WAC Set #5

New definition: "Over-the-counter medication" means a drug that can be obtained without a prescription and is not restricted to use by a licensed health care provider, such as herbal supplements, vitamins, eye drops, ointments, and pain relievers.

110-148-1565

Medication storage.

Foster homes must store medication as follows, keep:

- (1) Prescription and over-the-counter medications in a locked container;
- (2) The key or combination to the lock inaccessible to children and youth; and
- (32) Life-saving medications accessible in an emergency.

110-148-1575

Administering medication.

Foster parents administering medication must:

- (1) Keep a written record of all prescription <u>and over-the-counter</u> medications given to children and youth in care that:
 - (a) Includes the dates given; and
 - (b) Stays with the child or youth when they leave the home;
 - (2) Notify children's and youth's caseworkers of changes in prescribed medications;
- (3) Give prescription and over the counter medications, including herbal supplements and remedies, vitamins, or minerals as directed by:
 - (a) The person legally authorized to prescribe the medication; or
 - (b) The medication label; and
 - (4) When giving children nonprescription over-the-counter medications and:
 - (a) As directed by the medication label Follow product instructions; and
 - (b) In consultation with children and youth appropriate to their developmental

<u>capabilities</u>Seek medical advice regarding possible interactions with children's or youth's other prescription and nonprescription medications.

110-148-1580

Children and youth taking their own medications.

Foster parents may allow children and youth to take their own <u>prescription and over-the-counter</u> medications as long as:

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Commented [EF1]: Intent of WAC:

 Prevent child misusing medications by securing them so they cannot be accessed.

Commented [EF2]: Intent of WAC:

- Track medication administration to prevent errors and provide a clear record of care.
- Follow medication label/prescription.

Commented [EF3]: Intent of WAC:

•To give foster parents guidance on when youth can take their own medications and what approval procedures must be followed prior of youth self-administering medications.

(1) They are physically and mentally capable of have the developmental capability to properly
take ing the medication;
(2) Foster parents:
(a) eObtain and keep written approval in their the child's or youth's well-being file from
the caseworker except for youth 18 years old or older who consent to their own medical care from:; and
(a) The child's or youth's licensed health care provider; and
(b) The caseworker; and
(b) Monitor that the child or youth is taking the medication according to the prescription
or manufacturer's instructions, include proper amount and frequency;
(3) The medication and medical supplies are kept locked or inaccessible to unauthorized persons
<u>110-148-1600</u>
Respite care.
(1) Foster parents may arrange for respite care as a substitute care if they are absent or require

- (1) Foster parents may arrange for respite care as a substitute care if they are absent or require support as part of a child's case plan.
- (2) Foster parents must seek approval from children's or youth's representatives or CPA licensor prior to using respite care.
 - (3) Respite care providers must:
 - (a) Have a foster care license to provide respite care in their own home; or
- (b) Be certified to provide respite care by the department prior to providing respite care in another foster home.

110-148-1605

Supervision when foster parents are not home.

(1) Foster parents may arrange for substitute care if they are absent or require support to
provide supervision for children and youth in care. Substitute care includes:
(a) Respite care that is more than 11 hours;
(b) Babysitting in the foster home up to 11 hours, which is provided:
(i) On an ongoing and regular basis; or
(ii) Occasionally up to three times per year;
(c) Emergent or unplanned care up to 11 hours;
(2) Foster parents using substitute care must:
(a) Meet with the substitute care provider and review the expectations regarding
supervision and discipline of children and youth in care; and
(b) Provide the substitute care provider with:
(i) Any special care instructions; and
(ii) Their contact information in case of an emergency.
(3) Foster parents must only use respite care when it is:
(a) Approved by the child's or youth's caseworker or CPA licensor prior to beginning
respite care; and
(b) Provided:
(i) In the respite care provider's home if they are licensed for foster care; or

Commented [EW4]: This is being added to 110-148-1605

Commented [EF5]: Intent of WAC:

•To give guidelines to foster parents as to who can supervise children in out of home care when foster parents are not present. (ii) In the foster home by a certified respite care provider who meets the same age, training, and TB screening requirements for members of the household outlined in WAC <u>110-148-1320</u> (2) and (4);

_(4) Foster parents using:

(a) Babysitting on an ongoing or regular basis must verify the substitute care:

(i) Is approved by the children's and youth's caseworkers in writing;

(i) Has passed a background check; and

(ii) Meets the same training and TB screening requirements for members of the household outlined in WAC <u>110-148-1320</u> (2) and (4).

