

Foster Parent Questionnaire

| Interview Details | |
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| Program name: | Interviewer: |
| Name of foster parent(s): | Date/time of interview: |
| Date foster parent(s) began working with UAC program: | Licensed bed capacity: |

*Note: Before beginning the interview and/or providing this questionnaire to foster parents, provide a brief introduction, including monitor role and purpose of monitoring visit, confidentiality of interview, and clarify any questions. See *Introduction Prompt for Staff* for additional guidance as needed.

| | NOTES |
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| Tell me about your role and main responsibilities as a foster parent. | |
| Why did you choose to become a foster parent through this agency? | |
| Do you like being a foster parent? What is the best part about being a foster parent? What is the most challenging part about being a foster parent? | |

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to allow ORR Monitoring Team staff to interview and document responses from foster parents during biennial site visits. Public reporting burden for this collection of information is estimated to average 0.75 hour per response (plus an additional 0.75 hour if the site visit is performed by a contractor monitor), including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a mandatory collection of information (Homeland Security Act, 6 U.S.C. 279). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. If you have any comments on this collection of information please contact UACPolicy@acf.hhs.gov.

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| <p>What information did you receive about UAC and the UAC program when you became a foster parent?</p> <ul style="list-style-type: none"> • Do you think the information you received adequately prepared you to work with this population? | |
| <p>Has the training you have received adequately prepared you for your role as a foster parent? If not, please explain.</p> <p>Are there additional trainings you think would be beneficial for foster parents to receive?</p> | |
| <p>Tell me about the foster parent meetings.</p> <ul style="list-style-type: none"> • How often are meetings held? • Whom do you meet with? • How can foster parents provide feedback to the program? • Are program staff helpful when you request support/assistance? | |
| <p>Does the program provide opportunities to participate in foster parent support groups? If so, what topics are covered during the meetings?</p> | |
| <p>Tell me about how you typically handle behavior problems in the home.</p> <ul style="list-style-type: none"> • Do you have established foster home rules that have been provided to the children in your home? • What kind of discipline do you use with the children? • Are you allowed to use restraints? Please elaborate. • How does the program help you handle behavior problems? | |

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| What does <i>trauma-informed care</i> mean to you? | |
| How many kids do you care for on a regular basis? Do you care for any non-UAC children (ex. URM, home daycare, domestic foster care)? | |
| What information did you receive on the UAC prior to his/her placement in your home? Were you provided with a pre-placement call? | |
| How has the child (or children) in your home adapted to foster care life? | |
| Tell me about the home visits from case managers or other program staff. <ul style="list-style-type: none">• How often do staff make home visits?• What happens during these visits? | |
| Are you involved and/or provided updates on UAC service plans (education, recreation, independent living/post-18, mental health, etc.)? If so, please explain. | |
| What types of activities do UAC participate in (i.e. recreational, leisure, religious etc.)? <ul style="list-style-type: none">• Tell me about activities you have done with the UAC this week. | |

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| <p>Do you receive a stipend for each child? Is the stipend sufficient to cover all necessary costs?</p> <ul style="list-style-type: none"> • Do you receive the stipend on time? | |
| <p>How would you handle medical/mental health issues with UAC in the home?</p> <ul style="list-style-type: none"> • With whom would you talk to and how would you respond to the concern? • How would you address a mental health emergency or crisis situation in home (ask for examples)? | |
| <p>If a child in your home needed to report abuse or maltreatment, how would they report it (i.e. access to landline/cell phone etc.)?</p> | |
| <p>What do you see as the strengths of the foster care program? What do you see as an area of improvement?</p> | |
| <p>What recommendations do you have for ORR that I can take back to share with our headquarter teams?</p> | |

Additional Notes

Enter Additional Notes.

