



FOSTER CARE PROVIDER POLICY AND STANDARD REVIEW

DEPARTMENT OF HEALTH AND HUMAN SERVICES

FOSTER CARE

SFN 1038 (5-2024)

Introduction: Foster care providers will review this document with the assigned Licensing Specialist initially and annually thereafter. The purpose of the document is to ensure an understanding of high-level topics that impact licensing while offering education and clarification on specific law, rule or policy.

Policy, Procedure and Guidelines: Click on each link below for direct access to the information.

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|---|---|
| <input type="checkbox"/> ND Foster Care Provider Handbook | <input type="checkbox"/> NDAC 75-03-14. Licensing Rules |
| <input type="checkbox"/> Policy Manuals | <input type="checkbox"/> NDCC 50-11. Licensing Law |
| <input type="checkbox"/> North Dakota State Forms | |

Training Opportunities: Click on each link below for direct access to online training options

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| <input type="checkbox"/> CPS Mandated Reporting Training | <input type="checkbox"/> North Dakota Foster Care Provider Reimbursement |
| <input type="checkbox"/> ND Child Welfare Court Proceedings | <input type="checkbox"/> North Dakota Provider Opportunities |
| <input type="checkbox"/> Safety Framework Practice Model (nd.gov) | <input type="checkbox"/> NATI - Native American Training Institute |
| <input type="checkbox"/> Fire Safety Trainings | <input type="checkbox"/> CFSTC Provider Training |
| <input type="checkbox"/> CPS Training for Foster Care Providers | |

Roles and Responsibilities (See Handbook for more specific details)

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|--|---|---|
| <input type="checkbox"/> Foster Care Provider (You!) | <input type="checkbox"/> Custodial Agency | <input type="checkbox"/> Licensing Agency |
| <input type="checkbox"/> Training Centers (CFSTC and NATI) | <input type="checkbox"/> CFS Field Service Specialist | <input type="checkbox"/> Juvenile Court |
| <input type="checkbox"/> Guardian ad litem (GAL) | | |

Reasons for Children Needing Foster Care

- ☐ Circumstance leading to youth entering foster care
- ☐ Children served (age, needs, cultures)
- ☐ Types of foster care as a safety service (*long term, short term, respite, shelter, emergency, 18 +, on call*)
- ☐ Potential circumstances, needs, and behaviors children may present (*medically fragile, mental health diagnosis, school struggles, lying, stealing, swearing, bedwetting, masturbation, sexually acting out vs. normal sexual development, physically aggression, substance use, substance exposure, oppositional, food issues, insecurities, etc.*)

Meeting the Needs of Children in Foster Care

- ☐ Understanding of least restrictive placement settings (relatives, family homes, etc)
- ☐ Social media and photography including a child in foster care
- ☐ Offer a consistent stable placement setting to avoid unnecessary disruption
- ☐ Ongoing communication and consult with the custodial agency, especially when:
 - a. Illness or Injury
 - b. Incident/Serious event (broken bone, accident, suicidal, etc.)
 - c. Runaway status - are you willing to accept the child back upon location?
 - d. Normalcy Activities (SFN 1040) requires custodial agency permission
 - e. Authorization for out-of-state travel Authorization for clothing, travel, irregular payment expenditures
 - g. Inability to maintain placement stability for the foster child
- ☐ Appropriate Discipline
- ☐ Child's Medical Needs
 - a. Physical and Mental Health
 - b. Health Tracks
 - c. Medical Appointments
 - d. Medication distribution
 - e. Immunizations
- ☐ Child's Educational Needs
 - a. School of origin
 - b. IEP if applicable

Maintaining Child's Family Connections

- ☐ Permanency Goal - Reunification or Fit and Willing Relative, Guardianship, Adoption, APPLA
- ☐ Parent - Child Visits (phone calls, visits, child updates, FaceTime/Zoom, etc.)
- ☐ Relative Search/Engagement
- ☐ Maintaining contact with friends and family from their home community
- ☐ Making and preserving memories (photos for parents, scrapbook, etc.)
- ☐ How to prepare for varied transitioning of a child from your home
- ☐ Grief and Loss from a child's perspective
- ☐ Grief and Loss from foster care provider's perspective

Acknowledgment

I/we hereby declare that we have reviewed the licensing law, rule and policy noted above. I/we believe the information is clear and we are aware of where to go online to find the resources if we have further questions. I/we understand the knowledge of law, administrative rule and policy is important and required to obtain a license to provide foster care to children in the state of North Dakota.

- ☐ By checking this box and typing my name below, I/we am signing this document electronically. I/we agree that my electronic signature is the legal equivalent of my handwritten signature. I/we agree that the electronic signature appearing on this document has the same validity and enforceability as a handwritten signature.

Foster Care Provider Signature	Date
Foster Care Provider Signature	Date

Licensing Agency Use Only

- ☐ Licensing Specialist reviewed the document with the foster care provider/s and answered questions as part of the initial or renewal home study visit.

Licensing Specialist Signature	Date
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