

Reporting Requirements for Foster Parents and Respite Care Providers

WAC 388-148-0120 What incidents involving children must I report? (1) You or your staff must report the incidents contained in WAC [388-148-0120](#)(2), as soon as possible and in no instance later than forty-eight hours to your local:

- (a) Children's administration intake staff, and
 - (b) The child's social worker or case manager.
- (2) The incidents to be reported include:
- (a) Any reasonable cause to believe that a child has suffered child abuse or neglect;
 - (b) Any violations of the licensing or certification requirements where the health and safety of a foster child is at risk and the violations are not corrected immediately;
 - (c) Death of a child;
 - (d) Any child's suicide attempt that results in injury requiring medical treatment or hospitalization;
 - (e) Any use of physical restraint that is alleged improperly applied or excessive;
 - (f) Sexual contact between two or more children that is not considered typical play between preschool age children;
 - (g) Any disclosures of sexual or physical abuse by a child in care;
 - (h) Physical assaults between two or more children that result in injury requiring off-site medical attention or hospitalization;
 - (i) Physical assaults of foster parent or staff by children that result in injury requiring off-site medical attention or hospitalization;
 - (j) Any medication that is given incorrectly and requires off-site medical attention; or
 - (k) Serious property damage or other significant licensing requirement that is a safety hazard and is not immediately corrected or may compromise the continuing health and safety of children.
- (3) You or your staff must report the following incidents as soon as possible or in no instance later than forty-eight hours, to the child's social worker, if the child is in the department's custody or to the case manager if placed with a child-placing agency program:
- (a) Suicidal/homicidal ideations, gestures, or attempts that do not require professional medical treatment;
 - (b) Unexpected health problems outside the anticipated range of reactions caused by medications, that do not require professional medical attention;
 - (c) Any incident of medication incorrectly administered;
 - (d) Physical assaults between two or more children that result in injury but did not require professional medical attention;
 - (e) Runaways;

- (f) Any emergent medical or psychiatric care that requires off-site attention; and
 - (g) Use of prohibited physical restraints for behavior management as described in WAC [388-148-0485](#).
- (4) Programs providing care to medically fragile children who have nursing care staff on duty may document the incidents described in WAC [388-148-0120](#) (3)(b)(c) in the facility daily logs, rather than contacting the social worker or case manager, if agreed to in the child's ISSP.

WAC 388-148-0350 What are the requirements for obtaining consent for medical care for children under my care? (1) In general, the department is the legal custodian of a child in foster care. The department has the authority to consent to emergent and routine medical services on behalf of the child. The department delegates some of that authority to out-of-home placement providers (both foster parents and facility-based programs). You must contact the child's social worker or children's administration intake (emergency placements) for specific information for each child.

- (2) In case of medical emergency, contact children's administration intake as soon as possible.
- (3) If you care for children in the custody of another agency, tribal court or other court you must follow the direction of that agency or court regarding permission to provide consent for medical care.

I will comply with the above reporting requirements while providing respite care for
_____.

I have been provided with the above-named child's "Information Required for Respite Care" form.

Respite Care Provider

Date Signed

Respite Care Provider

Date Signed

