Supporting Foster Families as Team Members Serving Children and Their Families

Foster Parent Advisory Group Report

September 1997

Bureau of Programs and Policies
Division of Children and Family Services
Department of Health and Family Services
EXECUTIVE SUMMARY
SUPPORTING FOSTER FAMILIES AS TEAM MEMBERS SERVING CHILDREN AND THEIR FAMILIES

Several months ago, at the request of Susan N. Dreyfus, Administrator of the Division of Children and Family Services, a group of foster parents nominated by a number of County Foster Care Coordinators was brought together to identify the supports foster families needed to better serve the children and families in Wisconsin's out-of-home care system.

These foster parents represented both small and large, urban and rural counties reflective of all counties in Wisconsin. Among them, these foster parents have over 140 years of being "Everyday Heroes" to these children and families.

Among the important recommendations of these foster parents are the following:

- Foster parents and other professionals need to work as a team to assure quality care for these vulnerable children and families.
- Entire communities - social, civic, recreational, business, religious and other local groups and associations - must be supportive of foster children and foster families.
- Child welfare agencies and the community must help to assure that respite care is available so that foster families can reduce their own stress to better provide the constant nurturance and support children in foster care need.
- Child care should be available for foster children so that foster parents can continue to work, obtain necessary training to meet the intensive needs of these children and have time with their own children (especially when their children are young).
- Foster parents need to be reimbursed - not paid - for their constant efforts on behalf of foster children in an amount that reflects the importance of foster parenting and encourages other community members to consider becoming foster parents.
- Foster families should have access to health insurance which they can afford that will allow them to be available to provide the constant and intense care that many foster children require.
- Foster parents should be provided funds necessary to assure that foster children have clothing that is appropriate to the season and that allows foster children to "fit in" with their peers so that they are not further alienated from children of their own age.
- Foster parents should have access to social workers, other professionals and services on an as-needed basis so that any crisis affecting a foster child is addressed on a timely basis to assure the most stable placement possible for a foster child.
- Foster families need and deserve support from the agency which placed the child so that the stresses and other problems that occur do not negatively affect them or their own children.
- Foster parents should be provided with and be required to attend training events that will help them effectively care for foster children and help them assure that their own family functions normally and happily.
Entire communities need to support foster care through on-going and comprehensive recruitment of new foster families so that foster children can be matched with a family that is most appropriate for their needs. In so doing, the entire community must assist in projecting a positive image of foster parenting and do what it can to support foster families.

The Department of Health and Family Services and the Division of Children and Family Services are deeply grateful to the foster parents who agreed to add to their already heavy load by serving on this advisory group: It is our intent to move to implement these reasonable and necessary recommendations.

We call on the entire community of Wisconsin citizens to assist us in that effort. When foster parenting is recognized for its importance and foster families are seen as the "Everyday Heroes" that they are, Wisconsin will truly be on its way to being a place where all children are provided with the love and support they so fervently need and deserve.
Foster Parent Advisory Committee Members

Braaksma, Barbara, (Columbia County).
Barbara and her husband have been licensed foster parents since 1981 in Columbia County. Since that time, they have cared for 80 children. Barbara is a member of the Women, Infants and Children (WIC) Advisory Committee:

Buehler, Kathy, (Waukesha County).
Kathy has been a foster parent for 12 years, primarily for special needs children. She currently has 9 children in her care: 5 birth and adopted children and 4 children in foster care.

Buss, Mickie, (Winnebago County).
Mickie has provided care for 120 children over 8 years as a treatment foster parent. She has been a member of the Winnebago County Permanency Plan Review Board for 3 years.

Cox, Beverly, (Milwaukee County).
Beverly has been a foster parent for 8 years and currently participates in legislative activities on behalf of the Milwaukee Foster Parent Association.

Hartman, Pamela, (Milwaukee County).
Pam is President of the United Foster Parent Association of Greater Milwaukee, Inc. She has been a foster parent for 8 years and has 6 birth children and 4 adopted children.

Lucht, Becky, (Portage County).
Becky has been a foster parent for 13 years and has provided care for adolescent boys the last 10 years.

