One child at a time
Facts about Foster Care

Who are the children in foster care?
The Massachusetts Department of Social Services has children of all ages in foster care, from infants to older adolescents and from all ethnic and economic backgrounds. Foster parents are especially needed for:
- Older children and teenagers
- Children with special needs. These special needs may be developmental, educational and/or emotional.
- Medically involved children
- Drug-affected infants
- Sibling groups
- Linguistic and ethnic minorities
Foster parents are needed for African American, Latino and Asian children and for children who speak Spanish, Portuguese, Laotian, Vietnamese or Cambodian.

Why do children need foster care?
Children need foster care for many reasons. Mostly, they come to the Department of Social Services as a result of abuse and neglect. There is an alarming increase in substance abuse and a dramatic increase in domestic violence. All of this affects parent’s ability to adequately care for their children.

All children in foster care need stability, comfort and routine back in their lives. Our goal is to ensure safety, well-being and permanency for all children in foster care.

Is there any contact with the child’s parents?
Yes. Children need to remain in touch with their families, since the goal in most cases is for the child to return home. It is important for the foster parents to work with the child’s parents with the support of Department staff.

However, your involvement with the child’s family is determined on an individual case by case basis.

What are the requirements?
- In Massachusetts, you need to be at least 18 years of age to become a foster parent.
- You may be single, married, partnered, divorced or widowed to become a foster parent.
- You may have up to six children residing in your home at any given time. This includes birth children, adopted children, foster children, relative’s children, or day care children.
- You may either rent or own your own home.
- However, the living and sleeping quarters must be large enough to provide adequate space, privacy and safety for all household members, as well as comply with other state regulations.
- Your family must have a stable source of income to be able to adequately support all your current household members.
- You can be at home or work.
- Your home needs to meet safety requirements and standards.
- The Department of Social Services will complete a Background Record Check as part of the licensing process.

How long do children stay in foster care?
The average stay is somewhere between three to eighteen months.

The Department of Social Services feels very strongly that children should be with their parents whenever possible and works very hard with the child’s parents to try to help this happen. When this isn’t possible, the Department works to find an alternative, permanent family for the children.

Can I decide the age or gender of the child?
Yes. As part of the licensing process, you and your social worker will decide together which children placed in your home would be the best match for your family.

What is involved in the training to become a foster parent?
The type of training required to become a foster parent will vary.

The most extensive training for foster parents is called “MAPP” – Massachusetts Approach to Partnership in Parenting.

The training is designed to help families understand the difficulty children in foster care face. It also helps families understand how foster parenting will affect your family.

MAPP training offers skills in a number of different areas such as communication, positive discipline and the building of self-esteem.

The training includes in-home interviews that allow the Social Worker to gather family information and get to know you and your family.

Once the training is successfully completed and the interviewing is over, the decision is made to approve you as a licensed foster parent.

What are some of the most important qualities for being a foster parent?
The Massachusetts Department of Social Services is looking for people who feel ready to face the challenge of parenting.

You need to be a good communicator and problem solver; you must be able to express, accept and understand feelings – both yours and the child’s. You need to have the ability to support the physical and emotional needs of a child in crisis. Having a sense of humor will also be helpful to you as a foster parent.

What about medical insurance and other expenses for foster children?
As a foster parent, you are reimbursed for taking a child into your home. This includes a stipend for daily expenses, a quarterly clothing allowance and coverage of the child’s medical expenses.

What support services are available to foster parents?
You will be assigned a Foster Care Social Worker. There will also be a Social Worker assigned to each child placed in your home. There are also other supportive services available to assist you that your Foster Care Social Worker will discuss with you. This includes an after hours, toll free “Helpline”. 
Standards for Agency Foster/Pre-Adoptive Parents

The need is great for families to become foster care and adoption placements for children who enter Agency care or custody. The Department welcomes your expression of interest in becoming a foster or adoptive family for such children. We hope you appreciate our need to ensure that the Department’s children receive the care they deserve from qualified families who are fully prepared for the role they are assuming.

