

**CWS3100W Resource Family
New Worker Guidance
with COMPASS/OASIS Virtual Learning Lab**

LEARNER HANDOUTS



VIRGINIA DEPARTMENT OF
SOCIAL SERVICES



Title page

List of handouts

Day 1

A-1 Course Competencies and Learning Objectives

A-2 Virginia Children's Services Practice Model

A-3 Fusion Navigation Guide

A-4 Resource Family Regional Practice Consultants

B-1 Kinship Care and the Child Welfare System

B-2 Exception Report Tip Sheet

B-3 Training Requirements for Resource Family Staff – New!

B-4 CRAFFT Consultants

B-5 Mutual Family Assessment Program Fact Sheet

C-1 Resource Family Tip Sheet -Hard and Soft checks

C-2 Physical Home Environment Checklist

C-3 Permanency Assessment Tool revised January 2025

C-4 How to Schedule a Fieldprint Livescan Appointment

C-5 Due Date Calculator for Kinship Resource

C-6 Checklist for Initial Provider Approval

C-7 Resource Family Tip Sheet- OASIS: Entering a Resource Home

Day 2

E-1 Kin First Now User Guide

F-1 Recruitment Development and Support of Resource Families Best Practice Framework with Kin-First Culture

F-2 Recruitment Development and Support (Retention) Plan revised Jan 2025

G-1 Tip Sheet for Initial Approval of a Non-Relative Resource Home

J-1 Tip Sheet for Re-Approving a LDSS Resource Home

Resources

Guidance Jan 2025 pdf

Kinship brochure

Practice Profiles

Approval process letter

Tip Sheet- Kinship Approval

Background Checks- Resource pdf

Practice Quick Guide- Kin-First Culture – New!

Supervision Quick Guide- Kin-First Culture – New!

OASIS- Resource Tip Sheets pdf

Monitoring Call Contact form (not required, recommended template)

Quarterly Resource Family Check-In form (not required, recommended template)

Office of the Children's Ombudsman OCO Flyer

Transfer-of-Learning Day 1

Word document TOL post-class for activities related to Day 1; email to your trainers after Day 1

Supervisor Transfer-of-Learning

Word document TOL post-class to discuss and do activities with your supervisor within your agency

COURSE COMPETENCIES AND LEARNING OBJECTIVES

Competencies:

1. The participant will learn the basic requirements of administering the Resource Family Recruitment, Approval, and Support Program in Virginia.
2. The participant will know how to locate the requirements in law and policy when needed.
3. The participant will know where and how to document that the requirements of the Resource Family Program have been met.

Learning Objectives:

Upon completion of the course, trainees will be able to:

1. Know the purpose and basic assumptions of approved providers in the child welfare system.
2. Demonstrate knowledge of federal and state laws and policies regarding the Resource Family Program.
3. Know current definitions, terminology, and processes of the Resource Family Program in Virginia.
4. Understand the benefits of placement with kin.
5. Assess the family's fit to be an approved provider.
6. Understand how to utilize the Permanency Assessment Tool; to consider immediate placement with kin when safe and appropriate and utilize a Kinship Waiver.
7. Identify approval requirements for kinship pre-approval and kinship resource family to be fully approved.
8. Understand the timelines and related documentation needs of the approval processes and documents.
9. Navigate the OASIS screens and enter case record data for resource family screens.
10. Demonstrate knowledge of the principles of support for resource families.
11. Identify best practice guidelines for core casework processes and tasks necessary for implementing the Resource Family Program policy.



Virginia Children's Services Practice Model

The Virginia Children's Services System Practice Model sets forth a vision for the services that are delivered by all child serving agencies across the Commonwealth, especially the Departments of Social Services, Juvenile Justice, Education, Behavioral Health and Developmental Services and the Office of Comprehensive Services. The practice model is central to our decision making; present in all of our meetings; and in every interaction that we have with a child or family. Decisions that are based on the practice model will be supported and championed. Guided by this model, our process to continuously improve services for children and families will be rooted in the best of practices, the most accurate and current data available, and with the safety and well-being of children and families as the fixed center of our work.

We believe that all children and communities deserve to be safe.

1. Safety comes first. Every child has the right to live in a safe home, attend a safe school and live in a safe community. Ensuring safety requires a collaborative effort among family, agency staff, and the community.
2. We value family strengths, perspectives, goals, and plans as central to creating and maintaining child safety, and recognize that removal from home is not the only way to ensure child or community safety.
3. In our response to safety and risk concerns, we reach factually supported conclusions in a timely and thorough manner.
4. Participation of parents, children, extended family, and community stakeholders is a necessary component in assuring safety.
5. We separate caregivers who present a threat to safety from children in need of protection. When court action is necessary to make a child safe, we use our authority with respect and sensitivity.

We believe in family, child, and youth-driven practice.

1. Children and families have the right to have a say in what happens to them and will be treated with dignity and respect. The voices of children, youth and parents are heard, valued, and considered in the decision-making regarding safety, permanency, well-being as well as in service and educational planning and in placement decisions.
2. Each individual's right to self-determination will be respected within the limits of established community standards and laws.
3. We recognize that family members are the experts about their own families. It is our responsibility to understand children, youth, and families within the context of their own family rules, traditions, history, and culture.
4. Children have a right to connections with their biological family and other caring adults with whom they have developed emotional ties.
5. We engage families in a deliberate manner. Through collaboration with families, we develop and implement creative, individual solutions that build on their strengths to meet their needs. Engagement is the primary door through which we help youth and families make positive changes.

We believe that children do best when raised in families.

1. Children should be reared by their families whenever possible.
2. Keeping children and families together and preventing entry into any type of out of home placement is the best possible use of resources.
3. Children are best served when we provide their families with the supports necessary to raise them safely. Services to preserve the family unit and prevent family disruption are family-focused, child-centered, and community-based.
4. People can and do make positive changes. The past does not necessarily limit their potential.
5. When children cannot live safely with their families, the first consideration for placement will be with kinship connections capable of providing a safe and nurturing home. We value the resources within extended family networks and are committed to seeking them out.
6. When placement outside the extended family is necessary, we encourage healthy social development by supporting placements that promote family, sibling and community connections.
7. Children's needs are best served in a family that is committed to the child.
8. Placements in non-family settings should be temporary, should focus on individual children's needs, and should prepare them for return to family and community life.

We believe that all children and youth need and deserve a permanent family.

1. Lifelong family connections are crucial for children and adults. It is our responsibility to promote and preserve kinship, sibling and community connections for each child. We value past, present, and future relationships that consider the child's hopes and wishes.
2. Permanency is best achieved through a legal relationship such as parental custody, adoption, kinship care or guardianship. Placement stability is not permanency.
3. Planning for children is focused on the goal of preserving their family, reunifying their family, or achieving permanency with another family.
4. Permanency planning for children begins at the first contact with the children's services system. We proceed with a sense of urgency until permanency is achieved. We support families after permanency to ensure that family connections are stable.

We believe in partnering with others to support child and family success in a system that is family-focused, child-centered, and community-based.

1. We are committed to aligning our system with what is best for children, youth, and families.
 - Our organizations, consistent with this *practice model*, are focused on providing supports to families in raising children. The *practice model* should guide all of the work that we do. In addition to practice alignment, infrastructure and resources must be aligned with the model. For example, training, policy, technical assistance and other supports must reinforce the model.
 - We take responsibility for open communication, accountability, and transparency at all levels of our system and across all agencies. We share success stories and best practices to promote learning within and across communities and share challenges and lessons learned to make better decisions.
 - Community support is crucial for families in raising children.
2. We are committed to working across agencies, stakeholder groups, and communities to improve outcomes for the children, youth, and families we serve.
 - Services to families must be delivered as part of a total system with cooperation, coordination, and collaboration occurring among families, service providers and community stakeholders.
 - All stakeholders share responsibility for child safety, permanence and well-being. As a system, we will identify and engage stakeholders and community members around our *practice model* to help

children and families achieve success in life; safety; life in the community; family based placements; and life-long family connections.

- We will communicate clearly and often with stakeholders and community members. Our communication must reinforce the belief that children and youth belong in family and community settings and that system resources must be allocated in a manner consistent with that belief.
3. We are committed to working collaboratively to ensure that children with disabilities receive the supports necessary to enable them to receive their special education services within the public schools. We will collaboratively plan for children with disabilities who are struggling in public school settings to identify services that may prevent the need for private school placements, recognizing that the provision of such services will maximize the potential for these children to remain with their families and within their communities.

We believe that how we do our work is as important as the work we do.

1. The people who do this work are our most important asset. Children and families deserve trained, skillful professionals to engage and assist them. We strive to build a workforce that works in alignment with our *practice model*. They are supported in this effort through open dialogue, clear policy, excellent training and supervision, formal and informal performance evaluation and appropriate resource allocation.
2. As with families, we look for strengths in our organization. We are responsible for creating and maintaining a supportive working and learning environment and for open, respectful communication, collaboration, and accountability at all levels.
3. Our organizations are focused on providing high quality, timely, efficient, and effective services.
4. Relationships and communication among staff, children, families, and community providers are conducted with genuineness, empathy, and respect.
5. The practice of collecting and sharing data and information is a non-negotiable part of how we continually learn and improve. We will use data to inform management, improve practice, measure effectiveness and guide policy decisions. We must strive to align our laws so that collaboration and sharing of data can be achieved to better support our children and families
6. As we work with children, families, and their teams, we clearly share with them our purpose, role, concerns, decisions, and responsibility.

Fusion <https://fusion.dss.virginia.gov/>

Move mouse to “Portfolios” in the top right corner

It will state “Please select from the list of Divisions and Portfolios below”

Human Services Portfolio is one of the headers.

Click “Family Services”

Division of Family Services home page <https://fusion.dss.virginia.gov/dfs/>

In the right-hand corner, there is a new title “DFS Home”

If you put your mouse on DFS Home, a pop-up screen will show other programs you can click on within Family Services

Click on “Resource Family”

The home page for Resource Family includes:

Contacts box to click and see VDSS home office and Regional program contacts

Three columns at the bottom of the page “Main Navigation”, “Pages by Topic”, and “Shortcuts”

Broadcasts <https://fusion.dss.virginia.gov/dfs/DFS-Home/Resources/Broadcasts>

Forms <https://fusion.dss.virginia.gov/dfs/DFS-Home/Resource-Family/Resource-Family-Forms>

Guidance manual <https://fusion.dss.virginia.gov/dfs/DFS-Home/Resource-Family/Resource-Family-Guidance>

Publications <https://fusion.dss.virginia.gov/dfs/DFS-Home/Resource-Family/Family-Recruitment-Publications>

Reports <https://fusion.dss.virginia.gov/orp/ORP-Home/RECURRING-REPORTS>

Resources and Job aids <https://fusion.dss.virginia.gov/dfs/DFS-Home/Resource-Family/Resource-Family-Resources-and-Job-Aids>

Tip Sheets <https://fusion.dss.virginia.gov/dfs/DFS-Home/Resource-Family/Resource-Family-Resources-and-Job-Aids>

Kinship Waiver Links: <https://fusion.dss.virginia.gov/dfs/DFS-Home/Resource-Family/Resource-Family-Forms>

Exception Report Link: <https://fusion.dss.virginia.gov/dfs/DFS-Home/Resource-Family/Resource-Family-Forms>

RESOURCE FAMILY REGIONAL COSULTANTS

Local Engagement and Support (LES) is comprised of staff at the VDSS home office and five regional offices across the Commonwealth. Teams work collaboratively across each location to support Virginia Social Services System initiatives by consulting and supporting Local Departments of Social Services. There will be one Resource Family Consultant in each region this year that provide guidance for kinship, foster and adoptive family home approvals.

<https://fusion.dss.virginia.gov/dfs/DFS-Home/Resource-Family>

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FACTSHEETS FOR FAMILIES | MAY 2022

Kinship Care and the Child Welfare System

Sometimes grandparents, other relatives, or family friends care for children when their parents are unable to care for them. This arrangement, known as kinship care, can occur with or without the involvement of a child welfare agency, depending on the situation. This factsheet is designed to help kin caregivers—including grandparents, aunts and uncles, siblings, and other relatives as well as family friends caring for children—work effectively with the child welfare system. It also includes resources, such as links to more detailed information or places to find support, to help you learn about and navigate the child welfare system.

WHAT'S INSIDE

Kinship care and the child welfare system

The benefits of placement with relatives or kin

Different types of kinship care

What to expect from the child welfare system

Services and how to access them

Involvement with the courts

Permanent families for children

Conclusion

Additional Resources

KINSHIP CARE AND THE CHILD WELFARE SYSTEM

Child welfare systems vary from State to State, but they generally are coordinated by public agencies, such as departments of social services or departments of family and children's services. Caseworkers at these agencies are required by law to ensure the safety, well-being, and permanent living arrangements of children. Their responsibilities include investigating reports of child abuse and neglect and arranging for services for children and families.

Child welfare agencies strive to keep children in their homes with their families whenever possible by providing services and resources. State and county agencies often work with private child welfare agencies to provide these services and resources. Services might include parent education or therapy, and resources might include help with child care or housing. Caseworkers help parents build [protective factors](#)—such as parental resilience, knowledge of parenting, and social connections—to help ensure the safety of their children while they're living at home.