Ludeking, Sue, (Rock County).
Sue has 17 years experience as a family operated treatment group home parent. She is President of the Wisconsin Federation of Foster Parent Organizations.

Mayo, Kathy, (Dane County).
Kathy has been a foster parent for 2 years and has had 43 children in care during that time.

Metoxen, Barbara and Don, (Green Lake County).
The Metoxens have been foster parents for 11 years. For the past six years, they have provided a home for boys 12 - 17 years of age.

Schaefer, Lee, (Wood County):
Lee is President of the Wood County Foster Parent Association. He has been a foster parent for 5 years.

Schoenberg, Norma, (Fond du Lac County).
Norma has been licensed for 22 years and is currently President of the Fond du Lac County Foster Parent Association.

Strozier, Kym, (Milwaukee County).
Kym has been a foster parent for 5 years. She is a foster parent, an adoptive parent and a recruiter of foster and adoptive homes.

Tanner, Anne, (Waukesha County).
Anne is an adoptive parent and has also been a foster parent for 13 years.
PART I NARRATIVE

BACKGROUND

Foster family care represents the least intrusive out-of-home care intervention for children and families who experience such difficulties that they are unable to live together. Eighty-four percent of the children placed in out-of-home care in Wisconsin in 1996 were placed in family foster homes. To meet the increasingly complex needs of foster children and their families, a universal, comprehensive system of foster care that transcends the boundaries of agencies and programs must be developed. By investing in foster care, the child welfare system's ability to meet its primary goals - permanency for children and recognizing the best interests of those children - is significantly increased.

When foster parents are regarded as professionals, included as valuable service team members and receive the support and guidance they need, their ability to assist children and families increases, as does their satisfaction with their role. Foster families are a critical component of a successful foster care program. Consequently, we must continue to recruit, train and retain quality foster families who are prepared for the challenges of caring for children who often have or are at-risk of experiencing mental health and behavioral problems and physical disabilities. Although the needs of foster families are listed in the items initially prioritized in this report, this report only begins to outline the supports needed by foster families to assist them with the task of providing quality care to some of our most vulnerable children and their families.

OVERVIEW

This Supporting Foster Families report was requested by Susan Dreyfus, the Administrator of the Division of Children and Family Services, in order to: (a) improve the quality of foster care and ensure the highest quality of care for children; (b) achieve the best outcomes for children in the child welfare system; and (c) assist the Department of Health and Family Services in meeting strategic goals related to the best interests of children, out-of-home care placement, and permanency planning. The Foster Parent Advisory Group was developed in response to this request. The group met over a period of several months in 1996 and 1997 to formulate its recommendations.

The recommendations contained in this report are part of a list of 112 items initially identified through a nominal group process. (See Attachment 1.) The recommendations represent an effort to begin working on areas important to improving the quality of services for children placed in foster care and meeting the above stated goals of the child welfare system. The recommendations listed in Part II of this report were identified by consensus of group members. The remaining items on the larger list are no less significant and will need to be considered for implementation at a later date. Other individuals, agencies and systems - including the courts, mental health and AODA agencies, schools, public and private agencies and communities - are encouraged to take part in implementing them.

The group continues to meet quarterly to advise the Division of Children and Family Services on issues related to foster care and permanency planning, to share information, to problem solve and to implement the group's recommendations.

Many of the recommendations contained in this report specifically address several major goals outlined in the Department's 1996-2001 Strategic Business Plan.

The group identified four major categories of supports needed by foster families: service supports, programmatic and fiscal supports, educational/training supports, and foster care promotional support. Each of these supports is further detailed in this report. Programmatic and fiscal supports were identified as needed by foster parents to enable them to actively participate as members of teams. Promoting foster care is identified as a separate support category because the group recognized the importance of creating and maintaining a positive image of foster care as crucial to the recruitment and retention of quality foster families. In each category, the need for support increases as the responsibilities of the
foster parents increase. The group intends these recommendations to be implemented in a culturally
competent manner respecting diversity and the needs of specific geographic areas of the state.