The children in the care and custody of the Department need close and careful supervision. The Agency, therefore, limits the number of children residing and being cared for in any foster or adoptive home, inclusive of child care and babysitting, to no more than 8 children in total, of whom no more than 6 are foster children. As of January 1, 1999, these limits are reduced to 6 and 4. In addition, no more than 2 children age 24 months or younger and no more than 1 infant age 1 month or younger, except for siblings, can be cared for by the foster/pre-adoptive parent.

Standards for Eligibility to Apply

The Department utilizes these standards and those below for foster/pre-adoptive family homes to determine at the outset whether families meet certain basic requirements:

- Any individual providing foster/pre-adoptive care must have reached her/his 18th birthday. The parent of a child to be placed in foster/pre-adoptive care is not eligible to be a foster/pre-adoptive parent for that child. All approved foster/pre-adoptive parents are eligible to receive reimbursement for children placed in their home. This reimbursement is equal to the standard foster care rate for a child of that age.

- All household members, age 14 years and older, must have a record which is free of criminal conduct which, in the judgment of the Department, bears upon the foster/pre-adoptive family’s ability to assume and carry out the responsibilities of a foster/pre-adoptive parent.

- No member of the household is currently, or during the 12 months prior to completion of the “Family Resource Registration of Interest,” has been involved in an open case with the Department, except, with the approval of a clinical review team:
  - to receive services following an adoption legalisation, except those due to a supported 51A;
  - to receive services on behalf of a child for whom a household member is a guardian; or
  - when the household member is the parent of a child to be placed with a kinship family and she/he is also a child under age 18 years who has an open case due to a CHINS petition, a voluntary request for services or a care and protection petition in which she/he is a victim, not a perpetrator.

- No member of the household has been identified as the person alleged to be responsible for abuse or neglect of a child in a supported 51B investigation and the report which identified her/him is referred to the District Attorney.

- No member of the household has a history of involvement with the Department which would bear adversely on the prospective foster/pre-adoptive parent’s ability to assume and carry out foster/pre-adoptive responsibilities.

- The family has stable income for support of current household members.

- The family has a stable housing history and current housing which meets the Department’s physical requirements and currently has sufficient space to accommodate at least one additional household member within the Department’s limits for maximum number of children in the home.

- At least 1 prospective applicant in the household has a basic ability to read and write in English or in the family’s primary language.

- The prospective applicant(s) has sufficient time and availability to be a foster/pre-adoptive parent(s). A foster/adoptive parent may place a foster/adoptive child in work-related child care for no more than 50 hours per week for a preschool age child or 25 hours per week for a child in grade one or up.

- The prospective applicant(s) is a US citizen or a qualified, documented alien.

Standards for Foster/Pre-Adoptive Family Homes

- Home must be clean, safe, free of obvious fire and other hazards, and of sufficient size to accommodate comfortably all members of the household and the approved number of foster/pre-adoptive children.

- Home must have safe and adequate lighting, ventilation, hot and cold water supply, plumbing, electricity and heat.

- Home must be furnished with a refrigerator and cooking stove in safe working condition.

- No foster/adoptive child over age one year shall share a bedroom with an adult.

- No foster/adoptive child over age 4 years, except for siblings up to age 8 years, shall share a bedroom with a child of the opposite sex.

- Home must have sufficient furniture to allow each child to sleep in a separate bed and have adequate storage space for her/his belongings.

- Home must have bedrooms which provide at least 50 square feet per child; the Department may waive this requirement for kinship homes if the bedrooms provide at least 35 square feet per child for the 30 working day period during which the full assessment is completed and assists the family in obtaining a long-term waiver from OCCS.

- No bedroom to be used by foster/adoptive children shall be located above the second floor unless any such floor has 2 safe means of egress.

- No bedroom to be used by foster/adoptive children shall be located below the first floor unless it contains a ground level, standard door exit and at least one operable window.

- The home shall be equipped with smoke detectors in working order on every floor, including the basement.

- If well water is used, it shall be tested and determined safe, and a report of the test results furnished to the Department.

- The home must not have any household member, alternative caretaker or frequent visitor who would, in the judgment of the Department, pose a threat of abuse or neglect to children placed in the home, or would impede or prevent the provision of adequate foster/pre-adoptive care in the home.

- The family has a working telephone in the home for both incoming and outgoing calls.

