DEPARTMENT OF CHILDREN AND FAMILIES

**Division of Safety and Permanence**

**Foster Home Record Checklist – Child Placing Agencies**

**Use of form:** Use of this form is voluntary. This form is used by licensing representatives to review foster home records to ensure compliance with DCF 54.04(1)(f)2., 3. and 7. This form may also be used as a self-study by child placing agencies to review compliance with these rules. Personally identifiable information will only be used to identify individual records. Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m), Wisconsin Statutes].

**Instructions:** While at the child placing agency, licensing representatives should review the foster home records in accordance with Licensing Activity Standards and determine whether each file contains the required information. Address each item on the checklist. Enter **✓** (or date) to indicate compliance; enter **NC** to indicate noncompliance; or enter **NA** if the item is not applicable. If additional space for comments is needed, attach a separate sheet.

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name – Child Placing Agency | | | Address (Street, City, State, Zip Code) | | | | | Telephone Number | | | |
| **General Requirements for All Level 1 – 5 Homes** | | | | | | | | | | | |
| Name of Foster Home | | | | |  |  |  | | |  | |
| Foster home license application 54.04(1)(f)7., 54.06(2)(a)3., 56.04(4)(a)1., 56.04(4)(b)1. | | | | |  |  |  | | |  | |
| Employment history of applicant 5 years (initial application) 54.01(3m), 56.04(4)(a)7. | | | | |  |  |  | | |  | |
| Foster home placement agreements 54.04(1)(f)7., 54.06(2)(a)3. | | | | |  |  |  | | |  | |
| Signed statement indicating applicant has received the following: 54.01(3m), 56.04(4)(a)9.  a. Brochure explaining the foster care reimbursement and rate structure including clothing allowance 56.04(4)(a)9.a. | | | | |  |  |  | | |  | |
| b. Brochure explaining the foster parent insurance program including how to file a claim 56.04(4)(a)9.b. | | | | |  |  |  | | |  | |
| c. Authorization for the licensing agency to contact DOJ and / or federal or local law enforcement 56.05(1)(f), 54.01(3m) | | | | |  |  |  | | |  | |
| d. Authorization from any non-client resident 12 years old or older to contact DOJ and / or federal or local law enforcement if necessary 56.05(1)(f), 54.01(3m) | | | | |  |  |  | | |  | |
| BID forms (All non-client household members 12 years old and over) 54.01(3m), 56.055(1)(a)1. | | | | |  |  |  | | |  | |
| CBC results (All **adult** household members) 54.01(3m), 56.055(2)(a), s. 48.685(2)(am) | | | | |  |  |  | | |  | |
| Response to Caregiver Background Check (IBIS) 54.01(3m), 56.055(2)(a), s 48.685(2)(am) | | | | |  |  |  | | |  | |
| Fingerprint checks on foster parents initially licensed after 01/01/2008, or if there was any break in licensure 54.01(3m), 56.055(1)(b), 56.055(2)(b) | | | | |  |  |  | | |  | |
| Results of check with local law enforcement per info on BID if applicable 54.01(3m), s. 48.685 | | | | |  |  |  | | |  | |
| Reverse Sex Offender check 54.01(3m), 56.055(2)(c)  *Website to conduct the check:* [*http://offender.doc.state.wi.us/public/*](http://offender.doc.state.wi.us/public/) | | | | |  |  |  | | |  | |
| Criminal history records search from any other jurisdiction in which a non-client resident lived **outside the state of Wisconsin** in the past 3 years 54.01(3m), 56.055(2)(d) | | | | |  |  |  | | |  | |
| For convictions, copies of police reports for agency to determine if substantially related to the care of children 54.01(3m), s. 48.685(5m), 12.06, 56.055(3)(a-c) | | | | |  |  |  | | |  | |