RECOMMENDATIONS

Service Supports
Developing service/treatment teams for all children in foster care is crucial to creating an effective model of service delivery and in assisting foster parents to cope with the challenges of dealing with foster children and their families. Through service team membership, foster parents will have timely access to all information regarding the child and to case planning, crisis planning, consultation and conflict resolution. The combined expertise of the service/treatment team will be utilized to best meet the needs of the child for a safe, permanent home. Foster parents are an integral part of the team, and all members of the team must be provided with ongoing training on the purpose, development and use of service teams.

Programmatic and Fiscal Supports
The state will continue to provide support for foster care. This includes reimbursement for room and board, clothing, children's transportation, respite care and child care. The state will facilitate a process to provide access to affordable health insurance for which both public and private resources will be pursued. Increasingly, more "at home" foster parents are needed to meet the complex needs of children in care.

Education and Training
The group recommends that training for foster parents be provided that is strength-focused and competency-based to assess and improve foster parents' skills to more effectively achieve the goals of the permanency plan. Training must also include information regarding other service systems involved in child welfare (e.g., legal, school, mental health, law enforcement, medical systems). It is further recommended that these and other systems provide timely and accurate training for their staff on child welfare issues. Recognizing foster parents' knowledge, skills and experiences and using their expertise to provide peer support and training is key to effective program implementation.

Promoting Foster Care
In order to recruit and retain high quality foster families, the group recognizes the importance of creating and maintaining a positive image of foster parenting in the community. This will involve reaching all members of the community in a variety of ways including contact by foster families and the use of general media (radio, television and print). The group recommends that a comprehensive recruitment plan that uses radio, television and the Internet be developed.

The initial recommendations are included in Attachment 1 to this report. In order to ensure effective implementation, it is recommended that a work plan be developed for the items identified for action in Part II. To achieve success, it is important that private and public agencies at all levels of government, foster parents, and communities work together as partners and assume ownership for accomplishment of these tasks.

Secretary Joe Leean, Administrator Susan Dreyfus and staff of the Division of Children and Family Services provided leadership for the development of this report.
# PART II RECOMMENDATIONS

## SERVICE SUPPORTS

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<thead>
<tr>
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<tr>
<td>Coordinated Service Teams</td>
<td>Individuals and agencies, acting as partners engaged in ongoing coordinated planning to develop, implement and revise the service plan.</td>
<td>Lack of coordination among agencies, foster parents, biological parents and others results in misunderstanding and conflict. Inconsistent implementation of plans and services ultimately becomes disruptive to the foster child.</td>
<td>Develop coordinated service teams that include foster parents, agency staff, birth families and children that: a) meet within 10 days of the child's placement and bimonthly thereafter or as needed, b) recognize foster parents as core members and assist them in problem solving and intervention, and c) work to ensure consistent practice and enforcement of policies across and within agencies.</td>
<td>Shorter length of stay in out-of-home care, effective achievement of the permanency plan and retention of foster parents are the positive by-products.</td>
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<tr>
<td>Social Worker Foster Home Consultant</td>
<td>Provide foster parents with regular and emergency access to the agency worker or other person knowledgeable about the case.</td>
<td>Minimal or no contact results in frustration for foster parents, placement disruption, more crisis related issues with foster children and ineffective or inefficient implementation of the permanency plan</td>
<td>Implement policies and practices that allow social workers to provide foster parents with timely and relevant information and support. Establish staffing patterns and organizational structures that allow foster parents to make contact with social workers as needed.</td>
<td>This approach will focus on preventing problems and providing early intervention. As a result, foster parents will have more access to support and will be more likely to continue foster parenting, thus resulting in more stability for foster children by retaining experienced and qualified foster parents.</td>
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<td>Crisis Plan and Response</td>
<td>Access to intervention and information about what to do in emergencies.</td>
<td>A lack of information and communication about how to respond in the event of crises can result in inappropriate treatment for a foster child.</td>
<td>Require service teams to develop comprehensive crisis plans and ensure they are disseminated to the appropriate persons.</td>
<td>This will result in better care for foster children when they are most vulnerable and will positively affect retention of experienced and qualified foster parents.</td>
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<td>Foster Family Support Plan</td>
<td>Services designed to ensure that all members of a foster family receive assistance to deal with stresses inherent in providing care to foster children.</td>
<td>Intrafamilial pressures within foster families can result in relationships which negatively impact the foster family members and foster children in the home.</td>
<td>Require service teams to develop foster family support plans including identification of all resources necessary for successful placements and access to the necessary services as identified in the permanency plan.</td>
<td>This proactive approach will prevent the onset of problems and crises and will ultimately serve to help retain foster parents as they feel supported in their roles and are able to resolve conflicts and stresses among family members.</td>
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<td>Respite Care</td>
<td>The temporary and periodic provision of relief for a foster parent in order to alleviate the stress resulting from the provision of continuous support and care.</td>
<td>Children with complex needs must be afforded professional and comprehensive care which can only be provided if the caretaker is refreshed and able to concentrate on those needs.</td>
<td>Recruit and train respite workers in, order to provide relief for foster families.</td>
<td>Better capacity for foster parents to cope with the issues of foster children Retention of good foster homes and fewer disruptions for foster children.</td>
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<tr>
<td>Child Care</td>
<td>Regular licensed/certified child care for foster children that is court ordered or part of the treatment plan that allows foster parents to work or attend school.</td>
<td>Foster parents must be provided the opportunity to work or participate in educational services or another educational program in order to accomplish their personal or foster care related goals.</td>
<td>Provide regular child care for foster children as indicated in the court order or service/treatment in plan.</td>
<td>Foster parents are more apt to continue foster parenting if they have the support of child care and subsequent opportunities to attend school. They are also likely to accept placement of more children and thus prevent placement of some children in more restricted settings and maintain sibling groups.</td>
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## PROGRAMMATIC AND FISCAL SUPPORT