- Any firearms located in the home shall be registered and licensed in accordance with state law. All firearms shall be trigger-locked or fully inoperable and stored without ammunition in a locked area. Ammunition shall be stored in a separate locked location.

- Any home that is used for family child care must be in compliance with the requirements of OCCS, as set forth in 102 CMR 8.07 – 8.09.
Standards for Approval/Licensing

After being determined eligible to apply, families complete an application and begin a family resource assessment, during which the Department evaluates whether the family and home meet the following standards:

- Foster/adoptive parent(s), through the successful completion of the Department’s assessment and of the approved foster/adoptive family pre-service training program specified for each type of approval/licensing, must demonstrate skill in parenting and providing substitute care including the following:

1. The physical and emotional stability and well-being to assure that a child placed in her/his care will experience a safe, supportive and stable family environment which is free from abuse and neglect.
2. The ability to assure that a child placed in her/his care will be provided with adequate food, clothing, shelter, supervision and other essential care at all times.
3. The ability to assure that a child placed in her/his care will be provided with routine and emergency medical and dental care.
4. The ability to assure that a child in her/his care will be expected to attend school regularly and will be provided with the opportunity to participate in an educational program and extracurricular activities which meet her/his needs.
5. The ability to promote the physical, mental and emotional well-being of a child in her/his care.
6. The ability to draw upon community and professional resources as needed.
7. The ability to transport children within current legal standards set by state law.
8. The ability to respect the integrity of a foster/adoptive child’s racial, ethnic, linguistic, cultural and religious background.
9. The ability to manage the stressful situations which are frequently associated with the placement of a child such as the temporary nature of the placement, the integration of a child in crisis into the family, and the potential return of the child to his/her family.
10. The ability to assist the foster/adoptive child in handling their situation, such as removal from the home of the parent(s); placement in a new home environment, including a new school (when applicable); visits with parents and siblings; and possible return to the home of the parent(s) or placement in other substitute care.
11. The ability to deal with difficult issues in the foster/adoptive child’s background and to be able to talk with the child comfortably and constructively about her/his birthparents and family.
12. The ability to have reasonable expectations of foster/adoptive children’s behavior and potential growth.
13. The ability to respect and be bound by the same standards of confidentiality as the Department and its employees.
14. The ability to accept and support the foster/adoptive child’s relationship with her/his parents and the Department.
15. The ability to work with the Department and the foster/adoptive child’s parents in implementing the child’s service plan in order to meet developmental goals and outcomes.

- Foster/adoptive parent applicants must be free of any physical, mental or emotional illness which, in the judgment of the Department would impair her/his ability to assume and carry out the responsibilities of a foster/adoptive parent. No handicap in and of itself shall disqualify an individual from eligibility as a foster/adoptive parent.

- Foster/adoptive applicants must not provide, or seek to provide, foster/adoptive care to a child solely for the purpose of applying for or receiving fees, income or other benefits from public or private sources for anyone other than the foster/adoptive child.

Following completion of the written assessment, all foster/adoptive parent(s) will enter into An Agreement Between the Massachusetts Department of Social Services and Foster/Adoptive Parents. This agreement will indicate the type of approval the foster/adoptive family received according to the categories below:

- kinship,
- child-specific, or
- unrestricted.

Unrestricted foster/adoptive families are issued a license. All foster/adoptive families are re-evaluated using these standards, as well as the Department regulations and policy, on a regular basis. Licenses are renewed every 2 years.
Beyond this, the families are an important resource for achieving these goals. Foster/adoptive families provide a healthy setting for a child until he or she can either return home or, if necessary, be placed in an alternate permanent home.

The Department of Social Services agrees to:

1. Provide the family with sufficient information about a child who is in DSS care or custody, prior to placement, so that he or she can knowledgeably determine whether or not to accept the child, and to provide the foster/adoptive family with sufficient ongoing information about the child who is in DSS care or custody to enable the foster/adoptive family to provide adequate care to that child and to meet the individual needs of that child.

2. Provide the foster/adoptive family with relevant training programs.

3. Assign a social worker who will be responsible for providing direct service to the child who is in DSS care or custody (and her/his biological family), supporting her/his placement with the foster/adoptive family, and visiting the child and the foster/adoptive family at least once a month.

