

CareCertify LLC

Foster Care Training Series

FC-05

Safety & the Foster Home Environment

Participant Guide

Foster Care Training Series · Audience: Foster Parents · Agency Staff · Treatment Foster Care Providers · CE Hours: 1.0

A Safe Home Is the Foundation

Children come into foster care having already experienced harm, and a safe home is the foundation of their healing. Physical safety, supervision matched to each child, and readiness for emergencies aren't bureaucratic boxes — they're how you keep vulnerable children from further harm.

This guide covers home safety, supervision, safe sleep, securing hazards, and emergency and transportation safety. Prevention and preparedness, adjusted to each child's age and needs, keep children safe.

Learning Objectives — by the end of this module you will be able to:

- Apply home safety standards
- Provide supervision matched to age and need
- Apply safe sleep and SUID/AHT awareness
- Secure medications, hazardous materials, and dangerous items
- Prepare for emergencies and transport children safely

Section 1: Home Safety Standards

A foster home must be clean, well-maintained, and free of hazards, meeting licensing safety standards — working smoke and carbon-monoxide detectors, safe exits, safe heating, and more. Just as importantly, adjust the home to the actual ages and needs of the children placed with you. A safe, prepared home is the foundation on which a child's healing is built.

Section 2: Supervision Matched to Age and Need

Supervision isn't one-size-fits-all — match it to each child's age, development, behavior, and needs. Younger children and those with higher needs (medical, behavioral, or safety risks to themselves or others) require closer supervision. Know each child's history and risks, and never leave a child unsupervised beyond what's safe for them. Good supervision prevents most injuries and incidents.

Section 3: Safe Sleep, SUID, and Abusive Head Trauma

For infants, safe sleep prevents sudden unexpected infant death (SUID): place babies on their backs to sleep, alone, in a safe crib with a firm mattress and no soft bedding, bumpers, pillows, or co-sleeping. Never shake an infant or young child — abusive head trauma (AHT) can cause death or permanent injury, and crying is a

common trigger; if you're overwhelmed, it's safe to place the baby in the crib and step away to calm down. Minn. Stat. 142B.47 requires SUID and AHT training for caregivers of children through age five.

Never shake a baby

Crying is normal and can be frustrating. If you feel overwhelmed, put the baby down safely and step away. Shaking causes abusive head trauma — never do it.

Section 4: Medication and Hazardous-Material Safety

Store all medications — prescription and over-the-counter — locked and out of children's reach, and give them per the plan (covered in FC-09). Secure cleaning supplies, chemicals, alcohol, and sharp or dangerous items, and keep small choking hazards away from young children. Know the Poison Control number (1-800-222-1222). Many serious injuries to children come from accessible medications and household hazards.

Section 5: Water, Fire, and Firearm Safety

Some hazards are especially dangerous. Never leave young children unsupervised near water — bathtubs, buckets, pools — as drowning is fast and silent. Maintain smoke and carbon-monoxide detectors and have a practiced fire escape plan. Firearms, if present, must be locked, unloaded, and stored separately from ammunition, per licensing requirements. Follow all rules for dangerous items; these standards prevent tragedies.

Section 6: Emergency Preparedness

Be ready before an emergency. Have and practice a plan for fire, severe weather, and medical emergencies, and keep emergency numbers, first-aid supplies, and important information accessible. Know each child's medical needs, allergies, and medications, and know how to reach the agency, caseworker, and emergency services. Preparation lets you act calmly and protect children when it matters most.

Section 7: Transportation Safety

Transport children safely: use the proper car seat, booster, or seat belt for each child's age and size, never leave a child alone in a vehicle, and drive safely. Follow your agency's transportation rules, including who is authorized to transport a foster child and any restrictions. Many of a child's days include car trips — safe transportation is a daily responsibility.

Section 8: Safety Is Daily and Shared

Safety isn't a one-time setup — re-check it as children's ages and needs change and as new children arrive. Everyone in the home contributes to a safe environment, and hazards should be reported and fixed promptly. Work with your licensing agency on home safety reviews. Prevention and preparedness, practiced daily, are how a foster home stays a safe place for children to heal.

Key Terms

Term	What it means
Safe sleep	Infants on their backs, alone, in a safe crib — prevents

	SUID.
SUID	Sudden unexpected infant death; prevented by safe sleep.
Abusive head trauma	Serious injury from shaking an infant — never shake a baby.
Supervision	Watching and being responsible for children, matched to age and need.
Poison control	1-800-222-1222 — call for poisoning emergencies.
Emergency preparedness	Having and practicing plans for fire, weather, and medical events.

Check Your Understanding

1. How should supervision be matched to children?
2. What are the rules for safe infant sleep?
3. Why must you never shake a baby, and what should you do if overwhelmed?
4. How should medications and firearms be stored?
5. What should an emergency plan include?

What's Next

Looking ahead

Next, FC-06: Positive Behavior Support & De-escalation covers guiding behavior without punishment or harm.