(b) Occasional babysitting must verify the substitute care provider has passed a background check; and

(c) Emergent or unplanned care must follow prudent parenting when selecting a substitute care provider as outlined in RCW 74.13.710.

(5) Foster parents may allow:

(a) Youth age sixteen years old or older to provide babysitting on an occasional, ongoing, or regular basis for three or fewer children in care as long as they meet the other requirements of this section; and

(b) Youth in care to provide babysitting on an occasional, ongoing, or regular basis for children and youth not in foster care, except that youth that have been identified as sexually aggressive or physically assaultive or aggressive must not babysit children and youth.

_____(6) Children's or youth's caseworkers may require the substitute care provider to have additional skills or training based on their <u>specific needs.</u>

110-148-1610

Supervising children and youth, including around bodies of water.

Foster parents must provide and arrange for adult supervision that is appropriate for the age and developmental capabilities of children and youth in care, including:

(1) For each child and youth in care:

(a) Providing personal attention to meet their safety and well-being needs;

(b) Using their knowledge of each child's and youth's developmental capabilities to:

(i) Mitigate unsafe or unhealthy events or actions; and

(ii) Intervene in unsafe or unhealthy events or actions as soon as possible;

(c) If and additional supervision isas needed:

(i) Follow and required by the any supervision plans from the department; and

(ii) Advise the caseworker if a supervision plan must be created or updated; and

(iii) Keep a copy of the supervision plan in each impacted child's or youth's well-

being file as outlined in WAC 110-148-1405;

(b) Advising children's and youth's caseworkers about their:

(i) General supervision plan; and

(ii) Supervision plan while working outside the home, if applicable;

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- •Supervision requirements of children and youth in care
- •Follow prudent parenting guidelines when engaging in motorized activities
- •Supervision requirements of children and youth in and around bodies of water

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(2) When supervising young children, not doing any of the followingthe supervising adult must not:

(a) Leaveing children age birth through four years old or children with developmental

(a) Leaveing children age birth through four years old or children with developmental disabilities unattended in a bathtub or shower; or

 (b) Useing cribs, bassinets, cradles, playpens and swings as a substitute for supervision or one-on-one play;

(3) You are encouraged to obtain and follow a written supervision plan for every child in your care from the child's DCYF caseworker or CPA case manager and tribal ICW case manager.

- (3) Following the prudent parenting guidelines outlined in RCW 74.13.710 when engaging in motorized activities;
- (4) Using and maintaining water-based recreation devices according to manufacturer's recommendations;
 - (5) When supervising children and youth around bodies of water:
 - (a) Swim only in designated swimming areas;
 - (b) Require the use of U.S. Coast Guard-approved personal floatation devices as follows:

 (i) For all children and youth in care when riding on a water-based recreation

device; and

(ii) For children age birth through 12 years old when swimming outside the supervision of a lifeguard;

(c) Verify supervision is provided when children age birth through 14 years old are swimming as follows:

(i) Supervision must be provided by either:

(A) An adult with current age-appropriate first aid and CPR training and:
(I) Water safety certification; or

(II) Who knows how to swim, how to use rescue equipment, and

have it with them; or

(B) A lifeguard; and

(ii) Children age birth through four years old must be within touching distance of a supervising adult or their birth parent

(d) Youth age 15 and older may swim unsupervised in designated swimming areas if they know how to swim.

110-148-1615

Disciplining children and youth.Behavior management.