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<td>Transportation</td>
<td>Transportation of foster children by foster parents or others to doctors, therapists, et.al. as required in the service plan.</td>
<td>Foster parents lack regular transportation allowances to permit them to transport foster children as indicated in the service/treatment plan.</td>
<td>Compensate foster parents for mileage and transporting children to meet service plan objectives. This needs to be considered in the supplemental or exceptional rate or as a cost and reimbursement.</td>
<td>If foster parents have the needed resources and can provide transportation for foster children as prescribed in the service plan, they are able to take more difficult children and consequently prevent children with complex needs from being institutionalized.</td>
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<tr>
<td>Health Insurance</td>
<td>Insurance coverage for physical and mental health care and related programs for foster parents.</td>
<td>Full-time foster parents often have no or inadequate health care coverage for themselves and their children, leading to additional stress.</td>
<td>Provide access to affordable health insurance that includes mental health services through an initiative with the insurance industry and others to secure insurance coverage.</td>
<td>Recruitment and retention are improved with knowledge of the support available through health insurance coverage.</td>
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<td>Uniform Foster Care Rate</td>
<td>A standard scale of payments to foster parents to cover the cost of caring for a child.</td>
<td>Rate increases are currently inconsistent. This serves to 1) send an ambivalent message to children and families of their value and 2) fails to address the needs of specific age groups such as very young children who may require extensive care and supervision</td>
<td>Increase the basic rate and provide regular increases as needed in keeping with standard estimates of the average cost of raising a child.</td>
<td>Recruitment and retention of foster parents will be increased because of this concrete evidence of the value of the services they provide. This will result in more stability of placement for difficult foster children.</td>
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<td>Clothing Allowance</td>
<td>A consistent allowance for the foster children's clothing that allows for seasonal changes.</td>
<td>Many children come into foster care with no clothing. Resources available to foster parents to provide or replace lost or damaged clothing are very limited</td>
<td>Funds should be available for the purchase of clothing for foster children at the time of initial entry into foster care and on a regular basis throughout the placement to meet the ongoing clothing needs of these children.</td>
<td>The issue of clothing addresses a basic need. Clothing provides protection from the elements, but is also related to self-esteem and image. For foster children, having age appropriate and well maintained clothing is essential for socialization purposes.</td>
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## TRAINING AND EDUCATION