4. Assign a family resource worker who will be responsible for providing critical support to the foster/adoptive family; conducting evaluations; and preparing documentation as required by policy, including documentation of any significant changes in the home, such as: addition of a new household member; death; serious illness or serious injury of a household member; separation or divorce of the foster/adoptive parents; loss of employment by a foster/adoptive parent or head of household; reduction of foster/adoptive family income; loss of foster/adoptive parent’s qualified citizenship status; or changes in the residence. (Any significant change will be immediately communicated to the child’s social worker.) The family resource worker will contact the foster/adoptive family monthly during the probationary period (i.e., the first six (6) months after approval/licensing), will visit the home monthly following the placement of a child in the home, and will visit every other month after the probationary period has ended.

5. Involve the foster/adoptive family in the planning and implementation of services for the child in her/his care. The Service Plan will identify the goal, outcome/type of changes needed, and tasks/services (with related completion dates) for the family, the Department, and other parties, including the foster/adoptive family. The foster/adoptive family signs and is provided with a copy of the Service Plan.

6. Invite the foster/adoptive family to Foster Care Reviews and other case conferences.

7. Inform the foster/adoptive family of the range and frequency of payments she/he will receive for the care of a child who is in DSS care or custody.

8. Provide the foster/adoptive family with a Medical Passport for each child who is in DSS care or custody placed in the home and ensure that each child’s medical and dental expenses are covered.

9. Delegate to the foster/adoptive family the right to arrange for and authorize routine medical and dental care for a child who is in DSS care or custody placed with the foster/adoptive family.

10. Delegate to the foster/adoptive family the right to authorize appropriate school-related activities such as registration and field trips for a child placed with the foster/adoptive family.

11. If the parent of a child in DSS care or custody will not be serving as the educational decision maker for her/his child, arrange for the foster/adoptive parent to serve as the child’s educational decision maker for special education or early intervention services, including, when necessary, recommending the foster/adoptive parent to the Department of Education or the Department of Public Health, respectively, for appointment as an Educational Surrogate Parent, when it would be in the best interests of the child.

12. Recognize the foster/adoptive family’s right to maintain the foster/adoptive family’s child-rearing practices, as long as these do not conflict with Departmental regulation or policy, or the needs of the child.

13. Make available to the foster/adoptive family the Department’s reviews or re-evaluations of the foster/adoptive family, upon request by the foster/adoptive family.

14. Supply the foster/adoptive family with information on the procedures for requesting review of Departmental decisions, filing a complaint through a grievance, requesting a Fair Hearing, the process for closing a foster/adoptive home, and the process for removing a child who is in DSS care or custody from a foster/adoptive family.

15. Provide limited amounts of reimbursement, secondary to other primary insurance (such as homeowner’s), for reimbursement on account of theft of or damage to the foster/adoptive family’s property that is the result of deliberate, malicious action by a child who is in DSS care or custody.

16. Notify the foster/adoptive family if the Department decides to pursue legal guardianship or adoption for a child placed with the foster/adoptive family, and afford the foster/adoptive family adequate opportunity to apply to become the legal guardian or adoptive parent for that child.

17. Notify the foster/adoptive family, in writing including the reason(s), at least ten (10) calendar days in advance of a decision to remove a child from the foster/adoptive family, except when the Area Director has determined that the child’s physical, mental, or emotional well-being would be endangered by remaining in the home; and within three (3) working days after a decision is made to close the foster/adoptive home.

18. Ensure that a plan is developed with the foster/adoptive family for the care of a child who is in DSS care or custody during any extended absences of the foster/adoptive family.

19. Make available to the foster/adoptive family a Payment Assistance Line [(PAL) 1-800-632-8218], which the foster/adoptive family can call for help in resolving long-standing payment problems, after the foster/adoptive family has tried to resolve them with the Area Office.

