

Announced Visit

Unannounced Visit

Family: _____ Date: _____

Who was Present

List the retention and recruitment worker, HHS caseworker or licensing worker, and all household members present during the visit.

Location of Contact

Purpose of Contact

Licensing/Approval visit **Support visit** **Unannounced visit**

Visit related to a concern

5 Day Post Placement, Date child placed _____ Date Placement Confirmed: _____

Other purpose:

Progress Note Narrative

Include a brief synopsis of what took place during the meeting.

Discussion with the Resource Parents Regarding Each Placed Child in the Home

Document your discussion with the resource parents below. Cover the primary domains for each placed child.

Name of Placed Child
Health/Safe Sleep Plan/Therapeutic Plan
Medications/ Side Effects
Education/Socialization (Activities)
Behavior/Needs
Strategies to manage Behaviors/Needs
What support is needed?

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Resource Family Needs and Details
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Describe where medications are stored and how the resource family is documenting medications administered.

Describe the discipline or behavior management techniques being used by the resource family.

Describe support and coaching you provided to the resource parents on concerns discussed.

Anticipated Respite needs if any:

Describe the placed child(ren)'s perception of the home.

Discuss resource family license capacity.

Discussion of resource family stability to provide care for placed children.

Training

Resource home licensing/approval year: _____

List the trainings by each foster parent’s name below. Include the training name, training provider, training date, and the number of training hours completed in the foster parent’s current license year.

Name	Training Name	Training Date
	CPR or BLS	
	CPR or BLS	
	First Aid	
	First Aid	
	Mandatory Reporter of Child Abuse	
	Mandatory Reporter of Child Abuse	

Name	Training Name	Training Provider	Training Date	Training Hours Completed

Use additional page to document trainings if necessary.

Document the conversation on the topics of trainings and number of hours that need to be completed before the resource home license renewal.

Include HHS or caseworker’s recommendations for trainings based on an assessment of resource parent’s skills, needs, and challenges for specific children in the home.

Assessment of Home and Safety Standards
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Describe the physical condition of the home. (Consider the use of pictures for documentation purposes.)

Smoke Detector: 1st floor 2nd floor Basement

Carbon Monoxide Detector: 1st floor 2nd floor Basement

Fire Extinguisher(s):

Chemicals:

Furnace/Water Heater:

Safety Plan posted where:

Outside Hazards (bodies of water included):

Fire Arms/Ammunition storage/projectile devices:

Any concerns/deficiencies:

Describe any other issues noted during the visit.

Crisis Plan

What are the triggers which may create a crisis in the home?

Strategies the family is already using to ensure safety.

What could a crisis look like in the home?

Who could the resource family contact for help or what is the plan for support in a crisis?

Document Crisis Plan

Next Steps to support Resource Family

Who will do what and by when.

The next steps should consider the severity of concerns assessed during the visit and should note if the concerns rise to the level of HHS or the caseworker to complete a joint visit.