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<td>Training</td>
<td>Initial and ongoing mandatory, culturally competent, skill-based training for foster parents.</td>
<td>The needs of foster children are complex and foster parents need the resources to address those needs and information on best practice concepts.</td>
<td>Institute a mandatory statewide competency based training program for foster parents focusing on basic and advanced skill development and foster family participation in permanency planning.</td>
<td>This strategy will promote better outcomes for children. Foster parents will be more knowledgeable and comfortable in their role and subsequently be more inclined to continue foster parenting, thus providing foster children with experienced foster parents.</td>
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<tr>
<td>Peer Support/ Mentoring</td>
<td>This is a two-fold concept: 1) the matching of experienced and new foster parents so that the latter can learn by the experience of others; and 2) the facilitated communication among foster parents of all experience levels designed to share knowledge and to support one another in all aspects of the foster parenting role.</td>
<td>Foster parents often feel as though the problems they experience are new and unique to them and often feel unable to effectively deal with those problems thus resulting in frustration and feelings of inadequacy.</td>
<td>Formalize foster parent support and mentoring groups and provide the direction required to assure that foster parents are afforded the opportunity to participate in such arrangements and feel comfortable in admitting that they sometimes need assistance.</td>
<td>Having access to a peer support network would provide extended opportunities for problem solving through a peer network. Foster parents would receive the support and information they need. This would ultimately result in retention of foster parents and less disruption of placements.</td>
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# PROMOTING FOSTER CARE

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<td>Recruitment</td>
<td>A systematic and comprehensive administrative effort to increase the pool of available qualified foster parents.</td>
<td>There is a lack of foster homes in general and a lack of a pool of homes from which to appropriately match the child and foster family.</td>
<td>Develop a comprehensive recruitment plan that: a) engages communities in active recruitment, b) uses the media to enlist understanding and support, c) provides emphasis on situations involving special needs (such as homes for adolescents), d) addresses cultural diversity and geographic differences, and e) utilizes existing foster parents in the recruitment effort.</td>
<td>This will result in more foster homes thus reducing the number of foster children a particular foster parent is requested to care for. It will also result in fewer disrupted placements if the special needs of a child can be matched with the skills and abilities of foster parents.</td>
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<tr>
<td>Community Support</td>
<td>Financial and in-kind support for foster parents provided by local merchants, social, political and cultural groups and other members of the community to obtain clothing, food, recreational programs and other supports for foster children in their home.</td>
<td>Food and clothing and other items are costly commodities for which foster parents have only limited resources. In addition, lack of community support can result in feelings of isolation for foster parents.</td>
<td>Obtain private sector support for foster parents, e.g., merchants providing discounts for clothing and food purchased for foster children, community groups, providing holiday gifts for foster children.</td>
<td>Having the support of business and others in the community would lower government support costs, extend commitment of the community to foster care, provide more spending power, increase resources and increase foster parent recruitment and retention thus allowing children to feel, more connected to both foster families and the community.</td>
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Attachment I

The items listed on Attachment I were identified by the Advisory Group during an initial brainstorming session and were intended to generate further discussion. During subsequent sessions, the group refined the list, combining some items and prioritized others. The final recommendations were developed to help make the task of addressing multiple issues more manageable. The Advisory Committee plans to revisit the initial list and to further explore all of the issues identified.