When children cannot remain safely with their parents, placement with kin is preferred over placement in foster care with nonrelatives. Placement with kin—or kinship care—may provide permanency for children and helps them maintain family connections. The term "kin" encompasses both relatives (those related by blood or marriage) and fictive kin (those who are unrelated but have such a close emotional relationship that they are considered like family to the children).

Deciding Whether to Become a Kin Caregiver

You might have been asked by a relative to care for their children, or you might have been contacted by a caseworker through a process called [family finding](#), which child welfare agencies use to identify potential family connections. Either way, deciding whether to become a kin caregiver is a big decision. Consider asking yourself the following questions:

- Am I willing and able to care for children that are not my own?
- Am I able to provide a safe living environment for the children?
- Will my physical or mental health negatively impact my ability to care for the children?
- Am I willing to support the children in finding a permanent home, whether that means staying with me, reuniting with their parents, or pursuing another option?
- Am I willing to participate in or encourage activities for the children that contribute to their healthy social and physical development?
- How will becoming a kin caregiver impact the other members of my household or extended family?
- What supports or services might I need to care for the children (and myself)?

The involvement of the child welfare system in kinship care varies from State to State since each State has its own laws and practices. Child welfare agencies might explore kinship care for a variety of reasons, including if a child cannot remain safely at home due to a report of child abuse or neglect, the arrest or incarceration of a parent, the death of the parents, or severe parental illness. Child welfare agencies also may become involved with the family if parents leave children with kin who later contact the child welfare system because they can no longer care for the children.

THE BENEFITS OF PLACEMENT WITH RELATIVES OR KIN

There are [many benefits](#) to placing children in kinship care, including the following:

- **Minimizes trauma.** Many children and youth who live in kinship care arrangements have experienced traumatic events, such as being abused or neglected. Being removed from their homes is often a traumatic experience as well, and children may suffer the loss of their parents, friends, neighborhoods, and schools. When children live with kin, they are often able to maintain connections and familiar supports, which can reduce the trauma of removal and help children heal from past trauma.
- **Preserves cultural identity.** Having a strong [cultural identity](#) can lead to greater self-esteem, higher education levels, improved coping abilities, and decreased levels of loneliness and depression. Living with kin helps children preserve and strengthen their cultural identities by maintaining connections to their communities and culture, including language, food, holidays, clothing, and more. Historically, informal kinship care (kinship arrangements that do not involve the child welfare system) has been a tradition in many cultures, especially communities of color. This long-standing tradition of working together as a community to raise and support each other's children continues to prevail in Native and Black communities. More information and resources are available on Information Gateway's webpage on the topic, [Kinship Care for Diverse Populations](#).
- **Increases placement stability.** Children in kinship care are [less likely](#) to experience as many moves to various foster homes and families as children in traditional foster care.
- **Improves behavioral outcomes.** Children in kinship care display [fewer behavioral problems](#) than those in traditional foster care.
- **Promotes sibling ties.** Kinship care increases the likelihood that siblings will live together or remain connected to one another. Relationships that children have with their brothers and sisters are often the longest lasting relationships of their lives. These relationships can take on even more importance for children removed from their parents. If it isn't possible for a kin caregiver to provide a home for all the siblings in a family, it is especially important that they help siblings stay in touch. These ties can provide some stability and permanency for children.

DIFFERENT TYPES OF KINSHIP CARE

Kinship care arrangements fall roughly into three categories: (1) informal kinship care, (2) voluntary kinship care, and (3) formal kinship care.¹ There are also other legal relationships that kin caregivers can pursue. It is important for you to understand the various forms of kinship care arrangements and their benefits to help decide which path is the best for you and the child.

INFORMAL KINSHIP CARE

Informal kinship care refers to arrangements made by parents and other family members without any involvement from a child welfare agency or court. In this type of arrangement, the legal custody of the children remains with the parents, and the parents can legally take back their children at any time. Kin caregivers in these circumstances may have difficulty enrolling the children in school, obtaining health insurance, authorizing medical care, and accessing other benefits because they do not have legal custody of the children. However, most States have power of attorney laws that allow parents to give kin caregivers some temporary decision-making power regarding the children. For situations where the parents cannot be found, many States have [educational and health-care consent or authorization forms](#) that do not require parental signatures. Generally, the only type of financial assistance available to kin caregivers in this type of arrangement is the child-only Temporary Assistance for Needy Families (TANF) benefit. (See the "Services and How to Access Them" section of this publication for more information.)

Physical vs. Legal Custody

Physical custody refers to where children live. If your grandchildren or niece and nephew live with you, you have physical custody of them. You may feed and clothe them, help them with their homework, and take care of them when they are sick.

Legal custody refers to the legal right to make decisions about the children, such as where they live. Parents have legal custody of their children unless they voluntarily give that custody to someone else or a court takes this right away and gives it to someone else. For instance, a court may give legal custody to a relative or to a child welfare agency. Whoever has legal custody can enroll the children in school, give permission for medical care, and give other legal consents.

The same person does not necessarily have both physical and legal custody. For instance, as a grandparent, you may have physical custody of your grandchildren because they live with you, but their parents or the State agency may have legal custody.

¹ Some organizations are moving away from these terms because they may be offensive or confusing. For example, these terms may indicate that a formal arrangement is more important or stable than an informal arrangement or that formal and informal arrangements are not voluntary. Instead, terms such as "kin caregivers who have a legal relationship" or "kin caregivers who do not have a legal relationship" may be used.

VOLUNTARY KINSHIP CARE

Voluntary kinship care refers to situations in which children live with kin, the child welfare agency is involved, and the State does not take legal custody. In some cases, children have been placed with kin by a court, and in other cases an arrangement is made by the child welfare agency with no court involvement. Parents may agree to voluntary placements of their children with kin in order to prevent the child welfare agency from going to court to pursue involuntary placements.

FORMAL KINSHIP CARE

Formal kinship care most closely mirrors traditional nonrelative foster care. In formal kinship care, children are placed in the legal custody of the State by a judge, and the child welfare agency then places the children with kin. In these situations, the child welfare agency, acting on behalf of the State, has legal custody of the children, and kin have physical custody. The child welfare agency is also responsible for ensuring the children receive health care and attend school. If the court has approved visits with parents or siblings, the child welfare agency is responsible for making sure these visits occur. In formal kinship care, children's kin caregivers are often not fully licensed, certified, or approved under the State's laws and policies. Consequently, these families may not have access to monthly foster care maintenance payments or other supports.

If you are a formal, fully licensed kin caregiver, you are typically eligible for more financial assistance than other types of kin caregivers. When you become licensed, you become eligible for certain State and Federal funding programs, such as the Title IV-E Guardianship Assistance Program (GAP), described in detail in the "Services and How to Access Them" section of this publication. Many States have implemented efforts to fully license more kin caregivers so that more of them qualify for financial assistance, allowing more children and youth to remain connected to their families and communities.

OTHER LEGAL RELATIONSHIPS

Depending on the State, there are many legal relationships that kin caregivers can pursue privately or with the help of an agency. These include, but are not limited to, temporary guardianship, limited guardianship, standby guardianship, permanent guardianship, guardianship by probate court, and de facto custody. Definitions and summaries of each of these relationships are available on the [Care-Custody - Summary & Analysis](#) page on the Grandfamilies.org website.

These legal arrangements allow legal rights related to the children's care, such as the right to make medical decisions, to be transferred from the parents to the relative caregivers in a court. Although laws vary from State to State, the transferring of legal rights often requires an attorney to draw up papers that are presented in court for a judge's approval. Once some form of legal relationship is granted, the kin can often make decisions, such as medical and education decisions, for the welfare of the children.

Guardianship is often a permanency goal that the kin caregivers can work toward, either with parental support or without it, if the agency and courts decide that's what is in the best interest of the child. More information about legal guardianship is in the "Permanent Families for Children" section of this publication.

WHAT TO EXPECT FROM THE CHILD WELFARE SYSTEM

After children are placed in your home, you may wonder what you can expect in your future interactions with the child welfare system. This will often depend on the nature of the kinship care agreement. Two common situations are addressed in this section: being voluntary kin caregivers and being formal kin caregivers.

AS VOLUNTARY KIN CAREGIVERS

In States where voluntary kinship care arrangements are accepted and promoted by child welfare, caseworkers are often involved in the following ways:

- **Ensuring safety.** Caseworkers may ensure you and your home meet minimal requirements for the safety of the children. For instance, most States require that caseworkers conduct criminal background checks and child abuse and neglect registry checks on household members.
- **Visiting.** In some States, caseworkers may make periodic visits to ensure children remain in a safe environment. Caseworkers may also provide support to kin caregivers during visits.
- **Offering services.** Some States have services available for children and families in voluntary kinship care. These might include referrals to therapy for children or support groups for family members. (More information is available in the "Services and How to Access Them" section of this publication.)
- **Changing the custody status.** If children remain in the legal custody of their parents, but the parents are not meeting their service plan requirements or are placing children in dangerous situations, caseworkers may help kin caregivers petition the court for temporary legal custody of the children. Caseworkers also may go to court and petition to have the children placed in the legal custody of the State.

Some voluntary kinship cases involve very limited contact with the child welfare agency. Once the caseworker has completed background checks on household members, the caseworker may be satisfied that the children are in a safe environment and may not contact you again. In these situations, if you need help or services, you may need to contact the caseworker or locate community services on your own.

AS FORMAL KIN CAREGIVERS

Formal kinship care arrangements often have the most involvement with the child welfare system. Like foster care, the State has legal custody of the children in formal kinship care arrangements.

Compared to voluntary kinship placement, caregivers in formal kinship care placements have more structured involvement with the child welfare agency. This may provide the families with more supports and services, but they also may have less flexibility to make independent decisions about the children since the State maintains legal custody. The following are some of the ways the child welfare agency may be involved in formal kinship care:

- **Ensuring safety or licensing standards.** Caseworkers conduct criminal background checks and child abuse registry checks on all adult household members in the kin caregivers' home. In addition, they might consider the home's size and condition, the caregivers' incomes, others who live in the home,

and available transportation. While States have the option to waive non-safety licensing standards, most States require kinship foster homes to meet all requirements for foster home licensure. States usually give kin caregivers some flexibility in the amount of time they have to meet requirements because placement is often unexpected, and some States will waive requirements if they do not affect the children's health or safety. Kin caregivers may be offered foster parent training, which in many States is tailored to kinship foster parents. Caregivers should ask caseworkers about the [pros and cons](#) of becoming a licensed foster parent, including what financial and other supports they can access.

- **Supervision and support.** The caseworker will support family members to help ensure the children are safe and doing well. This includes making telephone calls and periodic visits to the home. The caseworker may also provide referrals for services, such as counseling. In most situations, relative caregivers will take the children to health care appointments and work with children's schools. In some situations, though, caseworkers have more responsibility for these services.
- **Arranging visits with parents and siblings.** In many situations, the court will mandate parent and sibling visits, and caseworkers will work with parents and kin caregivers to arrange for these visits. In some cases, kin caregivers may be responsible for providing transportation for the children or for supervising the visits in their own home. For more information about how kin caregivers can support family connections, go to Information Gateway's [Partnering With Relatives to Promote Reunification](#).

Family Group Decision-Making, Family Group Conferencing, and Family Team Meetings

The child welfare system values family input in decision making. One of the ways that caseworkers engage families is by hosting group discussions known as [family group decision-making, family group conferencing, or family team meetings](#).

These terms are used to describe a meeting or series of meetings arranged by a child welfare agency and attended by family members, friends, teachers, and other adults who are important in the children's life. Sometimes children attend as well, especially older youth. The caseworker generally serves as an organizer and facilitator. Topics discussed at these meetings may include living arrangements for the children, goals for the children, goals for the parents, etc. The meetings may also be used to help build protective factors and social supports for the kinship family.

As a kin caregiver, you should be included in these types of meetings. If the children's caseworker has not arranged these meetings, you may want to ask about them.

- **Service planning.** The child welfare agency will develop a service plan (sometimes called a case plan or permanency plan) for each child involved with the child welfare system. The service plan covers two major issues:
 - **A permanency goal** for each child. This is the goal about where that child will live. In most situations, the permanency goal for a child is to return to a parent (called family reunification). Many States require concurrent planning, which means that the child welfare agency must create a primary

plan and a backup plan. Often, the primary plan or goal will be to return the child to a parent (reunification). If this is not possible, the backup plan may be for the kin caregiver to become the child's adoptive parent or legal guardian.

- **Actions that the parents and child welfare agency need to take** so the children can be allowed to return to their parents or so that another permanency goal can be achieved. For example, the service plan for parents who have substance use disorders may state that the parents must successfully complete treatment.

Kin caregivers should be involved in case planning and should receive copies of the final plan. Caseworkers should review service plans with everyone involved at least every 6 months to measure progress toward goals and decide whether the plan needs to be changed.

