

Medical Foster Care Parent Job Description

Medical Foster Care Parent Responsibilities

1. The MFC parent will be at least 25 years old, be a high school graduate, have stable housing, an income or potential income other than from children placed in care, a telephone, vehicle to provide transportation for the foster children, and insurance for the vehicle.
2. The MFC parent will comply with all licensing requirements, will successfully complete Professional Parenting training, will take the 40 hour MFC training and will be First Aid & CPR certified and will have a TB test and Hepatitis B vaccination or signed declination.
3. The MFC parent will complete the DOH Information & Security and HIPAA training.
4. The MFC parent will provide a safe, loving home environment for up to three children that they agree to accept for placement.
5. The MFC parent will provide each child with his own bed/crib, but the child may share a room with the parents (if under 1 year) or with other children per the Department of Children & Families guidelines.
6. The MFC parent will carry out all of the orders as outlined in the child's care plan.
7. The MFC parent will be responsible for all required documentation which will include, but not be limited to: progress notes, flow sheets, telephone & visitation logs, diet histories and monitor event logs.
8. The MFC parent will be responsible for taking each MFC child to all their medical appointments, therapies, weigh-ins, and visits with the biological family.
9. The MFC parent will immediately report to their assigned MFC nurse, the on-call MFC nurse or the program director any change in the child's medical condition, and/or any problem with equipment, medication, or treatments. Problems with the child's behavior, concerns about the biological family or problems with other professionals will be reported as soon as possible to the social worker, assigned MFC nurse, or program director.
10. The MFC parent will fill all prescriptions the day they are received unless instructed otherwise by the doctor or MFC nurse.
11. The MFC parent will be available for visitation with the child and biological family in their (the foster parent's) home, in the MFC office or other location as determined by DCF and/or MFC at least once/week or more often as determined by the court.
12. The MFC parent will always be respectful toward the biological family, regardless of the social circumstances.

13. The MFC parent will provide training in conjunction with the MFC nurse for the biological family in a patient and courteous manner. Adaptations in training methods will be made to accommodate any limitations the family members may have.
14. The MFC parent will assist each child and their family with transition when the child is ready for discharge. The MFC parent is encouraged to voice any concerns regarding placement to the MFC professionals, but will never interfere with the transition or placement once the decision is made.
15. The MFC parent will abide by the laws of confidentiality, will avoid discussing case information in front of the child, and will never say anything derogatory about the biological family in front of the child.
16. The MFC parent will attend all CMAT staffings on children in their home.
17. The MFC parent will be available for home visits from the MFC staff, DCF/ECA counselor, and other professionals working with the children in their homes.
18. The MFC parent will attend monthly training provided by the MFC program.
19. The MFC parent will comply with all policies and procedures as outlined in the MFC Policy & Procedure Manual.

Medical Foster Care Staff Responsibilities:

1. The MFC staff will provide training and assistance to the foster parent on a regular basis and whenever requested.
2. The MFC staff will arrange and provide monthly training to help each foster parent obtain their required 12 hours of training per year.
3. The MFC staff will be available 24 hours/day and 7 days/week for assistance and support.
4. The MFC nurse will perform a nursing assessment on each child in placement at least every six months.
5. The MFC SW will visit each MFC home quarterly to assess any psychosocial concerns and to document compliance in the home environment.
6. A MFC staff member will make a home visit each month when there are MFC children in the home.
7. The MFC staff will include the foster parent in setting goals and making decisions regarding the child and his/her family.
8. The MFC staff will act as a liaison between the foster parent, the biological family, the doctors and other professionals as needed.