**BRAINSTORMING LIST**

1. A good attitude.
2. More money.
5. Expanded medical assistance provider network.
6. Timely permanence plans.
7. More training on dealing with violent kids:
   - Therapist hired by the county that works specifically with foster kids.
8. Mandatory independent investigation policies.
9. Flexibility in clothing allowance.
10. A hotline phone number staffed by foster parents 24 hours a day.
11. Emphasis on working together as a team.
12. Update on Chapter 48 in a language lay people can understand.
13. An individualized support plan for each foster family.
15. Limited amount of mental health and counseling services made available to foster families.
16. Abuse allegations - investigation team separate from treatment plan.
17. Realistic view of the goal(s) of foster care.
18. A broad rate that covers more than just the basics.
20. Narrow the discretion when TPR happens - shorten time periods for reasonable efforts to reunify.
21. Establish an advocacy program that foster parents can call regarding any topic related to fostering kids.
22. Realistic goals for kids and families.
23. Better, more efficient court system.
24. Quicker and more realistic permanency plans.
25. Respect foster parents’ opinions regarding the kids in their care.
26. Scholastic flexibility for foster kids.
27. Foster parents and case workers receive same training at same time.
28. Support of other foster families.
29. Permission to sign for routine school things.
30. Hepatitis B vaccines made available for all foster families.
31. State issued newsletter.
32. Recertification process that includes mandatory training requirement.
33. Respite.
34. Educate foster parents to meet special needs of foster kids.
35. Longer training for new foster parents.
37. All info regarding foster child is given to foster parent at time of placement.
38. Social service departments be required to make early interventions.
39. Paid respite on a regular basis.
40. More day-to-day involvement between social worker and kid.
41. Social worker share vital information with schools.
42. Make more use of supplemental and exceptional payments so kids and families don't go to private agencies.
43. Mandatory CEU requirements for foster families; higher skilled homes need more CEUs.
44. Cut worker caseloads.
45. More bio-parent involvement with foster families and kids.
46. Start-up money so don't have to wait a month to get a check.
47. State/county foster parent support group development, education and assistance.
48. Federal screening of foster homes.
49. More social worker contact especially in first two months of placement.
50. Better community awareness.
51. Better definition of confidentiality.
52. Tailor a supplemental rate checklist for babies and younger children.
53. To be heard on an equal basis with the "professionals".
54. Be made aware of resources and how to use them.
55. New rate setting sheets to fit the children of today.
56. Better assessment of the supplemental rate.
57. Pool of babysitters.
58. Finders fee.
59. Daycare for working foster parents.
60. Not to be afraid of losing placements when speaking out.
61. Remove language not allowing appeals for Foster Parent Insurance Program.
62. Daycare payment for all foster parents on an as needed basis.
63. Understanding by the government that you get what you pay for.
64. Recognition of foster parents as professionals.
65. State training for foster parents.
66. Promote foster parenting - public awareness.
67. Health Care Insurance Program for foster parents.
68. Fund for set-up costs - beds, toys, etc.
69. More realistic, creative discipline techniques.
70. 30 days is 30 days notice on removals.
71. Make video training known and available statewide.
72. Foster parents more involved at all levels of service delivery.
73. Increased frequency of social worker contact - mandate minimum contact.
74. Supervise Asst. D.A.'s more closely regarding CHIPS proceedings.
75. More realistic view on reunification and when it's time to TPR.
76. Support and recognition of foster parents own kids by non-biased neutral persons.
77. Uniform, statewide media recruitment.
78. Break down the barriers between bureaus, divisions and departments.
79. Validate foster home license by Department of Regulation and Licensing.
80. Strongly encourage foster parents to attend and participate in permanency plan reviews.
81. Medicaid mileage rate needs to be different for foster parents.
82. Develop a new foster family mentor program.
83. State foster parent handbook.
84. Use exceptional rate uniformly across counties.
85. More consistent policies across counties - same information and benefits.
86. State issued mandatory incident forms.
87. Training and counseling on separation issues.
88. Establish an ongoing statewide foster parent advisory group.
89. Quality control person in each county.
90. More training money made available.
91. Increase communication and knowledge.
92. Foster parents recognized as mandatory abuse/neglect reports.
93. Support groups for foster kids.
94. Timely reimbursements for expenses.
95. Foster parent conferences with legislators.
96. Resources to buy class rings, band instruments, lessons, etc.
97. Listen to foster parent observations and insights regarding bio-families.
98. State sponsored foster family recognition banquet (in Door County every fall).
99. Increase in clothing allowance.
100. Common courtesy "Thanks".
101. State issued mandatory folder for each placement.
102. Clarify notification process for removals.
103. Standardized, state issued foster parent recordkeeping forms.
104. School fee fund.
105. Social workers and psychologists mandated to be a foster parent.
106. Reimbursement for the time taken off by foster parents at the work place due to meeting foster kids needs, i.e., attending court hearings, permanency plan review, hunting down truants, etc.
107. Outcome based foster care payments/rates.
108. Nonprofit status for foster parents.
109. Consistent confidentiality policy foster parent files.
110. Discount for foster parents at all department stores.
111. Coordinate all treatment plans with all kids in family, parents, workers.
112. Add to social worker training for foster parents relationships.