| Child abuse or neglect check in **each county in** **Wisconsin** that each foster parent and all adult household members have lived in for the past 5 years shall be completed at initial licensing or if there is a break in licensure 54.01(3m), 56.055(2)(e)1. | | | | |  |  |  | | |  | |
| Child abuse or neglect check for **each state besides Wisconsin** that each foster parent and all adult household members have lived in for the past 5 years for initial licensing or if there is a break in licensure (if applicable) 54.01(3m), 56.055(2)(e)2. | | | | |  |  |  | | |  | |
| Information on the discharge status of any household member that served in the armed forces 54.01(3m), 56.055(2)(f) | | | | |  |  |  | | |  | |
| SAFE Questionnaire I 54.04(1)(h), 56.16(1)(n) | | | | |  |  |  | | |  | |
| SAFE Questionnaire II 54.04(1(h), 56.16(1)(n) | | | | |  |  |  | | |  | |
| SAFE Psychosocial Inventory 54.04(1)(h), 56.16(1)(n) | | | | |  |  |  | | |  | |
| SAFE Home Study (signed and dated) 54.04(1)(h), 56.16(1)(n) | | | | |  |  |  | | |  | |
| SAFE Home Update (signed and dated) 54.04(1)(h), 56.16 (1)(n) | | | | |  |  |  | | |  | |
| Foster home licensing compliance study or survey 54.04(1)(f)2. | | | | |  |  |  | | |  | |
| Current foster home license certificate with Level at which home is certified 54.04(1)(f)2., 56.04(5)(a), 56.13(2) | | | | |  |  |  | | |  | |
| Verification of property insurance or waiver 56.04(4)(a)2., 56.04(4)b.2., 54.01(3m) | | | | |  |  |  | | |  | |
| Verification of vehicle insurance 56.05(3)(a), 56.05(4)(b), 54.01(3m) | | | | |  |  |  | | |  | |
| Health exam for all in household 56.04(4)(a)3., 56.04(4)(b)5., 54.01(3m) | | | | |  |  |  | | |  | |
| Fire inspection if required by CPA 56.04(4)(a)5., 56.04(4)(b)3., 54.01(3m) | | | | |  |  |  | | |  | |
| Water test if required by CPA 56.04(4)(a)6., 56.04(4)(b)4., 54.01(3m) | | | | |  |  |  | | |  | |
| Drawing of layout of home 56.04(4)(a)5m., 54.01(3m) | | | | |  |  |  | | |  | |
| Rabies certificate showing vaccinations are current for pets 56.08(3)(a), 54.01(3m) | | | | |  |  |  | | |  | |
| Training Plan at time of renewal 54.01(3m), 56.14(8) | | | | |  |  |  | | |  | |
| Notification of any previous licensure as a foster parent or any other type of caregiver for children, the name of the licensing agency and the period during which the license was held 56.04(4)(a)8., 54.01(3m) | | | | |  |  |  | | |  | |
| Licensing modification application if applicable 56.04(4)(c)2., 54.01(3m) | | | | |  |  |  | | |  | |
| Written approval to combine care of foster children with regular part-time care of other non-related children or adults or to conduct business or provide services in the foster home, if applicable 56.09(2)(a), 54.01(3m)  *Note: The agency may not allow a foster parent who operates a foster home with a Level 3 to 5 certification to also operate a licensed family child care center under Ch. DCF 250 or a certified child care home under Ch. DCF 202 in the foster home.* | | | | |  |  |  | | |  | |
| Evidence that information gathered on Part A face sheet, DCF-F-CFS0872A-E has been provided to foster parent 54.01(3m), 56.15(3)(d), 37.03(2)(a)1. | | | | |  |  |  | | |  | |
| Disaster Plan 56.08(10m), 54.01(3m) | | | | |  |  |  | | |  | |
| Foster Parent Handbook 56.12(1), 54.01(3m) | | | | |  |  |  | | |  | |
| Notification to the clerk of the school district when a license is issued 54.01(3m), s. 48.62(3)   1. Name of foster home parents 56.16(1)(L)1. | | | | |  |  |  | | |  | |