Foster parents disciplining children and youth-must meet the following requirements for behavior management:

- (1) Use <u>discipline-behavior management methods</u> that <u>areis</u> appropriate to <u>their-children's and youths'</u> age and developmental capabilities;
- (2) Establish limits and use positive methods of guidance that promote self-control, self-responsibility, self-direction, self-esteem, and cooperation; which may include:

(a) Directing them to another activity;

- (b) Giving choices when appropriate;
- (c) Time out as a method of guidance, allowing them time to change their behavior;
- (d) Planning in order to prevent problems; and
- (e) Using positive reinforcement and encouraging them to express their feelings and

ideas

(3) Not use any of the following as behavior management methods:

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Commented [EW9]: Subsections (4) and (5) have been moved to this section from 110-148-1455.

Commented [EF10]: Intent of WAC:

•To give foster parents guidance on appropriate and positive methods of behavior management

Commented [EW11]: There were many questions about the examples provided and suggesting changes or addition to examples. The NRM team recommends taking the examples out to avoid confusion and allow flexibility to different situations and as methods change.

(a) Corporal punishment;
(b) Withholding of food;
(c) Chores or physical labor;
(d) Withholding approved contact with a child's or youth's family, fictive kin, or tribal
community, unless the withholding is approved by the caseworker for the department or tribal child or
youth, or the parent of the community child or youth;
(e) Administering medication other than as prescribed or recommended by the
manufacturer;
(f) Any behavior management methods that:
(i) Are:
(A) Verbally abusive;
(B) Neglectful;
(C) Humiliating;
(D) Intimidating; or
(E) Frightening;
(ii) Interfere with a child's or youth's:
(A) Basic needs; or
(B) Need for necessary services including contact with their:
(I) Caseworker;
(II) Attorney; and
(III) Guardian ad litem; and
Not use physical punishment or verbally abusive, neglectful, humiliating, or frightening punishment
which includes, but is not limited to:
(a) Spanking;
(b) Cursing;
(c) Threats, humiliation or intimidation; and
(d) Locked time-out rooms or methods that interfere with their basic needs, including
withholding of food:

110-148-1620

Use of restraints.

to a child or youth; and

- (1) Foster parents may use physical restraint when children's or youth's behavior poses an immediate risk to physical safety, as long as the use is:
 - (a) Reasonable; and

withcreated with the licensor at the time of initial or renewal licensing.

- (b) Necessary to:
 - (i) Prevent the child or youth from harming themself or others; or

(4) Maintain responsibility for behavior management and must not delegate that responsibility

(65) Develop and fFollow athe written behavior management plan for disciplining children

- (ii) Protect property from serious damagethe home from structural damage.
- (2) Foster parents must:

Commented [EF12]: Intent of WAC:

 Requirements on when physical restraints can be used, what physical restraints are not allowed, and protocols for follow-up after physical restraint is used.

(i) Mechanical restraints such as handcuffs and belt restraints unless ordered by a licensed health care provider; (ii) Physical restraint that restrict breathing, inflict pain to manage behavior, or are likely to cause injury that is more than temporary; (iii) Restriction of movement by placing pressure on joints, chest, heart, or vital organs; (iv) Sleeper holds; (v) Arm twisting; (vi) Hair holds; (vii) Choking or putting arms around the throat; or (viii) Chemical restraints, such as pepper spray, (ix) Restriction of movement within a physical location, such as a locked room-(b) After using physical restraint: (i) Document the use; (ii) Send a copy of the documentation to the child's or youth's caseworker and licensor within 48 hours as outlined in WAC 110-148-1420; and (iii) Keep a copy of the documentation on the premises; (c) Not use physical restraint of a child or youth on a regular basis without: (i) Get Prior prior approval when using physical restraints on a regular basis from: (i) Iin writing from the child's or youth's caseworker through their supervision plan; and (ii) Verbally or in writing from the department. (ii) Receiving training using a behavior management training approved by the department prior to use.