20. Make after-hours assistance available to the foster/adoptive family through the MSPCC Kid’s Net Connection (1-800-486-3730).
The Foster/Adoptive Family Agrees, for each child placed in his/her home, to:

1. Promote the physical, mental, and emotional well-being of the child as well as assist the child in maximizing his or her potential.
2. Meet the child’s individual needs related to her/his racial, ethnic, linguistic or cultural background, encouraging an understanding and appreciation of this heritage.
3. Support the reunification of the child and family, or an alternative permanent plan as indicated on the Service Plan.
4. Permit and support visits between the child and the child’s individual needs related to her/his educational decision maker for special education or early intervention services, respectively.
5. Not use any physical punishment upon any child who is in DSS care or custody.
6. Participate fully in the implementation of the child’s Service Plan, including goal development, and tasks for the child and foster/adoptive family, and participate in Foster Care Reviews and other case conferences.
7. Maintain confidentiality in all matters concerning the child and his/her family. (Foster/adoptive families are bound by the same standards of confidentiality as the Department and its employees.)
8. Participate in pre-service and in-service training programs as required by the Department.
9. Schedule appointments for the child’s routine health care and dental care and any needed follow-up and ensure that these appointments are kept.
10. Advise the child’s social worker of changes in the child’s health, status, of medical and dental care received, and of recommendations made; any recommendation regarding the use of restraints by medication or artificial means must be brought to the attention of the family resource worker in addition to the child’s social worker.
11. Hold the child’s Medical Passport; request written documentation from medical providers for inclusion in the passport; and submit encounter forms to the child’s social worker.
12. Arrange for emergency medical treatment when necessary.
13. Provide, or support the provision of, needed specialized medical or dental care as specified in the Service Plan.
14. Authorize appropriate general school-related activities such as registration and field trips and notify the Department of educational activities authorized for the child.
15. When requested by DSS, or appointed by the Department of Education or Department of Public Health, serve as the child’s educational decision maker for special education or early intervention services, respectively.
16. Immediately report to the Family Resource Unit all significant changes in the home, such as: addition of a new household member (other than the placement of a child who is in DSS care or custody); death, serious illness, etc.; of a household member; separation or divorce of the foster/adoptive parents; loss of employment by a foster/adoptive parent or head of household; reduction of foster/adoptive family income; loss of foster/adoptive parent’s qualified citizenship status; and any other change that affects the ability of the foster/adoptive family to conform to DSS standards.
17. Immediately report to the Family Resource Unit any new individual who will care on a regular basis for a child who is in DSS care or custody.
18. Advise the Area Office of the foster/adoptive family’s affiliation with any other child-placement agency.
19. Ensure that additional placements of foster/pre-adoptive children by another agency will not be undertaken without the clear understanding and approval of the Area Office.
20. Notify the Department of a change in the structure or location of the foster/adoptive family’s residence at least sixty (60) days in advance, or at the earliest possible time.
21. Notify the Department of a change in the home telephone number.
22. Notify the Department of any vacation or trip that would result in the foster/adoptive family’s overnight absence from their usual place of residence.
23. Obtain Department consent before taking a child who is in DSS care or custody out of the state.
24. Give up care of the child to no one other than the Department, or a person or agency designated by the Department, unless ordered to do so by a court of competent jurisdiction.
25. Give the Department at least ten (10) working days’ notice if removal of the child from the foster/adoptive family is desired, except when immediate removal is necessary to ensure the life, health, or emotional well-being of the child or of foster/adoptive family household members.
26. Notify the Department immediately if he/she knows, or reasonably believes that a child placed in the home intends to run away, and notify the Department and the local police immediately, if the foster/adoptive family learns that the child has run away or is missing. The foster/adoptive family should call the Department’s HOTLINE (1-800-792-5200) after hours, if necessary.
27. Notify the Department of any overpayment made on the child’s behalf by DSS to the foster/adoptive family. Any overpayment will be deducted from a future payment. If there is no future payment, the foster/adoptive family is required to contact the PAL Line (1-800-632-8218) to arrange for return of the overpayment.
28. Ensure that any firearms located in the home are registered and licensed in accordance with state law; are trigger-locked or fully inoperable and stored without ammunition in a locked area; and that ammunition is stored in a separate, locked location.
29. Maintain insurance (homeowner’s, etc.) to cover damage to or loss of the foster/adoptive family’s property, caused by a child who is in DSS care or custody. Such insurance shall be the foster/adoptive family’s primary insurance.
30. Make efforts to maintain the child’s personal belongings.
31. Comply with Department regulations and policies, including the standards for serving as a DSS foster/adoptive family.