| 1. Address and phone number of the foster parents 56.16(1)(L)2 | | | | |  |  |  | | |  | |
| 1. Type of children expected to be placed in the foster home 56.16(1)(L)3. | | | | |  |  |  | | |  | |
| 1. Name, address and phone number of contact person form the CPA with whom school staff can communicate when necessary 56.16(1)(L)4. | | | | |  |  |  | | |  | |
| **Level 1 Home** | | | | | | | | | | | |
| Preplacement Training (within 6 months of licensure) – 6 hours 56.13(3)(b), 54.01(3m) | | | | |  |  |  | | |  | |
| Agencies must use the preplacement online training or request an exception from the department Exceptions Panel 56.14(6)(a)  *Website to complete the online training is* [*http://wcwpds.wisc.edu/foster-parent-training*](http://wcwpds.wisc.edu/foster-parent-training) | | | | |  |  |  | | |  | |
| Placing agency has contact once per month with the foster parent 56.18(1)(a), 54.01(3m) | | | | |  |  |  | | |  | |
| **Level 2 Home** | | | | | | | | | | | |
| Preplacement Training – 6 hours 56.13(4)(a)1.a., 54.01(3m) | | | | |  |  |  | | |  | |
| * If child-specific must complete preplacement training within 6 months of licensure 56.13(4)(a)1.b., 54.01(3m) | | | | |  |  |  | | |  | |
| Initial training during initial licensing period – 30 hours 54.01(3m), 56.13(4)(a)2. | | | | |  |  |  | | |  | |
| * If licensed before Jan. 1, 2011, the foster parent shall complete the initial licensing training before Jan. 1, 2015 56.14(7)(c) | | | | |  |  |  | | |  | |
| * If licensed before Jan. 1, 2011 and the foster parent providing verification that he / she has successfully completed a competency-based, pre-service training as described in DCFS Memo Series 2002-12 will not have to complete initial training 56.14(7)(d) | | | | |  |  |  | | |  | |
| * Agency must use Wisconsin Foundation Training for foster parents or request an exception from the department Exceptions Panel 56.14(7) | | | | |  |  |  | | |  | |
| * A foster parent who is licensed solely for the purpose of adoption of a domestic infant under s. 48.837, or a foreign child under s. 48.839 or s. 48.97, will not be required to complete the initial licensing training if they complete the pre-adoption preparation training required under s. DCF 51.10 56.14(5)(c) | | | | |  |  |  | | |  | |
| Ongoing training (after initial licensing period) – 10 hours every 12 months 56.13(4)a.3, 54.01(3m) | | | | |  |  |  | | |  | |
| Training using books, periodicals, and web based resources, television, and radio presentations may not exceed 20% of the required hours 56.14(8)(b)3. | | | | |  |  |  | | |  | |
| Three favorable references 54.01(3m), 56.13(4)(b) | | | | |  |  |  | | |  | |
| Placing agency has contact once per month with the foster parent 56.18(1)(a), 54.01(3m) | | | | |  |  |  | | |  | |
| **Level 3 Home** | | | | | | | | | | | |
| Preplacement training – 36 hours 56.13(5)(b)1., 54.01(3m) | | | | |  |  |  | | |  | |
| Preplacement training must include the 6 hours pre-placement online training and the Wisconsin Foundation Training for foster parents or an exception from the department Exceptions Panel 56.14(6d)  *Website to complete the online training is* [*http://wcwpds.wisc.edu/foster-parent-training*](http://wcwpds.wisc.edu/foster-parent-training) | | | | |  |  |  | | |  | |
| Initial licensing training (During initial licensing period) – 24 hours 56.13(5)(b)2., 54.01(3m) | | | | |  |  |  | | |  | |
| Initial training must include the following topics: 56.14(7e)(a)-(f)  (a) Crisis management | | | | |  |  |  | | |  | |