Questions to Ask Your Caseworker About Taking Responsibility for the Children

Becoming a kin caregiver can be overwhelming and confusing. It may be helpful to ask your caseworker the following questions:

- Who has legal custody of the children?
- What rights and responsibilities does legal custody give in this State? Physical custody?
- May I be involved in developing the service plan and receive a copy of the plan?
- Will the children or I have to go to court?
- Who is responsible for enrolling the children in school, obtaining health insurance, granting permission for health care and obtaining it, signing school permission forms, etc.?
- Are there restrictions about contact with the parents or other family members?
- How often can I expect someone from child welfare services to visit my home?
- What are the requirements for me and my home if I want the children to live with me?
- Are the requirements different if the children are with me just temporarily?
- What services are available for me and for the children, and how do I access them?
- Are there restrictions on the discipline I can use (such as spanking) with the children?
- What subsidies or financial assistance is available? What do I need to do to apply?
- How can I become a licensed foster parent and receive a monthly foster care subsidy to help meet the children's needs?
- Will the child welfare agency or social services provide support for child care?
- Will I receive transportation help to take the children to health-care appointments?

SERVICES AND HOW TO ACCESS THEM

Child welfare agencies often provide services for kin caregivers and the children in their care. They may also refer families to other organizations that provide services. Services and referrals are more likely to be available to children in formal kinship care than those in informal kinship care. When children are in the legal custody of the State, it is the child welfare agency's responsibility to ensure the children receive appropriate assessments and services.

When referring your family for services, your caseworker should ensure the service and the provider are appropriate for your family's cultural background. The provider should understand cultural differences, recognize potential biases, and provide culturally appropriate services to ensure you and the children get the support you need. Information Gateway has a [Cultural Responsiveness in Services](#) webpage with more information.

THERAPY AND COUNSELING

Children who have been removed from their parents may benefit from supportive counseling to address a range of issues, including any abuse or neglect they experienced, other trauma, and additional issues or conditions. Early identification and treatment for trauma and other issues can lessen the short- and long-term effects, so it may be beneficial to talk to a counselor early about whether therapy could help. For more information about the signs and treatment of trauma, visit Information Gateway's [Resources on Trauma for Caregivers and Families](#). Additional resources can be found on the [National Child Traumatic Stress Network](#) website.

Kin caregivers should follow the progress of children's therapy and counseling and may be asked to participate in therapy sessions or use specific parenting strategies with children at home.

FINANCIAL SUPPORT

Kin caregivers may struggle with the costs of providing for the children in their care. Depending on a number of factors, including age, income, the child's disability status, and the legal status of the caregiving arrangement (i.e., voluntary or foster care), there may be financial supports available. The following are some of the programs that may be available to you:

- The [Temporary Assistance to Needy Families \(TANF\)](#) program is designed to provide financial assistance to low-income families while also helping them become self-sufficient. There are two types of grants under TANF for which kin caregivers may be eligible: child-only grants and family grants. However, most States do not allow children cared for by fictive kin or family friends to access TANF child-only or family grants. To see whether fictive kin are included in your State's definition of relative under TANF, review Grandfamilies.org's "[TANF Fictive Kin Chart](#)." In most States, child-only grants are designed to consider the needs and income of only the children. Since most children do not have an income, nearly all children cared for by a relative are eligible for child-only grants. For family TANF grants, the State considers the relative caregiver's income. Since these grants are designed to address the needs of both the children and their caregivers, these are generally larger than child-only grants.

- **Foster care payments** are often available to caregivers in formal kinship care arrangements if they become fully licensed foster parents. The requirements for receiving these payments vary from State to State.
- **The Title IV-E Guardianship Assistance Program (GAP)** is a Federal program designed to promote permanency for children in foster care. In States that have opted to operate GAP, licensed relative foster parents who become permanent guardians may be eligible to receive ongoing monthly assistance for the children in their care. GAP provides a culturally responsive alternative to adoption for some kinship families who do not want to alter family relationships and allows them to continue receiving financial support similar to what they received as formal kin caregivers. As of June 2021, 40 States, the District of Columbia, Puerto Rico, the Virgin Islands, and 10 Tribes had [approved GAP programs](#). For more information about GAP eligibility, see Information Gateway's [Kinship Guardianship as a Permanency Option](#).
- **SNAP (Supplemental Nutrition Assistance Program)** refers to the Federal Food Stamps program. SNAP is available to families with incomes below a certain level. In this case, the entire household's income is considered, and the relative children can be included in family size for determining benefit amount. To learn more about whether you are eligible and how to apply, visit the [U.S. Food and Nutrition Service](#) website.
- **Supplemental Security Income (SSI)** may be available to children or caregivers who are disabled. This is also available to those age 65 and older. Information about SSI benefits is available on the [Social Security Administration](#) website.

For more information about financial assistance, go to Information Gateway's [Resources for Relative and Kinship Caregivers: Legal and Financial Information](#) webpage. To see what government benefits you may be eligible to receive, including those unrelated to kinship care, go to [Benefits.gov](#).

Navigating Changing Family Dynamics

When you become a kin caregiver, you might experience feelings of anger, sadness, loss, guilt, or a range of other emotions. On top of these feelings, you have to adjust to changing family dynamics.

When you become a primary caregiver, it may be difficult to transition from the role of “spoiling grandparent” or “fun older sibling” to the parent figure who establishes household rules and makes decisions. It may also be challenging to have difficult conversations with children explaining why they cannot stay with their parents.

Another relationship shift that can be difficult to navigate is your relationship with the child’s birth parents. You become responsible for making daily decisions about the children’s lives, which can be uncomfortable for the parents who used to make those decisions. It is important that you and the parents maintain patience with one another and work together in the best interests of the children.

Information Gateway provides a [list of resources](#) to help kin caregivers with changing family dynamics. The Wisconsin Foster Care and Adoption Resource Center also offers a [tip sheet](#) with recommendations for navigating relationships with children, the children’s parents, extended family, and your partner.

Health Insurance

Many children being raised by kin are eligible for health insurance through either Medicaid or the Children's Health Insurance Program (CHIP). Medicaid provides coverage for many health-care expenses for low-income children and adults, including visits to the doctor, checkups, screenings, prescriptions, and hospitalization. State CHIPs cover many of these costs for children who are not eligible for Medicaid, although each State has different rules for eligibility and coverage. In most cases, only the child's income is used to determine eligibility for Medicaid or CHIP, not the income of the kin caregivers. Your caseworker can help you identify the appropriate agency to contact to apply for health insurance coverage through these programs. Every State permits kin caregivers to apply for Medicaid or CHIP on behalf of the children for whom they are caring. Medicaid and CHIP do not have open enrollment periods, so you can apply any time of the year. Find out more at [HealthCare.gov](https://www.healthcare.gov).

Respite Care

Kin caregivers seeking a temporary break from the full-time care of children may find some relief in [respite care](#). Respite care refers to programs that give caregivers a break by caring for children for short periods of time—either on a regular schedule or when caregivers need to travel, go into the hospital, or otherwise be away for a few days. In some respite programs, respite caregivers come into the home to care for the children, and in other cases, the children attend a camp or program away from the home.

Availability of respite care may be limited and may depend on your needs and the needs of the children in your care. You can ask your child welfare agency for more information about how to access these programs.

Support Groups

Child welfare agencies may be able to connect you to a local support group of other kin caregivers. Listings for support groups are also found in the [National Foster Care and Adoption Directory](#). Sharing stories with others who have similar experiences can be helpful and can ease the isolation that relative caregivers often experience. You may also find kin caregiver support groups online, including on social media sites.

Kinship Navigator Programs

Kinship navigator programs are available in some areas to help kin caregivers identify and access the services and other help they need to raise children. Navigators can provide information about how to obtain health care, financial support, legal aid, emergency services, and more as well as how to work with the child welfare and court systems. The navigator may also be able to link caregivers with support groups, counseling, and other community services. In some cases, these navigators are peers who have firsthand experience as kin caregivers.

To find out if there is a kinship navigator program in your area, contact your local child welfare agency or visit Information Gateway's list of [State kinship care contacts and programs](#).

INVOLVEMENT WITH THE COURTS

Kin caregivers who are part of the foster care system are likely to have some involvement with courts. In most States, this occurs in a family or dependency court. Whenever possible, you should make arrangements to attend court hearings. You may even be asked to testify at them. It is important to share your view of the situation and to get a full understanding of the court's decisions. It is also important to be there to advocate for the children and support them if they appear before the judge.

More information about involvement with the court system is available in Child Welfare Information Gateway's [Understanding Child Welfare and the Courts](#).

Questions to Ask Your Caseworker About Court Hearings

Consider asking your caseworker the following questions about court hearings:

- When and where is the hearing?
- What type of hearing is this?
- What will be decided at the hearing?
- Who will be present?
- Who will have a lawyer?
- Do I need a lawyer? If so, who can help me find one?
- Who will represent the child or children? May I speak to that person?
- May I speak at the hearing?
- What is the schedule of future hearings?
- Can the children speak at the hearing? How can I best support them?

PERMANENT FAMILIES FOR CHILDREN

Permanency is a term used by caseworkers to mean a lasting and nurturing family for a child. Permanency planning for each child involves establishing a goal for permanency, setting tasks required to achieve the goal, and determining the roles and responsibilities of all involved, including the parents, relatives, caseworker, children, and other stakeholders. Common permanency goals are reunification with the parents, guardianship, and adoption. When establishing a permanency plan, it is important to make sure the children or youth are involved, aware of their options, and given opportunities to express their opinions, as possible and appropriate.

REUNIFICATION

[Reuniting children with parents](#) is the first choice of child welfare agencies when this option will ensure the safety and well-being of the children and provide a permanent family for them. Each State has different laws, but typically, parent reunification can occur when the judge agrees that the parents have

met the goals set out in their service plan (e.g., the completion of substance use treatment). The judge decides whether children can safely reunite with their parents based on information from the parents, child welfare professionals, other important adults (such as kin caregivers), and often, the children.

GUARDIANSHIP

[Guardianship](#) is another legal option for permanency that may be especially appropriate in kinship care. Federal law encourages States to consider a relative rather than a nonrelative when seeking a guardian for children who cannot return home.

When a relative becomes the child's legal guardian, legal custody is transferred from the State to the relative by a court. In most circumstances, there is no further involvement by the child welfare agency. In guardianship arrangements, parents' parental rights are not terminated. The kin who become the child's guardian obtain legal and physical custody and rights and responsibilities to make decisions about the children, while birth parents often retain some visitation or other rights. Guardianship can be appropriate for families who do not want to alter the family's legal relationships through adoption but need to establish a permanent legal arrangement with the children in order to be able to make education, health-care, and other decisions for the children.

There are some subsidized guardianship programs, such as the Title IV-E Guardianship Assistance Program described in the "Services and How to Access Them" section of this factsheet as well as State-funded programs, which enable guardians to continue to receive payments (subsidies) similar to those they received through formal kinship care as foster parents. This allows children to have permanent family relationships without causing guardians to lose necessary monthly subsidies. In subsidized guardianship, there is some ongoing involvement of the child welfare agency, although it is significantly less than in foster care. For instance, caregivers may be asked to complete annual forms.

Relational Permanency

Obtaining legal permanency is not always a possibility for some children and youth, and some youth may not want to achieve legal permanency. In these cases, kin can still support children by providing relational permanency. Relational permanency is achieved through relationships or connections a young person has with caring, supportive adults in their life, such as relatives, neighbors, or teachers. Permanency implies that the relationship will last and that the adult will continue to provide lifelong support for the youth. This could mean they provide a home for the youth to visit during holidays, serve as a person to talk to and discuss problems with, or act as a cheerleader by celebrating accomplishments and milestones in the young person's life. Establishing and maintaining relational permanency can contribute to better mental health, resilience, educational outcomes, self-esteem, and transitions to adulthood. More information about relational permanency is available in Information Gateway's [Promoting Permanency for Older Youth in Out-of-Home Care](#).

ADOPTION

Some kin caregivers choose to adopt the children in their care. Since adoption is often the agency's preferred permanency plan for children not returning to their parents, kin may adopt in order to keep children living with family. Adoption assistance (payments) may be available to kin families who adopt, but they would no longer be eligible for temporary assistance child-only grants.

As with foster care and guardianship, the child welfare agency must ensure the home and prospective adoptive parents meet certain State-mandated standards for safety and well-being. In some States, standards for adoption may be more difficult to achieve than those for foster care. These requirements and standards will apply even for kin who have been caring for the children under a foster care arrangement.

Children can be adopted only after the court has terminated all the legal rights of the parents or the parents have voluntarily surrendered all their parental rights permanently. A court must finalize the adoption. Depending on their age and the State law, courts will often ask the children if they agree to the adoption.

Once the adoption is finalized, the relatives become the legal parents of the children, and there is generally no further involvement by the child welfare agency after that finalization. [Adoption assistance](#), or subsidies for caregivers of an adopted child with "special needs," may be available. (In the child welfare field, "special needs" may refer to conditions or circumstances that may make it more difficult to find an adoptive home for a child without financial assistance, including membership in a minority group; having a medical condition; being a part of a sibling group who should not be separated; or having a physical, emotional, or mental disability.) The family may also be eligible for postadoption and permanency support services, such as educational services, clinical services, financial or health assistance, and support networks. For more information on postadoption services, including a searchable directory of support groups and services, go to Information Gateway's [Postadoption Services and Support](#) webpage.

