the foster licensing home study process.
Distribution	The completed form is returned to the recruitment and retention contractor. The form is included with the home study report and is retained in the licensing file. The contractor keeps a copy for the family's file.
Data	The form includes sections for the applicant to report strengths and needs in relation to:
	 Know your family Communicate effectively Know the children Build strengths; meet needs Work in partnership Be loss and attachment experts Manage behaviors Build connections Build self-esteem Assure health and safety Assess impact Make an informed decision

Strengths/Needs Worksheet for Fertility Issues, Form 470-4024 or 470-4024(S)

Purpose	Form 470-4024 or 470-4024(S) is used to help families who have experienced a loss of fertility to assess their willingness and ability to be foster families.
Source	Print supplies of these forms as needed from the samples in the manual.
Completion	The PS-MAPP leader asks foster parent applicants to complete the worksheet after the third meeting when the family has not been able to conceive or has experienced the loss of a child.
Distribution	The completed form is returned to the recruitment and retention contractor. The form is included with the home study report and is retained in the licensing file. The contractor keeps a copy for the family's file.
Data	The form includes sections for the applicants to evaluate and report strengths and needs in relation to 14 tasks involved in fostering a child.

Medication Management, Comm. 315 or Comm. 315(S)

Purpose	The <i>Medication Management</i> booklet has been developed to provide foster and adoptive parents with basic information on how to manage the medication needs of children in their care.
Source	Families may print the booklet from the sample in the manual. (Access the booklet by clicking on the form number above.) The recruitment and retention contractor can give a copy of the booklet to families who do not have Internet access.
Completion	The booklet has a test at the end of it. Completion of this test is mandatory and must be completed in the initial training cycle. Foster parents who are already licensed on October 1, 2009, shall complete this training by October 1, 2010.
Distribution	The test answer sheet must be completed and returned to the recruitment and retention contractor.
Data	 The booklet addresses: Responsibilities when a child enters care Types and names of medication Preparation forms Routes of administration Who should administer medication Guidelines for administration Recording administration Dispensing oral medicationss Medication errors Refusal to take medication Administering medication away from home Storage and disposal of medication Psychiatric medications

Foster Parent Handbook, Comm. 33 or Comm. 33(S)

Purpose	The <i>Foster Parent Handbook</i> provides information to foster parents about Department policies and procedures for foster care.
Source	Foster parents and staff are encouraged to access the <i>Handbook</i> through the Internet. (Access either the English or Spanish version of the <i>Handbook</i> by clicking on its "Comm." number above.)
Distribution	When printed copies are available, they are issued through the PS-MAPP training process.
Data	 The Handbook addresses: Procedures for becoming a licensed foster parent. Procedures and responsibilities in accepting placements. Special considerations in caring for teen-agers. Requirements for communication and record keeping. Discipline policies. Recognizing, reporting, and preventing child abuse. Permanency planning requirements. Placement transitions. Finances. Training. Resources and support.