| (b) Sexuality and sexual boundaries | | | | |  |  |  | | |  | |
| (c) Sexual abuse | | | | |  |  |  | | |  | |
| (d) Effects of maltreatment and trauma on child development | | | | |  |  |  | | |  | |
| (e) Building life skills | | | | |  |  |  | | |  | |
| (f) Building birth family and cultural connections | | | | |  |  |  | | |  | |
| Ongoing training – 18 hours every 12 months 56.13(5)(b)3., 54.01(3m) | | | | |  |  |  | | |  | |
| Training using books, periodicals, and web based resources, television, and radio presentations may not exceed 20% of the required hours 56.14(8)(b)3. | | | | |  |  |  | | |  | |
| Applicant must have at least 3 of the following: 56.13(5)(a)1.a.-g. | | | | |  |  |  | | |  | |
| a. A minimum of one year of experience as a foster parent or kinship care provider with a child placed in his or her home for at least one year | | | | |  |  |  | | |  | |
| *b.\** A minimum of 5 years of experience working with or parenting children | | | | |  |  |  | | |  | |
| c. A minimum of 500 hours of experience as a respite care provider for children under the supervision of a human services agency | | | | |  |  |  | | |  | |
| d. A high school diploma or the equivalent | | | | |  |  |  | | |  | |
| e. A college, vocational, technical, or advanced degree in the area of a child’s treatment needs, such as nursing, medicine, social work, or psychology | | | | |  |  |  | | |  | |
| *f.*\* A substantial relationship with the child to be placed through previous professional or personal experience | | | | |  |  |  | | |  | |
| g. Work or personal experience for which the applicant has demonstrated the knowledge, skill, ability, and motivation to meet the needs of a child with a level of need of 3 | | | | |  |  |  | | |  | |
| *\*Note:* If an applicant for certification to operate a Level 3 foster home relies on experience that meets the requirements in subd. 1.b. or 1.f. as one of the 3 required criteria in the above paragraph, the applicant shall also meet the criteria in subd. 1.a., c., e., or g., 56.13(5)(a)2., 54.01(3m) | | | | |  |  |  | | |  | |
| Two in-person contacts per month with the foster parent if a child is placed. (One contact shall be in foster home) 56.18(1)(b)1., 54.01(3m) | | | | |  |  |  | | |  | |
| If a Level 1 or 2 child is placed in a Level 3 or 4 home, agency must have at least one in-person contact per month with foster parent 56.18(1)(b)2., 54.01(3m) | | | | |  |  |  | | |  | |
| If a Level 3 to 5 has not had placements for 3 or more months, an in-person contact in the foster home must be conducted prior to or within 24 hours of a placement 56.18(1)(b)3., 54.01(3m) | | | | |  |  |  | | |  | |
| Applicant must have 4 favorable references: 56.13(5)(c), 54.01(3m)   * 3 references by unrelated persons 56.13(5)(c)1.a., 54.01(3m) | | | | |  |  |  | | |  | |
| * One reference letter shall be regarding the applicant’s qualifications under DCF 56.13(5)(a)1., excluding par. (a)1.d. 56.13(5)(c)1.a., 54.01(3m) | | | | |  |  |  | | |  | |
| * The fourth favorable reference shall be from a relative (adult child, if applicable) 56.13(5)(c)1.b., 54.01(3m) | | | | |  |  |  | | |  | |
| **Level 4 Home** | | | | | | | | | | | |
| Preplacement Training – 40 hours 56.13(6)(b)1., 54.01(3m) | | | | |  |  |  | | |  | |
| * Preplacement training must include the preplacement online training and the Wisconsin Foundation Training for fosters or an exception from the department Exceptions Panel 56.14(6h)(a)1.a.; 56.14(6h)(a)2.   *Website to complete online training* [*http://wcwpds.wisc.edu/foster-parent-training*](http://wcwpds.wisc.edu/foster-parent-training) | | | | |  |  |  | | |  | |