Questions to Ask Your Caseworker Regarding Long-Term Arrangements

You may want to ask your caseworker the following questions about long-term arrangements for children:

- What is the current permanency goal for each child? (Siblings may not have the same goal.)
- What are options for the children if they can never return to their parents?
- What are *my* options if the children cannot return to their parents?
- Under what circumstances can I receive a subsidy to help pay for the children's care?
- Will the legal arrangement be affected when the children turn 18?
- How will the child welfare agency continue to be involved with my family?
- How will various permanency options affect services available to the children (e.g., tuition assistance, health insurance, independent living services)?

CONCLUSION

Kinship care is an excellent option for children and youth who cannot safely remain with their parents. Kin caregivers can sometimes be confused or frustrated working with an unfamiliar child welfare system. Using the information in this factsheet can help kin caregivers understand and work with the child welfare system to provide the best outcomes, including a permanent family, for their relative children.

ADDITIONAL RESOURCES

INFORMATION ON THE CHILD WELFARE SYSTEM

- [How the Child Welfare System Works](#) (Child Welfare Information Gateway)
Also available in [Spanish](#)
- [State Child Welfare Agency Websites](#) (Child Welfare Information Gateway)

INFORMATION ON KINSHIP CARE

- [Partnering With Relatives to Promote Reunification](#) (Child Welfare Information Gateway)
- [State Kinship Care Contacts and Programs](#) (Child Welfare Information Gateway)
- [Resources for Relative and Kinship Caregivers](#) (Child Welfare Information Gateway)
- [State Factsheets for Grandparents and Other Relatives Raising Children](#) (Generations United, The Brookdale Foundation Group, American Association of Retired Persons, ABA Center on Children and the Law, Casey Family Programs, ChildFocus, Children's Defense Fund, and Dave Thomas Foundation for Adoption) (also available in Spanish)
- [Generations United](#)
- [Grandfamilies State Law and Policy Resource Center](#) (Casey Family Programs, American Bar Association Center on Children and the Law, Generations United)
- [Grandparents Raising Grandchildren](#) [factsheet series] (University of Georgia College of Family and Consumer Sciences)

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U.S. Department of Health and Human Services
Administration for Children and Families
Administration on Children, Youth and Families
Children's Bureau



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Exception Report Tip Sheet

What: The exception report is a report that must be filed ANYTIME a child in foster care (0-17) is placed in a non-relative home. The decision to place a child in a non-relative home must be approved by the agency director or director designee and their approval documented within the exception report.

When: Exception reports must be completed within 72 hours of placement in a non-relative home- whether for new entries or for placement changes in foster care.

Where: Links to completing the exception report can be found on the Resource Family Documents, Foster Care Documents, CPS Job Aids and Resources, and Kin First Now Fusion Pages.

Exception reports can be edited if information needs to be added or changed. Request a link to retake the exception report from your program consultant.

FAQs:

Q: Is an Exception Report required for hospitalizations?

A: If the hospitalization is a placement change then yes. If the child is in the hospital for a few days, but it's not an actual placement change, then no.

Q: What if the LDSS believes it will be a temporary hospitalization, but turns into a long-term placement?

A: The LDSS should complete an exception report as soon as the decision is made that this will not be a temporary hospitalization but will instead become a placement. An explanation can be provided in the narrative sections of the report about what happened and why the exception report wasn't originally completed within the first 72 hours of the hospitalization.

Q: Are Exception Reports required for cases where TPR has been achieved?

A: Yes, the bill requires exception reports for all children in foster care and does not create any exceptions for that. We should be continuing with our efforts to place kids with kinship families even after TPR, so there is still the expectation that even post-TPR if youth are going to non-relative placements the exception report is completed.

Q: What about for IL or Fostering Futures Placements?

A: An exception report would only need to be completed for an IL arrangement if the youth is a minor. For youth 18+ they are technically making their own placement decisions as they're adults and the LDSS are not responsible for exception reports for adults.

Q: Do we need to do the exception reports for all our kids in care currently?

A: LDSS do NOT have to do retroactive exception reports. These are required January 1, 2025 and moving forward.

The next page outlines all of the questions you will be asked so you know ahead of time what information to prepare.

Exception Report

Provide Contact Information for:

- Name and e-mail address of staff completing the exception report

This ensures staff receives a confirmation of the receipt of the exception report.

- Name and e-mail address of director/director designee.

This serves as documentation of director/director designee approval and ensures a copy goes to the director/director designee

Questions:

1. Region
2. Locality
3. Oasis Foster Care Case #
4. Date of Placement
5. How many children in the request

If a sibling group enters care or changes placement at the same time, you only need to complete one exception report per sibling group, and should identify if there is more than one child per exception report so you are prompted to provide information for each child.

6. Provide the following information for each child: Initials, Case ID, Client ID, Type of Placement, Sex, Race, Age, Initials of Parents
7. Provide information around any special needs for each child

Share information relevant to the impact a child's special needs may impact their potential placement with kinship.

8. Is this exception report for a new entry into care or a placement change?
9. In the 72 hours since the child(ren) entered a non-relative placement, have you successfully placed the child(ren) with kinship?

You will be given the option to select: a) Yes, b) No, c) Some siblings went with kin, others did not.

If you select "Yes" you will receive a prompt to complete a kinship waiver and will be asked to provide a brief narrative about why the child could not be placed immediately, but was able to be placed within 72 hours.

If you select "No" or "Some siblings went with kin, others did not", you will be prompted to complete the rest of the exception report.

10. If “new entry” in response to question 8 is selected you will be prompted to answer whether an Out of Home Staffing was held.

- a. If Yes, You will be asked for the date. If No, you will be asked for your plans to schedule an Out of Home Staffing.

11. Was a Family Partnership Meeting held?

- a. If Yes, you will be asked for the date. If No, You will be asked for your plans to schedule one.

12. Please describe all efforts made to identify, assess, and engage family members prior to placing the child in a non-relative setting. These efforts should extend beyond asking parents to name potential placement.

This will be an open narrative box. You should include information in here related to your efforts to find family, assess family, and include family members in decision-making. Relevant information to include here would be (but is not limited to):

- *Types of searches conducted such as Accurint, Spyder, Oasis review, social media reviews*
- *Information on conversations with parents, youth, or other extended family members where requests for more information on possible family was discussed*
- *Use of tools such as genograms, ecomaps, mobility mapping, etc*
- *Any FPMs or history of attempts to bring family together to participate in decision-making*

13. Besides the parents in the removal home, how many relatives/fictive kin have you identified (to include parents not in the removal home)

14. Provide the following information for all relatives identified: initials, resource case ID# if applicable, relationship, if contact was made, barriers to placement

Barriers will be selected from a drop down list.

- a. If you identify more than one barrier, this will prompt a follow up question list any further barriers for the identified relative.

If you identify more than one barrier, you will be prompted to fill out a matrix with all possible barriers, or provide additional narrative information if your particular barrier is not identified.

15. Provide any additional information around relatives/fictive kin identified.

Here you will include any other relevant information around the relatives/fictive kin that you feel the previous questions did not capture, but is pertinent to the decision not to place with kin. This is also a place to capture other ways the relative was willing to be connected even if they couldn't take placement.

Training Requirements for Resource Family Staff

Name: _____

Start Date: _____

The following on-line courses will be required to be completed within the **first three (3) weeks** of employment. *These courses are **pre-requisites** for many other courses including CWS3100W Resource Family New Worker Guidance Training with OASIS. (Note: e-Learnings denoted by CWSE titles.)

COURSE	Resource Family Services Staff Completion Date
CWSE1002 Exploring Child Welfare - online	
CWSE5692 Recognizing and Reporting Child Abuse and Neglect – Mandatory Reporter Training - online	

The following **Online** and **Instructor Led courses** will be required to be completed no later than within the **first 6 months** of employment.

COURSE	Resource Family Services Staff Completion Date
CWS3100W Resource Family New Worker Guidance with COMPASS/OASIS Virtual Learning Lab (Prerequisites: CWSE1002, CWSE5692)	
CWS3101W Introduction to PRIDE Model (Prerequisites: CWSE1002, CWSE5692)	
CWS3103W Mutual Family Assessment (Prerequisites: CWSE1002, CWSE5692)	
CWSE4060 Family Search and Engagement – online (Prerequisites: CWSE1002, CWSE5692, CWS3100W)	
CWS4080W Kinship Care in Virginia (Prerequisites: CWSE1002, CWSE5692, CWS3100W, CWSE4060)	

Training Requirements for Resource Family Staff

Name: _____

Start Date: _____

The following meet the annual **24 hours of continuing education** requirements beginning the third year of employment.

[illegible]

THE CONSORTIUM FOR RESOURCE, ADOPTIVE, AND FOSTER FAMILY TRAINING (CRAFT) REGIONAL CONSULTANTS

CRAFT promotes the safety, permanency, and well-being of children by helping shape stronger foster, adoptive, respite, and kinship families (collectively referred to as resource families) who serve local Departments of Social Services to meet the needs of children and youth in Virginia's child welfare system.

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Mutual Family Assessment Program FACT SHEET



- The MFA program is a free resource available to all LDSS offices provided by VDSS.

- We can assist with MFA's for new applicant foster/adoptive families, kinship families, and child-specific adoptions.

- We provide a thorough and comprehensive assessment process ensuring all guidance standards are met.

- Included in the assessment process are: three interviews with household members, a home inspection and an in-depth evaluation of the applicants willingness, ability, and resources to meet the 5 core competency categories.

- Referral process is quick with only one simple form sent via email with supporting documents you already have completed in-office.

- LDSS retains overall responsibility of home approval. MFA program does not issue approvals, but provides a recommendation to assist the agency in the decision to approve/not approve an applicant family.

- LDSS will receive frequent and consistent communication regarding progress and/or concerns with the family. Collaboration is a priority!

**For more info
or to make
a referral call
or email**

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Resource Family Tip Sheet

Soft Checks & Hard Checks

SOFT CHECKS

Soft checks are a combination of a Virginia State Police criminal name search and a Central Registry name search. Soft checks are required as part of preliminary steps when exploring prospective kinship resource parents. You must have the clear results of the soft checks before placement can occur. The steps for these 2 processes are outlined below:

1.) VIRGINIA STATE POLICE CRIMINAL NAME CHECK

The soft checks for criminal background can **only** be done through the Virginia State Police. No other systems can be utilized (such as Accurint or Virginia Court Bar).

A relationship should be developed with your local law enforcement so that these searches can be done immediately. Obtaining hard copy verification from local law enforcement for a Virginia State Police criminal name check should be documented in the case contacts of the Resource Family record. Additionally, this search should also be documented on the Checklist for Initial Provider Approval (which IV-E utilizes to verify completion).

Another option is to open an account with the Virginia State Police's NCJI system, so that searches can be done by the LDSS. Please email ncjihelp@vsp.virginia.gov to set up an account or to access accounts that are set up by VSP (but may be outdated). Once the LDSS has a VSP account, the following link is used to perform soft criminal checks: <https://vspapps.vsp.virginia.gov/catspublic/public/publicHome.html>

Please note: If law enforcement partners run a name search, it is an immediate result. NCJI results usually come back by the next business day if there is no criminal history.

Virginia Code 63.2-901.1 Section C <https://law.lis.virginia.gov/vacode/title63.2/chapter9/section63.2-901.1/>

In emergency circumstances, each local board may obtain, from a criminal justice agency, criminal history record information from the Central Criminal Records Exchange and the Federal Bureau of Investigation through the Virginia Criminal Information Network (VCIN) for the criminal records search authorized by this section.

Within three days of placing a child, the local board shall require the individual for whom a criminal history record information check was requested to submit to fingerprinting and provide personal descriptive information to be forwarded along with the fingerprints through the Central Criminal Records Exchange to the Federal Bureau of Investigation for the purpose of obtaining criminal record history information, pursuant to subsection B. The child shall be removed from the home immediately if any adult resident fails to provide such fingerprints and written permission to perform a criminal history record check when requested.

The individual's name is run through VCIN with Purpose Code X by a law enforcement agency (All Police Departments and Sheriff's Offices in the Commonwealth have authorization to use Purpose Code X Emergency Placement of Foster Children). Purpose Code X searches criminal history record information from the Central Criminal Records Exchange (CCRE) and National Crime Information Center (NCIC) through the Virginia Criminal Information Network (VCIN).

When a child is placed, DSS must submit fingerprints within 3 days as an applicant.

This can be done through one of the following:

Resource Family Tip Sheet

Soft Checks & Hard Checks

- (NFUF) Electronic Submission Fieldprint: will result in a Determination letter for approval from the Office of Background Investigations (OBI).
- Manual Applicant card with inked prints: these are mailed in and only used for individuals who cannot physically go to a Fieldprint location. To obtain the fingerprint card, applicants must first make a Fieldprint appointment online, then contact OBI and request a card packet be sent to the address from the appointment after giving them the reason for needing to manually roll prints. Follow the instructions included with the card packet. Use the Bio-metric form if the individual is missing fingertips or has such severe arthritis that fingerprints are unobtainable (ask your resource family consultant for the Biometric form). This option should be used as a last resort and agencies should be prepared to have significant justification for use of this form. **Each use of the Biometric form requires a conversation with your Resource Family Practice Consultant.**

If an individual has a criminal record, use the [current barrier crime list](#) or the [Barrier Crime Determination Guide](#) to determine if the kinship resource family can be approved.

