



children's home + aid

**FOSTER CHILD
RECORD FOLDER**



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FOSTER CHILD RECORD FOLDER

Record Keeping Instructions

It is required by Foster Family Home Licensing regulations (Rule 402) that foster parents maintain records for each foster child placed in the foster home. Attached is the list of records that are required to be maintained by the foster parent. Additional child specific documentation that is not on the list can also be kept in the record folder. The items listed in Section I will go with the child when he/she leaves your home. The items listed in Section II will stay with the foster parents when the child leaves the home.

The case manager will provide the foster parents with a folder in which to keep required records. In addition to the documentation that foster parents receive from various sources, the case manager and/or licensing representative will provide necessary information to the foster parents, and/or copies of forms for documentation that must be kept by the foster parent.

It is important to remember **all information you receive about your foster child is confidential**. This includes both verbal and written information. Please respect the private nature of this information and only share it as provided for in DCFS Rules and Procedures. Your foster child's case manager can help you determine when it is appropriate to share information under specific circumstances.

The records will be reviewed by the child's case manager at least once every six months, prior to the child's administrative case review (ACR) to obtain child specific information. Please allow the child's case manager to review the records when he/she requests to do so. If the case manager has not reviewed the records prior to the ACR, please take the child's records with you to the ACR.

The licensing representative will also review the records at the time of his/her visit to your home. The focus of this review will be to establish that your records are in compliance with DCFS licensing standards.



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Items to be Placed in the Child Record Folder*

For clerical use only, not to be placed in the Foster Child Folder

*Additional items to be maintained by the foster parents must be provided by the case manager and/or licensing representative and/or completed by the case manager/licensing representative prior to being provided to the foster parent

- Record Keeping Instructions
- Records to be Maintained by the Foster Parent
- Agency Information
- Phone Numbers
- Foster Child Face Sheet
- Visitation Record
- Medical, Dental, Vision and Hearing Record
- Medication Record
- Education Record
- Record of Disbursement of Clothing and Personal Allowance
- Foster Parent Notes

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- *Health Passport
 - *Medical Card
 - *Consent for ordinary and routine medical, dental, hearing and vision care
 - *CFS 534 Medication Administration Log (if required)
 - *CFS 690 Asthma Action Plan (if required)
 - *CFS 534-1 Behavior Log (if required)
 - *CFS 600-4 Sharing information With the Caregiver
 - *CFS 906
 - *Child's portion of the service plan
 - *Copy of the visitation plan(s)
 - *Sibling contact information
 - *IEP (if applicable)
 - *Consent for participation in school activities, sporting events and field trips
 - *CFS 432 Guardian's Consent for Out-of State Travel or Extended Trips



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Records to be Maintained by the Foster Parent

Section I

Information that goes with the child:

- The name and date of birth of the child, the legal guardian of the child, religion of the child, and arrangements for education of the child
- The names of persons to whom the child may be released
- A record of immunizations the child has received; any physical problem, limitations, or allergies the child has; any current recommendation for special medical care
- The name, address, and telephone number of the child's physician, guardian, and supervising agency
- A record of waivers for immunizations, medical examination and treatment
- Health Passport
- Medical Card
- Consents for ordinary and routine medical, dental, hearing and vision care
- Copies of medical, dental, vision, and hearing forms, and discharge papers from the ER or hospital
- CFS 690 Asthma Action plan (if required)
- Medication log and/or CFS 534 Medication Administration Log (if applicable)
- CFS 534-1A Behavior Log (if applicable)
- CFS 600-4 Sharing Information With the Caregiver
- CFS 906 Placement/Payment Authorization Form
- Child's portion of the service plan
- Copy of the visitation plan(s)
- Sibling contact information
- IEP (if applicable)
- Education record; report cards/correspondence from school/examples of the child's school work/certificates of academic and athletic achievement
- Consents for participation in school activities, sporting events, and field trips
- Child's Life Book/Memory Book, photos of the child

Section II
Information that stays with the foster parent:

- The names, addresses, and telephone numbers of persons to contact in case of an emergency
- A copy of any CFS 432 Guardian's Consent for Out-of-State Travel or Extended Trips
- A record and/or receipts for distribution of personal allowance and clothing funds
- Documentation of visits supervised by the foster parent(s)
- Foster parent's portion of the service plan
- A record of the emergency evacuation plan and quarterly rehearsals
- A record of the child supervision plan
- Records to verify attendance at required pre-licensure and in-service trainings
- Foster parent notes



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Agency Information

Our office is located at:

Office hours are 8:30 AM to 5 PM

**For an after-hours emergency, please call the following number,
and the answering service will forward a message
to a staff member who can help you.**

Case
Manager: _____ Telephone: _____

Foster Care
Supervisor: _____ Telephone: _____

Licensing
Representative: _____ Telephone: _____

Licensing
Supervisor: _____ Telephone: _____

Program
Director: _____ Telephone: _____



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PHONE NUMBERS

DCFS Hotline: 1 800 252-2873

Medical Card: 1 800 228-6533

Doral Dental – for a referral to a local dentist: 1 888 281-2076

DCFS consent for hospitalization/surgery after hours: 1 773 989-3450
(for consent during business hours, contact the assigned case manager)

CARES – for emergency psychiatric services: 1 800 345-9049

DCFS Advocacy Office: 1 800-232-3798

Healthworks for counties served by CH+A:	
Cook	773 522-6900
DuPage	630 682-7979, ext. 7566
Lake	847 377-8070
Mc Henry	815 334-4518
Kane	630 264-7698
Will	815 774-7302
Rock Island	309 558-2920
Boone, Carroll, DeKalb, JoDaviess, Lee, Ogle, Stephenson, Whiteside & Winnebago	815 720-4339
DeWitt, Livingston, McLean & Piatt	309 888-5461
Calhoun, Green & Jersey	217 222- 8440, ext. 122
Woodford	309 679-6601
Marion	217 342-9237
Jackson, Perry & Williamson	618 684-3143, ext. 164
Macoupin, Montgomery & Sangamon	217 735-2317, ext. 238
Bond, Clinton, Madison, Monroe, Randolph, St. Clair & Washington	618 332-8917



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FOSTER CHILD RECORD FOLDER

Foster Child Face Sheet

Child's Name: _____

Child's DOB: _____

Child's Religion: _____

Date of Placement: _____

Legal Guardian: _____

Permanency Goal: _____

Child's Primary
Language: _____

DCFS ID #: _____

Medicaid Number: _____

Date of Last
Physical
Examination: _____

Allergies: _____

Asthma: _____

Medication: _____

Dosage: _____

Physician: _____

Phone Number: _____

Dentist: _____

Phone Number: _____

Therapist: _____

Phone Number: _____

Psychiatrist: _____

Phone Number: _____

Grade in School: _____

Last School
Attended: _____

IEP: Yes No

Dental Examination
Needed: Yes No

Physical
Examination
Needed: Yes No

Additional Information:

Persons To Whom The Child May Be Released:

- CH+A Case Aid
- CH+A Case Manager
- CH+A Supervisor or Director
- CH+A Licensing Representative
- CH+A Licensing Supervisor
- Other



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Visitation Record

Child's name: _____

Date	Visit with Whom	Brief Description



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Education Record

Child name: _____

Date	Name of School	Grade	Name of Teacher	Reason for Change