| * Training must also include 4 hours of child-specific or population-specific information 56.14(6h)(a)1.b. | | | | |  |  |  | | |  | |
| Initial Licensing Training (During initial licensing period) – 30 hours 56.13(6)(b)2., 54.01(3m) | | | | |  |  |  | | |  | |
| Initial training must include the following topics: 56.14(7m)(a)-(g)  (a) Crisis management | | | | |  |  |  | | |  | |
| (b) Sexuality and sexual boundaries | | | | |  |  |  | | |  | |
| (c) Sexual abuse | | | | |  |  |  | | |  | |
| (d) Effects of maltreatment and trauma on child development | | | | |  |  |  | | |  | |
| (e) Building life skills | | | | |  |  |  | | |  | |
| (f) Building birth family and cultural connections | | | | |  |  |  | | |  | |
| (g) 6 hours of child-specific or population-specific training 56.14(7m)(b) | | | | |  |  |  | | |  | |
| Ongoing Training – 24 hours every 12 months 56.13(6)(b)3., 54.01(3m) | | | | |  |  |  | | |  | |
| * Training must include 8 hours of child or population-specific 56.14(8)(b)1r.d. | | | | |  |  |  | | |  | |
| * Training using books, periodicals, and web based resources, television, and radio presentations may not exceed 20% of the required hours 56.14(8)(b)3. | | | | |  |  |  | | |  | |
| Applicant must have at least 4 of the following: 56.13(6)(a)1.a.-g.  a. A minimum of one year of experience with children with a level of need of 3 as a foster parent or kinship care provider with a child placed in his or her home for at least one year | | | | |  |  |  | | |  | |
| *b.\** A minimum of 5 years of experience working with or parenting children | | | | |  |  |  | | |  | |
| c. A minimum of 500 hours of experience as a respite care provider for children under the supervision of a human services agency | | | | |  |  |  | | |  | |
| d. A high school diploma or the equivalent | | | | |  |  |  | | |  | |
| *Applicant Experience, continued 56.13(6)(a)1.a.-g.*  e. A college, vocational, technical, or advanced degree in the area of a child’s treatment needs, such as nursing, medicine, social work, or psychology | | | | |  |  |  | | |  | |
| *f.\** A substantial relationship with the child to be placed through previous professional or personal experience | | | | |  |  |  | | |  | |
| g. Work or personal experience for which the applicant has demonstrated the knowledge, skill, ability, and motivation to meet the needs of children with a level of need of 4 | | | | |  |  |  | | |  | |
| *\*Note:* If an applicant for certification to operate a Level 4 foster home relies on experience that meets the requirements in subd. 1.b. or 1.f., as one of the 4 required criteria in the above paragraph, the applicant shall also meet the criteria in subd. 1.a., c., e., or g 56.13(6)(a)2., 54.01(3m) | | | | |  |  |  | | |  | |
| Applicant must have 4 favorable references 56.13(6)(c), 54.01(3m) | | | | |  |  |  | | |  | |
| * 3 references by unrelated persons 56.13(6)(c)1.a., 54.01(3m) | | | | |  |  |  | | |  | |
| * One reference letter shall be regarding the applicant’s qualifications under DCF 56.13(5)(a)1., excluding par. (a)1.d. | | | | |  |  |  | | |  | |
| * The fourth favorable reference shall be from a relative (adult child, if applicable) 56.13(6)1.b., 54.01(3m) | | | | |  |  |  | | |  | |
| Two in-person contacts per month with the foster parent 56.18(1)(b)1. | | | | |  |  |  | | |  | |
| **Level 5 Home** | | | | | | | | | | | |