2.) CHILD PROTECTIVE SERVICES NAME SEARCH IN OASIS

- The soft check process for CPS history (Central Registry) is done through OASIS
- Watch microlearning: **MICRO1502 Search & Merge in OASIS**
- Do not use the “Central Registry Search” button – use the search button only
- Less is more when searching
- Use last name only & then use the first initial followed by * if needed
- If you have a DOB and/or SS#, use this to cross-reference only (do not enter this info into your OASIS search)
- The LDSS can call the CPS hotline to request a search (using the matrix)

An example of a screen shot of a “no matches” for a Central Registry name search in OASIS is below; the no match search results should be printed and filed in the physical file of the Resource Family.

The screenshot displays the OASIS 'Client Matches' search interface. It features a table with columns for Client Type, ID, Name, SSN, Gender, and DOB. To the right of the table are buttons for Show, Cancel, Sort, Help, and a Search Time input field. Below the table is a 'Related Clients' section with columns for Client ID, Name, Status, Age, and Gender. An 'Information' dialog box is overlaid on the screen, displaying a blue information icon and the text 'No Matches Found.' with an 'OK' button.

HARD CHECKS

Hard checks are a combination of federal criminal background checks completed through FieldPrint (state approved vendor), and CPS Central Registry checks done through Office of Background Investigations (OBI) online portal. All adults in the kinship home must submit to fingerprinting within 72 hours of placement.

Important Reminder: The date that the last hard check results are returned clear is the approval start date on the Certificate of Approval which meets the 120 days requirement between checks cleared and COA.

1.) To do a hard check for criminal backgrounds, LDSS should utilize FieldPrint utilizing [Schedule a Fieldprint Appointment at Fieldprint](#) instructions on FUSION.

- For kinship resource families, FieldPrint appointments needs to be scheduled within 72 hours of the placement for all resource parents and adult household members.
- Instructions for how kinship resource families can set up a FieldPrint appointment are in the user-guide.
- Each LDSS is assigned an LDSS-specific Facility ID#, and families cannot schedule a FieldPrint appointment without this number. If you do not know your facility ID #, please call OBI at 804-726-7884.
- Please remind families to bring two forms of identification with them to the FieldPrint appointment as specified in the user-guide.
- Make sure families check the appropriate box, as described below:

FieldPrint Code:	Family Type:
FPVADSSPublicCPAFost	Non-relative AND Kinship/Fictive Kin Resource Parents (Kinship resource parents need to respond “yes” to the question “Are you a kinship foster parent?” on the Additional Information tab when making the Fieldprint appointment.)
FPVADSSPublicCPAHouse	All adult household members who are not the resource parents (relatives or not)

- OBI will electronically send the determination letter with results to the LDSS point of contact. Determinations include:
 - Eligible: may be approved as a resource parent
 - Not Eligible: NOT eligible to be a resource parent

2.) To do a hard check for CPS central registry, LDSS should complete the Central Registry Portal for all adults in the home.

- [Quick Reference Guide for LDSS](#)
- The LDSS will be billed a \$10 processing fee upon completion of the search by OBI.
- A “no matches” determination letter will be sent electronically to the LDSS point of contact.
- If any resource parents or adult household members have resided outside of Virginia within the past 5 years, CRS searches should include those states. For kinship resource families, this process should not hold up or delay a placement. To request Adam Walsh Child Abuse Registry Checks from others states use this [link](#) from the OBI FUSION page.

Physical Home Environment Checklist

When placing a child in foster care with a relative, a Virginia State Police name search and search of the CPS Central Registry through Child Welfare Information System must be completed to confirm eligibility for approval prior to conducting a home visit. For kinship placements, local department staff must visit the home before or on the day of placement to verify safety. Completion of this checklist must be documented in the Child Welfare Information System. This form is used also with non-relatives with the Checklist for Initial Provider Approval.

Provider Name/s: _____ Date: _____

Address: _____

Household members: _____

Standards for approval – Must be visually verified

The home has enough appropriate space/furnishings for each child receiving care in the home, including:

- _____ Space to keep clothing and other personal belongings (**LDSS may utilize non-safety waiver**)
- _____ Accessible basin and toilet facilities
- _____ Space for play and recreational activities (**LDSS may utilize non-safety waiver**)
- _____ Space for each child sharing a bedroom to have personal space, including a closet/storage (**LDSS may utilize non-safety waiver**)
- _____ Sleeping space provided on the first floor of the home for a child unable to use stairs unassisted, other than a child who can easily be carried.
- _____ Safe and comfortable sleeping arrangements
- _____ Rooms used by the child that are well-lit, heated in the winter, dry, and well-ventilated
- _____ Drinking water is available to children at all times

Emergency Protocols

- _____ Provider and child(ren) will have access to a working telephone in the home (landline OR cell phone without a privacy lock/security barrier).
- _____ Emergency Evacuation Plan is complete and posted where child(ren) can see it.
- _____ Provider has the CPS hotline number, 1(800)552-7096, listed on the Emergency Evacuation Plan.
- _____ Provider can arrange for a responsible adult caregiver in case of an emergency, and has contact info listed on the Emergency Evacuation Plan
- _____ Provider has a plan for emergency provisions such as food, water, batteries, flashlights, etc.
- _____ Provider will permit a fire inspection of the home by appropriate authorities, if conditions indicate a need and the local department requests one
- _____ Provider's home has an operable smoke detector (on each level of the home) and is in compliance with local requirements regarding fire safety. **Provider should push smoke detector test button to verify that it is in working order.**

Home Safety Measures

- _____ Possession of all weapons in the home, including firearms, complies with federal and state laws and local ordinances
- _____ **Visual verification** that all firearms and other weapons (such as BB and air guns) are stored with safety mechanisms activated, in a locked closet or cabinet. Ammunition is stored in a separate and locked area. The key(s) or combination to the locked cabinet/closet is kept out of the reach or knowledge of all children.
- _____ Household pets are current on all required vaccines, and do not present a health or safety hazard (**LDSS may waive for relatives**)

- _____ The home and grounds are free from litter and debris, and present no hazard to child safety
- _____ All cleaning supplies and toxic substances are stored away from food and locked as appropriate.
- _____ All medications are out of the reach of children and locked as appropriate. Medications are stored separately from food, except those medicines that require refrigeration.
- _____ The home contains basic first aid supplies
- _____ If requested to do so, the provider will allow other safety-related checks or verifications (e.g. well water tests, electrical safety, home structure stability, accessibility, lock for pool area).

Standards of care for continued approval

- _____ Providers will ensure the child(ren) receives meals and snacks appropriate to his daily nutritional needs. The child(ren) will receive a special diet if prescribed by a licensed health care provider or designee or in accordance with religious or ethnic requirements or other special needs
- _____ Providers will ensure that child(ren) have clean and seasonal clothing appropriate by age and size.
- _____ Providers and other individuals providing child transportation have a valid driver's license, registration, inspection sticker, and auto liability insurance
- _____ The vehicle used to transport the child(ren) will have a valid registration and inspection sticker
- _____ Providers and other individuals in the home understand requirement for transporting children in approved functioning child restraint devices (e.g. car seat) in accordance with state law. **If transporting the child requires a car seat the worker should verify that the provider has a car seat and understands how to properly install it.**

Standards for approval- Discussion with provider to verify compliance is required

- _____ No child(ren) over age 2 can share a bed.
- _____ No child(ren) over age 2 can share a bedroom with an adult, unless it has been approved by the local department of social services.
- _____ No child(ren), regardless of age, will share a bed with an adult.
- _____ Children of the opposite sex over the age of 3 will not sleep in the same room. **(LDSS may utilize non-safety waiver)**
- _____ No children under age 7 (or children with disabilities) can use the top bunk of bunk beds.
- _____ Provider will not use corporal punishment, including but not limited to withholding food, forcing naps, or punishing toilet accidents. Discipline will not humiliate or frighten the child(ren).
- _____ Providers will immediately report cases of suspected child abuse, neglect, or other dangerous situations, as required of all mandated reporters.
- _____ Providers understand they may not discriminate on the basis of race, color, sex, national origin, age, religion, political beliefs, sexual orientation, disability, or family status.
- _____ Providers will inform LDSS as soon as possible but no later than 45 days before a significant change occurs in the household composition or circumstances.

The provider's home environment meets health standards for home approval.

LDSS Staff _____ **Date:** _____



Permanency Assessment Tool

Assessed Relative/Fictive Kin: _____

Child(ren): _____

Assessor Name: _____ Assessment Date: _____

It is crucial that children are immediately placed with relatives/fictive kin when it is determined that they cannot remain safely in their home. This tool must be completed anytime throughout the child welfare continuum when there is a need for a child to be placed outside of their home. This tool must be used to assess relatives/fictive kin for alternate living arrangements and kinship foster care.

The purpose of this tool is to engage families and understand what is needed for the best outcome for the child(ren) and family.

Relative and Fictive Kin Options	
Parental Child Safety Placement	Relative and Fictive Kin Resource Family
Background Checks <ul style="list-style-type: none"> • Every adult 18+ in the home will need criminal history inquiry completed in Accurant. • Every adult 18+ in the home will need child welfare history inquiry completed in OASIS. • Substance use inquiry and assessment. 	Background Checks <ul style="list-style-type: none"> • Every adult 18+ in the home will need criminal check/Central Registry • Every adult will need to do Fieldprint criminal checks within 72 hours of placement. All household adults will need current ID for Fieldprint • Anyone transporting child will need DMV check (inquire about any recent driving offenses/number of points on license).
Home Visit <ul style="list-style-type: none"> • Complete home visit prior to placement. 	Home Visit <ul style="list-style-type: none"> • Complete home visit prior to placement.
Household safety <ul style="list-style-type: none"> • Guns (need to be locked/stored separately from ammunition) • Prescriptions/alcohol/cannabis • General safety 	Household safety <ul style="list-style-type: none"> • Guns (need to be locked/stored separately from ammunition) • Pets (need to be up to date on vaccinations) • Smoke alarms (must have them and be functioning) • Prescriptions/alcohol/cannabis • General safety
Additional Information for Parental Child Safety Placements is available on the Criminal History and Child Welfare Inquiry Job Aids available on FUSION.	Health Examinations (within 6 months of placement) <ul style="list-style-type: none"> • Resource parents must have a physicals completed (physical is no older than 13 months from approval). • All household members must have TB screens completed (no older than 13 months from approval).
	Training/expectations (within 6 months of placement) <ul style="list-style-type: none"> • Mandatory pre-service resource parent training (Traditions of Caring preferred) • Mandated Reporter online training • 3 personal references required

- Home study interviews (minimum of 3)
- Monthly home visits
- Agreement to not use corporal punishment with child in foster care
- Divorce/marriage documents
- Copies of paychecks/income verification

Additional Information for the Relative and Fictive Kin Resource Family:

Bring the Kinship Care Brochure, a current barrier crime list, Fieldprint instructions including list of accepted forms of ID, Central Registry Search portal access (for all adult household members), and DMV record check forms.

For those being approved as kinship resource parents: following completion of this tool, a visit to the home, clear Virginia State Police name searches on all adult household members and clear searches of the CPS Central Registry through OASIS for all adult household members, children may be immediately placed with kinship resource parents. Upon placement, the LDSS should submit a [Kinship Foster Parent Waiver](#) allowing 6 months from the date of placement for completion of all elements of approval.

If proceeding with imminent kinship approval and placement, provide fingerprinting directions and complete Central Registry portal for all adult household members.

If approving relative as kinship resource parent but placement is NOT imminent, develop plan to engage relative with supporting relationship with child/youth, in Tradition of Caring training and proceed with approval process.

If denying approval, notify the relative by US mail with Notification of Denial & Appeal letter found on FUSION within 10 business days of denial. A copy of the Notification of Denial & Appeal letter must be emailed to your Regional Resource Family Consultant.

The remaining categories of this assessment are useful for discussion purposes, getting to know the family and to anticipate topics that will need to be problem-solved, coordinated or addressed so that the kinship placement is successful and best interest of the child/youth is the focus.

Parental Child Safety Placement: Ask assessment questions denoted in orange boxes after the completion of the safety assessment and prior to the child's placement in the home. Ask remaining assessment questions prior to the 5-day FPM.

Relative and Fictive Kin Resource Family: Ask all assessment questions prior to the FPM.