| Program Manager Qualifications – Must have one of the following:   * 4 year college degree in approved field 56.13(7)(e)4.a., 54.01(3m) | | | | |  |  |  | | |  | |
| * 2 years supervised full-time work experience in out-of-home care program 56.13(7)(e)4.b., 54.01(3m) | | | | |  |  |  | | |  | |
| * Personal experience with a family member who has similar needs 56.13(7)(e)4.c., 54.01(3m) | | | | |  |  |  | | |  | |
| Program Manager must have one of the following:   * Previous employment as a manager or supervisor 56.13(7)(e)3.a., 54.01(3m) | | | | |  |  |  | | |  | |
| * A professional development plan to develop management and supervisory skills 56.13(7)(e)3.b, 54.01(3m) | | | | |  |  |  | | |  | |
| Program Manager – 40 hours of preplacement training 56.13(7)(e)5., 54.01(3m) | | | | |  |  |  | | |  | |
| Preplacement training must include the following information: 56.14(6p)(a)-(k)  (a) Preplacement online training  *Website to complete the training is* [*http://wcwpds.wisc.edu/foster-parent-training*](http://wcwpds.wisc.edu/foster-parent-training) | | | | |  |  |  | | |  | |
| (b) School advocacy | | | | |  |  |  | | |  | |
| (c) Cardiopulmonary resuscitation (CPR) | | | | |  |  |  | | |  | |
| (d) First aid | | | | |  |  |  | | |  | |
| (e) Blood-borne pathogens | | | | |  |  |  | | |  | |
| (f) Medication management | | | | |  |  |  | | |  | |
| *Preplacement Training continued 56.14(6p)(a)-(k)*  (g) Patient rights | | | | |  |  |  | | |  | |
| (h) Positive behavioral supports | | | | |  |  |  | | |  | |
| (i) Individual service plans | | | | |  |  |  | | |  | |
| (j) Emergency plans | | | | |  |  |  | | |  | |
| (k) Four hours of child-specific or population-specific training, orientation, or observation | | | | |  |  |  | | |  | |
| Program Manager – 30 hours of initial licensing training 56.13(7)(e)6., 54.01(3m) | | | | |  |  |  | | |  | |
| Initial Training must include the following information: | | | | |  |  |  | | |  | |
| (a) Crisis management 56.14(7s)(a) | | | | |  |  |  | | |  | |
| (b) Sexuality and sexual boundaries 56.14(7s)(a) | | | | |  |  |  | | |  | |
| (c) Sexual abuse 56.14(7s)(a) | | | | |  |  |  | | |  | |
| (d) Effects of maltreatment and trauma on child development 56.14(7s)(a) | | | | |  |  |  | | |  | |
| (e) Building life skills 56.14(7s)(a) | | | | |  |  |  | | |  | |
| (f) Building birth family and cultural connections 56.14(7s)(a) | | | | |  |  |  | | |  | |
| (g) 6 hours of child-specific or population-specific training 56.14(7s)(b) | | | | |  |  |  | | |  | |
| Program Manager – 24 hours of ongoing training every 12 months 56.13(7)(e)7., 54.01(3m) | | | | |  |  |  | | |  | |
| Ongoing Training must include the following: | | | | |  |  |  | | |  | |
| (a) Child maltreatment and reporting requirements 56.14(8)(b)1r.a. | | | | |  |  |  | | |  | |
| (b) Prompt and adequate treatment 56.14(8)(b)1r.b. | | | | |  |  |  | | |  | |
| (c) Any required reauthorizations for first aid, blood-borne pathogens, and cardiopulmonary resuscitation 56.14(8)(b)1r.c. | | | | |  |  |  | | |  | |
| (d) 8 hours of child-specific or population-specific training 56.14(8)(b)1r.d. | | | | |  |  |  | | |  | |
| (e) Training using books, periodicals, and web based resources, television, and radio presentations may not exceed 20% of the required hours 56.14(8)(b)3. | | | | |  |  |  | | |  | |
| Two in-person contacts per month with the foster parent 56.18(1)(b)1. | | | | |  |  |  | | |  | |
|  |  |  | |  | | |  | |  | |  |
|  | **NAME – Licensing Representative** |  | | **SIGNATURE – Licensing Representative** | | |  | | **DATE – Records Reviewed** | |  |