Household Configuration

Make-up of family

Discuss/consider impact of placement on current household members

Condition and layout of home

Discuss bedrooms/sleeping arrangements

Daily routine Discuss schedule and how caregiving of child in will fit into routine	
Financial stability Discuss financial resources/budget and related stress. Inform kin of financial supports/benefits available, if approved or not while caregiving.	
Housing stability Rent/own home? Length of time at address	
Neighborhood Describe resources, support and culture	
Traditions/Culture holidays, birthdays, special celebrations	
Upcoming family changes or needs	
Prospective Kinship Caregiver	
Relationship and history with birth parents and with the child(ren)	

<p>Boundaries with the birth family Discuss how they will handle parent coming to home/asking for time outside of approved LDSS family time</p>	
<p>Conflict management How do you handle conflict within your intimate relationship? How do you handle conflict with others generally?</p>	
<p>Natural Supports Who do you turn to for support? Any family/friends/community members who could help them</p>	
<p>Alcohol and Substance Use Assessment: - Does anyone in the home have a history of or currently use drugs, whether illegal, prescription meds and/or marijuana? Amount and Frequency of using? - If the assessment indicates testing/screening is needed, discuss the potential need for substance use testing/screening - Discuss findings and impact of findings on caregiving ability and child safety</p>	
<p>Physical and mental health stability Ask them about any diagnoses or medications (both for physical and mental health needs)</p>	
<p>Criminal and child welfare history inquiry Discuss findings and impact of findings on caregiving ability and child safety</p>	
<p>Primary caregivers</p>	

Views on supporting and being a part of family time/visitation	
View of current case goal Discuss all permanency options. Would they consider being a permanent option if needed?	
Relationship stability What is your marital/relationship status and history?	
Professional and DSS Supports What kind of supports would you need from DSS?	
Parenting	
Trauma-responsive parenting Briefly explain the impact of trauma on development and behaviors and that behaviors are communication. How will you alter your parenting/discipline?	
Parenting experience	
Discipline used Will they comply with Discipline Agreement?	

<p>Parenting this child Provide examples of child's current/past behaviors and ask "How would you respond to these behaviors?"</p>	
<p>Standard of normalcy What is your attitude towards a child having friends over/participating in extracurricular activities?</p>	
<p>Child's Needs</p>	
<p>Understanding of child's current level of functioning/ needs</p>	
<p>Managing expectations Provide information regarding child's special needs, diagnoses, and trauma history.</p>	
<p>Deal-breaker behaviors for this child being placed in your home</p>	
<p>Willingness and availability to get child to/from necessary appointments Child will have a variety of appointments relating to family time/ visitation and medical/dental/emotional needs.</p>	

Sibling groups- Would you be willing to accept placement of sibling sets in your home? Do you have any concerns about the siblings' relationship/interactions?	
--	--

This completed Permanency Assessment Tool must be maintained in the child's case record.

Additional Notes:

How to Schedule a Fieldprint® LiveScan Appointment

Below is a step-by-step guide to schedule a Fieldprint® LiveScan appointment for a fingerprint-based criminal background check.

1. Access the Virginia Fieldprint® website at <https://fieldprintvirginia.com/>
2. Click “Schedule an Appointment” button.
3. Follow the on-screen instructions to register with Fieldprint® or log-in if you are an existing user.
4. On the “Reason” screen enter your Fieldprint Code. You cannot continue to schedule the appointment without this Code. If you lose your Fieldprint Code, contact OBI at 804-726-7884.
5. Complete demographic information.
6. Under “Additional Information”, enter your “Facility ID” number found in the letter from OBI. You cannot continue to schedule the appointment without this ID. If you lose your Facility ID, contact OBI at 804-726-7884.
7. If you have lived out of state in the past five years enter each location and dates starting with the most recent. If you have had more than five addresses out of state in the past five years enter the five most recent addresses.
8. Make sure that the “Facility ID” you entered is correct and the facility you are being fingerprinted for is shown. If it is not correct, select back and re-enter the ID or contact the person who gave you the number.
9. Read through the “Authority for Release of Information”. Check the “I Agree” box and provide information requested.
10. The “Find a Location” screen will have your home address. If you want to use that address select the “Find”. If you want to enter a different address (ex. your work address) enter that address to find Fieldprint® locations nearest to you.
11. Schedule an appointment by selecting a location, date, and time and selecting the “Schedule” button. You will see a pop up, select “Continue” if you are going to keep the appointment and “Cancel” if you want to choose a different time.
12. Print appointment confirmation (includes the Fieldprint® Registration number located above the appointment date & time) and bring it along with two forms of identification (one must be a picture ID). The appointment cannot be completed if these items are not present.

Acceptable Primary IDs include:

State-Issued Driver’s License
U.S. Passport
Work Visa with Photo
DOD Common Access Card

State-Issued Non-Driver’s License ID Card
Military Identification Card
Foreign Passport
Foreign Driver’s License

Acceptable Secondary IDs include:

Credit Card/Debit Card
Birth Certificate
Citizenship or Naturalization Certificate
School ID w/Photograph

Bank Statement/Paycheck Stub
Marriage Certificate
Electric/Utility Bill
Vehicle Registration/Title

Voter Registration Card

Social Security Card

Native American tribal document

Draft Record

Transportation Worker ID Credential (TWIC Card)

Permanent Resident Card (I-551)

13. Attend the appointment; rescheduling fees will be assessed if you fail to appear for your appointment or cancel within 24 hours of the scheduled appointment time.

Due Date Calculator for Kinship Resource Family

FILL IN ONLY SHADED FIELDS

Step 1 Prospective Kinship Resource Family

A. Enter the date the relative/fictive kin expresses interest in being a placement

B. When is the Kinship Resource Family Approval Process document due to the family? *(15 calendar days)*

C. When was the Kinship Resource Family Approval Process document sent?

D. When was the Permanency Assessment Tool completed?

E. Was it determined to be in the child's best interest to be placed with the prospective kinship foster parent? (Y/N)

If "Yes", then continue to Step 2

If "No", then answer questions F-J below.

Step 2 Before Placement

A. Enter the date the placement began in the kinship resource family

B. Date the last "soft" check was completed (OASIS/VA Police Name Search)? *(due prior to or on the date of placement)*

If there are no barrier crimes or CPS findings, then proceed to the next step.

C. When was the Physical Home Environment Checklist completed? *(due prior to or on the date of placement)*

D. Add the dates from Step 2 section B&C to the initial provider checklist and upload to the provider tab in COMPASS.

E. Complete the Permanency Assessment Tool if not already completed

Step 3 The Day of Placement

A. Plan for hard checks need to be completed within 72 hours of placement for all adult household members

1. Assist family is setting up FieldPrint appointments if needed

2. Submit Central Registry Search through OBI portal. Confirm if out of state CPS checks are necessary for all adult household members who lived outside of VA within the previous 5 years.

B. Review and obtain kinship resource parent's signatures of the following forms:

Sworn Statement, Confidentiality agreement, Discipline Agreement, Foster Care Agreement/Code of Ethics, Financial Agreement, and W9

C. Review and leave with kinship resource parent all additional approval paperwork and explain deadlines

Step 4 Within 72 hours of placement

A. Complete Kinship Foster Parent Waiver and submit it through Qualtrics within 72 hours of placement

The Confirmation email for the kinship waiver needs to be uploaded into COMPASS.

B. Submit Central Registry Search through the OBI Portal within 72 hours of placement. It is due by:

C. Confirm FieldPrint appointments are completed within 72 hours of placement. It is due by:

Update checklist with the dates the checks were requested and upload to COMPASS

D. Ensure Paperwork (W9) has been submitted for placement reimbursement.

Step 5 Funding

A. When was the **first** criminal record check and/or CPS background check received from OBI (MM/DD/YYYY)?

B. When was the **last** criminal record check and/or CPS background check received from OBI (MM/DD/YYYY)?

Update the checklist with these dates and upload to provider file in COMPASS

C. Date the COA started (MM/DD/YYYY)? *(the COA start date cannot be prior to the last background check in Step 5.B.)*

Upload the COA to the provider file in COMPASS

D. The background checks needed to be completed from to

E. Are the background check dates on the determination letters from OBI within 120 days of the COA? (Y/N)

F. When can title IV-E funds begin?

G. Due Date when the kinship waiver requirements need to be completed for placement? (6 months to the day)

H. Due Date when the kinship waiver requirements need to be completed for funding? (6 months to the day)

I. If the waived requirements are not met by the date above, then the IV-E funds need to stop on

J. When were the kinship requirements met?

K. Title IV-E funds can resume on

L. Upload the completed Kinship Waiver email from Qualtrics and the completed checklist to COMPASS

M. When will the background checks expire for **the kinship resource home** (CRC = Criminal Record Check & CPS = Central Registry Check)

<u>Person</u>	<u>CRC received date</u>	<u>CRC due date</u>	<u>CPS received date</u>	<u>CPS due date</u>
Person #1				
Person #2				
Person #3				
Person #4				
Person #5				
Person #6				



Checklist for Initial Provider Approval

Based on 22VAC40-211

Agency: _____

Type of Provider Approval: ☐ Dual ☐ Respite Only

ICPC # (if applicable): _____

Applicant A: _____

Applicant B: _____

Other adult caregivers in the home: _____

Background Checks:

Adoption reminder: Approval must be maintained until finalization and federal criminal checks completed within 18 months of finalization

Requirements to initiate placement in a kinship foster home:

Names of All Adult Household Members	VA State Police Name Check		OASIS Search	
	Requested date	Results date	Requested date	Results date

Date of Physical Home Environment Checklist: _____

Has a kinship foster parent waiver been submitted? ☐ Yes ☐ No ☐ N/A Date kinship waiver expires: _____

Requirements for ALL foster home approvals:

Names of All Adult Household Members	Federal Fingerprint Criminal Record Check		VA Central Registry & CPS from Other States		DMV Check For Caregivers & Household members		Sworn Statement
	Requested date	Results date	Requested date	Results date	Requested date	Results date	Date signed

TB Information:

Names of All Household Members	TB Screen Date	TB Test Date	Results

Physical Exam Information:

Names (For Adult Caregivers Only)	Physical Exam Date	Results

Checklist for Initial Provider Approval

Based on 22VAC40-211

Yes (Date Verified)	No (Notes or action taken)	Requirement Check "Yes" or "No" or mark "N/A" for each item
Documentation		
		Applicant A is at least the age of 18
		Applicant B is at least the age of 18
		Applicant A has reviewed and signed the Confidentiality Agreement
		Applicant B has reviewed and signed the Confidentiality Agreement
		Applicant A has reviewed and signed the <i>Discipline Agreement (formerly Corporal Punishment Agreement)</i>
		Applicant B has reviewed and signed the <i>Discipline Agreement (formerly Corporal Punishment Agreement)</i>
		Applicant A has reviewed (and signed, if a child is placed) the Code of Ethics
		Applicant B has reviewed (and signed, if a child is placed) the Code of Ethics
		<i>Applicant A has reviewed and signed the Foster Parent Bill of Rights & Dispute Process</i>
		<i>Applicant B has reviewed and signed the Foster Parent Bill of Rights & Dispute Process</i>
		Three face-to-face interviews have been conducted (Dates: _____, _____, _____)
		Financial/Employment History verified <i>(Not required for respite provider).</i>
		Pre-Service Training Completed for Applicant A
		Pre-Service Training Completed for Applicant B
		<i>Mandated Reporter Training for Applicant A</i>
		<i>Mandated Reporter Training for Applicant B</i>
		Marriage certificate of Applicant A <i>(visually verify if applicable)</i>
		Marriage certificate of Applicant B <i>(visually verify if applicable)</i>
		Divorce decree of Applicant A <i>(visually verify if applicable)</i>

Checklist for Initial Provider Approval

Based on 22VAC40-211

Yes (Date Verified)	No (Notes or action taken)	Requirement Check "Yes" or "No" or mark "N/A" for each item
		Divorce decree of Applicant B <i>(visually verify if applicable)</i>
		Has a non-safety waiver been requested and paperwork submitted to Regional Office for approval
		Has the applicant previously applied to or was approved, denied, and or closed by any other local department or licensed child-placing agency?
		If answer to previous question is yes, has the provider signed a request to release information?
		<i>The Physical Home Environment Checklist was completed and the home meets standards of approval.</i>

Non-required Criteria Suggested to Review with Provider:

Discussed	Criteria
	Challenging behaviors as communication and meeting a child in care's needs
	Keeping family connections for children/youth in care
	Foster families as a support and not a substitute
	Dangers of smoking (second-hand smoke) in a closed environment with child.
	Safekeeping of age-restricted substances and over-the-counter medications.
	Safekeeping of car keys.
	Carbon monoxide detector/testing.
	Making childcare arrangements.

Completed by: _____ Signature: _____

Date Completed: _____ Projected Date for Re-Approval (3 years): _____

Resource Family Tip Sheet

OASIS: Entering a Resource Home

Reminders:

- Complete a thorough search before adding a new resource to avoid duplicate entries. There are more resource screens available in OASIS than are covered in these instructions. LDSS may decide to create local policy around required use of additional screens.
- Homes are entered into the Resource Directory of OASIS once they are approved:
 - Non-relative approvals: once the home is fully approved.
 - Kinship approvals: at the time of placement and within 5 calendar days of placement
- The Home Office enters all Residential Facilities, hospitals, detention centers, Licensed Child Placing Agencies (LCPA - Contractors), etc. Contact VCCC at (866) 637-8482 to have a state licensed facility entered into the system. Local agencies are responsible for entering the LCPA family information (see below for instructions).

RESOURCE ENTRY STEPS:

1. After logging onto OASIS, select **Resource** on the main toolbar and then **Directory**.
2. The Find Resource box will pop up on the screen. In that dialog box, select **New**.
3. **Resource General Information Screen (Info Button):**

OASIS will automatically navigate to this screen and the following are mandatory fields:

- Resource Category: select **Foster Family**
 - Resource Type: select **LDSS Home** (or LCPA Home if this is for a TFC foster home)
 - Start Date - date the resource is available/active (defaults to the current date, but should be changed to the date of the resource home's approval date on the Certificate of Approval)
 - Resource Name
 - Agency - this field is completed on a conditional basis. If the type is LCPA- Homes, a list of state licensed LCPA - Contractors will display here. Select the appropriate agency, otherwise this should be left blank. If a state licensed facility or LCPA does not display here, contact the VCCC at (866) 637-8482.
 - First, Middle, Last Name - Complete for an individual. For couples, please use the person that would be considered the Head of Household 1 or the person whose name would be on the maintenance payment.
 - SSN - optional
 - Family Structure - choose the category that best describes the foster family.
 - Gender Accepted - choose one of the selections.
4. Select **Add** when finished entering information on this tab.
 5. The Assign/Transfer dialog box displays for LDSS homes for FSS assignment:
 Select **Cancel** to automatically make the assignment based on the FSS signed on to the system. Select **New** to assign the resource to another FSS. Complete the transfer information and Summary box.
 6. Select **OK** and then **Cancel** when the General Information screen has been completed.

While still on the General Information screen, select the **Address** tab:

- Select the Address Format. This defaults to Street Address but may need to be changed.
- Select the Address Type. This defaults to Physical but can be changed. (There must be one Physical address for each resource.) If there is a separate mailing address (ie a PO Box), this can be added after completing the initial address. Select "Clear" and then choose "mailing" as the Address Type.
- Enter a Start Date for the resource address. (This should be the approval date on the Certificate of Approval and should match the Start Date on the General Info Tab)

Resource Family Tip Sheet

OASIS: Entering a Resource Home

- Complete the Street Number, Name, Suffix, City, State, and Zip sections (this should be the same address that is on the Certificate of Approval)
 - An end date would not need to be entered unless the family relocates to another address.
 - Complete the “Phone Numbers” section by adding the contact number listed on the inquiry/application form.
 - For LDSS Home, the Added by: field should indicate the LDSS approving the home and for LCPA Homes, this field should reflect the locality in which the LCPA home is physically located.
7. Complete additional fields as desired for the resource. Entering complete address and name information will make it easier to see if another resource in OASIS is the same and should be merged. Resource Reports also pull information for FSSs from these screens. Accurate and complete information provides for data integrity, thus making reports and data collection more useful.
8. Select **Add** to save the information before canceling or attempting to leave the screen.

Note: If a Foster Family/LDSS Home or Foster Family/LCPA Home resource is added to the General Information screen, the Vendor Update Confirmation dialog box displays. The radio button defaults to Print, Vendor Update Request Form. **FSSs simply need to select the Do Not Print, Vendor update Request Form radio button. After making the selection, select Close. The Resource General Information screen will reappear.**

The Vendor Update Request Form is also located within the Resource Report button, when a specific Resource is in view. FSSs are not able to preview the form but can print it.

STATUS Button:

9. Select the **Status** button. The information that is completed on the Status screen is dependent upon the type of resource being added.
- Examples:
 - For LDSS approved Homes, the types of Availability and Home Study must be completed.
 - For LCPA approved Homes, the screen is not required at all since the LCPA does the approval unless the LDSS wants to indicate Availability.
 - For an Independent Living resource, only Availability is required.
 - The steps to completing the Status screen:
 - On “Status Type” select Home Study.
 - On “Status” select Approved.
 - On “Family Assessment/Home Study/Approvals” complete the Status Date. This would be the day the MFA is signed by the supervisor.
 - Select **Add**. The Re-approval Due Date will automatically populate to 3 years after the Status Date (end of the month); however this date should be corrected to reflect exactly three years later from the status date and then select **Change** to save the correct date.

Note: On the Status screen, a Supervisor Approval is required when the Home Study status is selected.

- Select the **Approval** button and the Request checkbox and select **OK**.
- With security clearance (Level 3) to complete approvals, also select the Approval checkbox. If not, the request will be sent to the supervisor's box for approval.
- Select **Clear** to create a new line or row on the Status screen.
 - On “Status Type” select Availability

Resource Family Tip Sheet

OASIS: Entering a Resource Home

- On “Status” select Available
- On “Availability” enter the date the home is available, which should coincide as follows:
 - For kinship approvals, the date of placement for child.
 - For non-relative placements, the Certificate of Approval “begin” date.
- Select **Add** and then **Cancel** to complete the status screen

HOMES:

- This screen is not completed for independent living resources and residential facilities.
- This is a screen with 3 tabbed sections: Information, Individual Check and Training.

10. Select **Homes** on the bottom row, then the **Members** button to input the following information about the resource household members: The Path is: Resource/Directory/Homes/Members.

Information Tab: (Resource demographics are required for AFCARS)

- Complete the following on this tab:
 - First name
 - Last Name
 - Date of Birth
 - Gender
 - SSN (not mandatory)
 - Hispanic: select appropriate response
 - Head of Household 1 and/or 2: This is connected to what is selected on the Family Structure section on the General Info Tab under the Information screen and must be completed for all Resource Homes.
 - Race - Primary
 - Federally Recognized Tribe: Select appropriate response.
 - Languages (select all that are applicable)
 - Select **Add**.
- To add another household member, select **Clear** and enter the new member's information. If “married couple” is chosen as the family structure, then the spouse must be entered as Head of Household 2. All other adult household members must be entered as well with N/A chosen after the Head of Households have been selected.

Individual Check Tab:

This section is used to record the following information:

- CPS Clearance
- Criminal History: National
- DMV
- TB Test
- Criminal History: State
- Criminal History: Local
- Sex Offender Registry Check
- Medical Examination/Report
- Employment History
- Reference

Resource Family Tip Sheet

OASIS: Entering a Resource Home

- Other Verification

To complete this screen, highlight the member's name in the Household Members grid (on the Information tab) and select the Individual Check tab for the highlighted (in blue) household member.

- Select **Insert** to get a blank record to display and complete:
 - Verification Type
 - Requested Date
 - Received Date
- Select **Change**.
- Select **Insert** to add another verification.
- Repeat this process for the other remaining household members

Training Tab:

This section is used to track training attended by the resource parents listed as household members. The following training types can be entered:

- Adolescent Issues
- Behavioral Management
- Business
- Child Education
- CPR Certification
- First Aid
- Infant/Toddler Development
- Medical
- Nutritional
- Other Training
- Preschool Development
- Pre-Service
- Provider Development
- Safety

Steps for data entry are much the same as the Individual Check tab.

- Select **Insert** to get a blank record to display and complete:
 - Training Type
 - Invitation Date
 - Completion Date
 - Hours Completed (utilize for tracking in-service hours)
 - Comments (if needed for clarification or additional details)
- Select **Change** to save the information.
- Select **Insert** to enter additional training.
- Select **Cancel** to leave the Members screen.
- Repeat this process for all remaining adult household members.

Resource Family Tip Sheet

OASIS: Entering a Resource Home

COMP:

After completing the Members section, move one button on the bottom toolbar to the right and click on **Comp**. Under “Household Composition” complete the relationships of those listed on the household members tab in relation to the person identified as the Head of Household. Select the appropriate Relationship in the drop-down list and then select **Change**. Household members must have the Information tab on the Members screen completed prior to the completion of this screen.

Note: This screen must be completed for Resource Homes if there is more than one household member.

The additional screens in this section are as follows and can be completed as needed:

- **Svs to Res:** Services Provided to Resource - provides a way to track services given to the resource parent.
- **Eval:** Resource Evaluation - provides an area to record special evaluations completed on the resource parent.
- **Verify:** Resource Verification - an area to record verifications that are not specific to a household member, such as fire inspection, water/sanitation inspection, pre-service and in-service training,
- **Assessment:** - Adoptive Home Family Assessment - for Adoptive Homes.

CONTACTS:

- Add meaningful contacts with the family that occurred before approval.
- Add the 3 face-to-face visits with family completed during MFA process.
- Add contacts between Resource FSS and MFA assessor into contacts.
- Add contacts for ice-breaker meetings as this is a purpose picklist for contacts.
- *For Kinship Homes*, the following are contact purposes on the picklist: Permanency Assessment Tool, Contact with Relative, and Out of Home Staffing. These purposes allow for documenting the work that has been done to discover, engage, assess, and utilize kinship connections for children entering foster care, or those in care who might experience a placement change.
- For more information, related to on-going documentation needed in the CONTACTS screen, please see the **Updating a Resource Home Oasis Tip Sheet**

NOTE:

Please remember that as part of the QAA review process now, the following items are expected to be uploaded to COMPASS|Portal as part of the Resource Family File:

- Certificate of Approval (COA)
- Checklist for Initial Provider Approval and Checklist for Re-approval
- Financial Agreement (should already be there as part of the child’s case record)
- Non-conviction letter
- LCPS license that covers the entire period of the home’s COA
- Kinship Waivers: Qualtrics will email notifications at the points of waiver submission and completion. These are uploaded as PDFs

Kin First Now Power BI User Guide

Requesting Access (State and Full Support Local Agency Employees)

- Download and open the [PowerBI access request form](#)
- Follow the instructions on the first page of the form. There are separate instructions for the Requestor, Supervisor/Lead, System/Data Owner, and the Local Security Officer.
- In the top section enter information about the requester, their Supervisor, and their Director.
 - If your Supervisor is also your Division Director, enter their information on both lines.
- Enter your work telephone number, COV email address, and COV ID/Alias (**not your LDAP ID**). If you do not know your COV ID, please leave it blank. ISRM will look up the COV ID based on the email address entered in the form.
- Select the appropriate box for Employee Type.
- The next section has been filled out for you. It should look like this:

ADD <input checked="" type="checkbox"/> REMOVE <input type="checkbox"/>			Access Justification – For each role requested, provide in the space below the job duty that requires the access.
Environment	Worker Role	Location	
Production	DWH DFS Statewide	Statewide	Monitoring and tracking kinship outcomes
Choose an item.	Choose an item.	Choose an item.	Click or tap here to enter text.
Choose an item.	Choose an item.	Choose an item.	Click or tap here to enter text.
Choose an item.	Choose an item.	Choose an item.	Click or tap here to enter text.
Choose an item.	Select User Group	Choose an item.	Click or tap here to enter text.

- Leave the following section "PowerBI Roles" blank. This does not apply to end users.

Power BI Roles	Type	Environment	Access Justification
Power BI Developer	Choose an item.	Choose an item.	Click or tap here to enter text.
Power BI Publisher			Click or tap here to enter text.
Power BI Administrator – Limited use			Click or tap here to enter text.
Power BI Notifications	Choose an item.		Click or tap here to enter text.

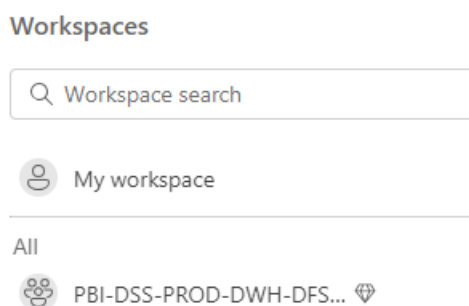
- In the last section, ISRM requires approval from the following parties in the order they are listed: 1. Requester (User requesting access) 2. Supervisor (if applicable), 3. System/Data Owner, and 4. Security Officer. The Requester and their Supervisor should sign and date the form. A typed signature is sufficient. The VDSS Commissioner is not required to obtain their Supervisor's approval. Leave this field blank.
- As the system owner for the PowerBI workspace hosting the KFN dashboard, VDSS Division of Family Services (DFS) must approve access. Please submit your request form via email to the DFS Data Manager, Nancy Campos

(nancy.campos@dss.virginia.gov). **Expect 3-5 business days for DFS to process your form and return it to you.**

- Once approved by the system owner, forward the signed form to your local security officer (LSO). The LSO will review the form and sign under "Security Officer Approval".
- Following the steps outlined on page 1 of the Access Request Form, the LSO must open a ticket to submit the request electronically via the Service Now portal.
 - Remember to attach the signed Access Request Form to the ticket.
 - Insert instruction to have the request routed to the DSS-INFORMATION SECURITY-RISK-MGMT group. ISRM has the final authority to grant access.
 - The LSO will be updated about the status of the ticket and when access is granted.








Access:

- Once the user has submitted the Power BI access form and received approval, they can access Power BI here: <https://app.powerbigov.us/home> or in your Microsoft Apps.
- When you open your Power BI home page, the dashboard will be shown under 'Workspaces' in the 'PBI-DSS-PROD-DWH-DFS-STATEWIDE'.

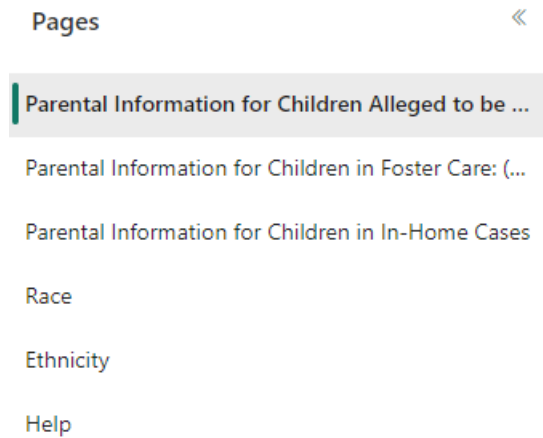


Reports Included:

- The Kin First Now Power BI dashboard includes various measures in different reports. The user will be able to select which report to view by clicking on the report name.

	Name
	KFN01- Discharged to Father or Paternal Relative
	KFN02-First Placement and Legal Basis for New Entries into F
	KFN03- Parental Information for Children
	KFN05- Placements for Children in Foster Care (Under 18)
	KFN06 Placement Settings in Foster Care Episodes (Under 18)
	KFN07 - FPM Parental Participation

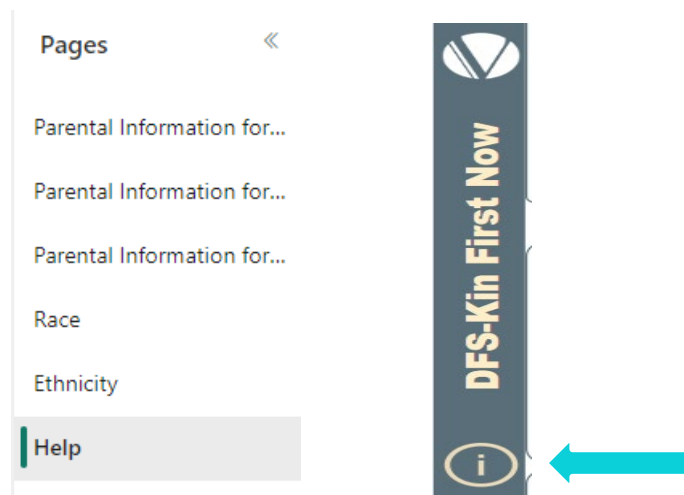
- In the KFN report, there will be multiple pages the user can navigate through to view different data measures related to the main report. For Example, if the user selected KFN03 – Parental Information for Children the list on the left-hand side would show:



Power BI Features:

1. Help Page

- Each report has a help page that explains what data is included and defines the fields shown. The user can select the 'Help' tab under the Page list or click the information symbol found on each report.



2. Filters

Each report will have options filters at the top of the page.

- Select the Timeframe
 - Each page allows the user to select the timeframe of interest. By default, it is set to show the current state fiscal year.

From:

To:

Current SFY Start

Completed Month

- Changing the timeframe: The user can click the downward arrow and a list of months will populate to select

From:

To:

Current SFY Start

Completed Month

Sep 2024

Aug 2024

Current SFY St...

- Selecting Region or LDSS
 - The user can select one or multiple regions and/or agencies.

Region/Agency/Locality

All

Central

Eastern

Northern

★ In the filters a circle (O) indicates only one can be selected. A square (□) indicates multiple selections can be made by holding 'Ctrl' and clicking the selected filter options.

3. Counts/Percentages

- The tables and select graphs can be displayed by counts or percentages. The user can click the Counts/Percentages toggle option to change the table and select graphs.

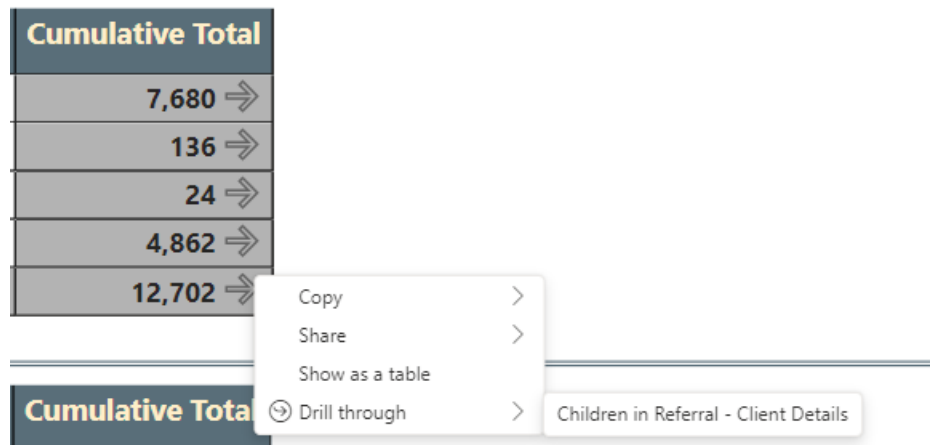
Counts/Percentages

4. Drill-Through

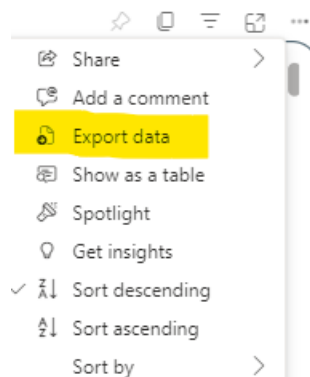
- Each report has an option to look at the raw data by using the drill-through feature. The Drill-Through feature is available on the numbers (counts) in the reports, any field with a drill-through option will have an arrow next to the number.

Cumulative Total
7,680 ➡
136 ➡
24 ➡
4,862 ➡
12,702 ➡

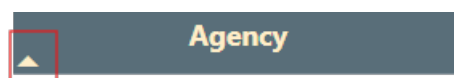
- The user will right click on the arrow, hover over the 'Drill through' and then click on the Client Details.



- Once the Drill-Through details open, the user can click the three dots at the top right of the screen to export the data

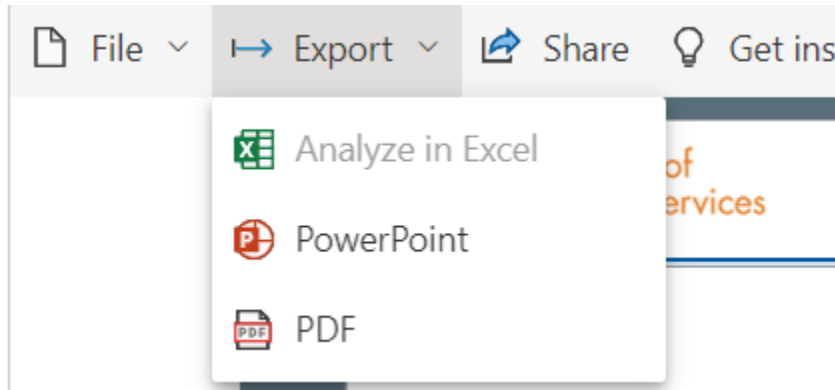


- The user can also sort the data by ascending/descending by clicking the arrow on the column headers.



5. Other General Features

- Export the KFN report pages
 - Each report can be exported to a PowerPoint or PDF.



Other resources are available on FUSION:

<https://fusion.dss.virginia.gov/dis/Technology-Services/Applications/Power-BI>

Recruitment, Development and Support of Resource Families

*Best Practice Framework*¹

“If you want to successfully recruit, retain, and partner with resource families, *treat them like gold.*”²

This document is not intended to be prescriptive; instead it is intended to provide a framework for improving the systems and practices that affect resource families. Overall, this framework describes what a successful system of recruitment, development and support for resource families would look like, acknowledging that all decisions about placement, as well as resource family recruitment and retention, must be guided by children’s best interests.

The term “resource families” includes all the types of families that care for children who cannot remain in their homes of origin, including foster, adoptive, kinship, and respite, recognizing that different types of resource families may have different kinds of specific needs.

Virginia Children’s Services Practice Model

All work related to recruitment, development and support of resource families must be grounded in Virginia Children’s Services Practice Model³:

- We believe that all children and communities deserve to be safe.
- We believe in family-, child-, and youth-driven practice.
- We believe that children do best when raised in families
- We believe that all children and youth need and deserve a permanent family.
- We believe in partnering with others to support child and family success in a system that is family-focused, child-centered, and community-based.
- We believe that how we do our work is as important as the work we do.



¹ Adapted from “Recruiting and Retaining Resource Families Breakthrough Series Collaborative: Collaborative Framework,” Casey Family Programs, 2003.

² Treat Them Like Gold, North Carolina Division of Social Services, Raleigh North Carolina, 2009.

³ Taken from Virginia’s Transformation for Children’s Services, 2008

⁴ Children in Kinship Care Experience Improved Placement Stability, Higher Levels of Permanency, and Decreased Behavioral Problems. ChildFocus, 2015.

Effective Recruitment, Development, and Support

Key Components

- 1. Recruiting Resource Families:** Recruitment of resource families prioritizes relative identification and child-specific recruitment; regarding prospective families in the community, maximizing targeted recruitment is preferred with minimal general recruitment.
- 2. Resource Family Development:** We embrace a kin-first culture along with a philosophy of “Selecting In” versus “Screening Out” when developing and assessing trauma-informed resource families.
- 3. Preparing and Supporting Resource Families:** Resource families have the trauma-responsive services and supports they need to provide appropriate care for children and their families, with special attention given to the unique needs of relative caregivers.

- I. **Recruitment of resource families prioritizes relative identification and child-specific recruitment; regarding prospective families in the community, maximizing targeted recruitment is preferred with minimal general recruitment.**
 - A. Utilize child-specific recruitment strategies to develop individualized plans for a specific child based on the child’s background.
 1. Make early and continual efforts to search for and recruit kinship care providers.
 2. Implement child centered family finding practices to identify a permanency resource among caring adults already connected to the child, including relatives, friends, or community contacts.
 3. Provide timely notice to relatives about options to become a resource family or other support for a child in agency custody.
 4. Implement strategies for recruiting “new” resource families not yet connected to the child as a permanency resource.
 5. Listen to and strongly consider the voices of children and youth in planning for their own lives.
 6. Educate, engage and develop effective partnerships with community organizations.

Create a sense of urgency for making the first placement a kin placement

Research shows kinship foster care is more stable than non-kin care and can help prevent disruptions that harm a child’s well-being.⁴ Kin-first systems invest necessary resources into making the child’s first placement a kin placement whenever possible. First placement with kin is key to reducing the trauma of being placed with someone the child doesn’t know, and it also helps ensure non-kin foster parents are available for children who don’t have viable extended family options for placement.

~American Bar Association

- B. Direct targeted recruitment strategies on specific families or communities who are best matched to meet the needs of the children in care.
 - 1. Develop a profile of the children in care in your locality, that includes number of children in care, how many are in each category by age group, ethnicity, and special needs (sibling group, medical, educational, or emotional needs, etc.), and where the children are placed.
 - 2. Conduct utilization studies on a regular basis of foster homes and capacity, including how many families there are in total, how many are in each category when broken down by ages of children accepted in the home, ethnicity, and willingness to care for special needs.
 - 3. Conduct a gap analysis; develop and implement a strategic recruitment plan.
- C. Use general recruitment strategies to raise community awareness of child welfare and foster care and adoption and to address public perceptions, myths, and misperceptions.

II. Resource Family Development: A Philosophy of “Screening In” vs. “Screening Out” is utilized in Recruiting and Developing Prospective Resource Families.

- A. Meet the special preparation needs of relative caregivers.
- B. Families who express an interest in becoming resource families receive immediate responses to their inquiries in ways that are welcoming, strengths-based, culturally appropriate, and in the language of their choice.
 - 1. Information is shared in an open and direct way between prospective resource families and the agency.
 - 2. The caller is given accurate and specific information about the children in care in the locality.
 - 3. The caller is invited immediately to an orientation session.
 - 4. An invitation packet is sent out to the caller within three working days of inquiry.
- C. Hold orientation (group or individual) on a regular schedule, in locations that are accessible for prospective resource families.
- D. Offer pre-service training on a regular basis and ensure that it is competency-based, includes foster/adopt parents as instructors, and birth parents, and foster/adopted youth as presenters.
- E. Develop a standardized process for conducting mutual family assessments that respect cultural beliefs and practices, include prospective families as partners, and incorporate a comprehensive assessment of the strengths and developmental issues of the family.
 - 1. Engage in assessment as a mutual process completed with families in a way that supports openness and information sharing and that leads to joint decision making
 - 2. Provide information/assistance to resource families during the background checks, fingerprinting, required inspections, and physical requirements.
 - 3. Complete home studies efficiently and effectively within 60-90 days after the application has been submitted or 30-45 days after the completion of pre-service training, whichever comes first.
- F. Develop relationships that support and value prospective resource families throughout the recruitment and development process.

- III. Supporting Resource Families: Resource families have the services and supports they need to provide appropriate care for children and their families.
- A. Prepare resource families, youth, and birth families for the initial placement of children in their care and for all transitions they face, including changing placements, reunification, adoption, and independence.
 - B. Openly share all relevant information (i.e., children's backgrounds, agency procedures, roles and responsibilities, agency expectations, resource family expectations, legal requirements) on an ongoing basis with resource families.
 - C. Create opportunities for resource families and the child's family to develop ongoing relationships in service of safety, permanency, and well-being for children in care.
 - D. Meet the special support and training needs of relative caregivers regarding issues such as managing family relationships, ensuring safety and establishing boundaries, and making decisions around permanency options (e.g., adoption, transfer of custody).
 - E. Support and respond to the challenges and needs of resource families *in a timely manner*, including providing ongoing training and linking them to community resources.
 - F. Minimize secondary trauma to resource family members by responding promptly to the needs of children placed with them.
 - G. Utilize an ongoing process to gather information about the needs of resource families and their overall satisfaction level regarding their relationship with the agency.
 - H. Recognize and acknowledge resource families for their expertise and service.
 - I. Ensure consistent communication among the full continuum of child welfare services – Prevention, Foster Care, CPS and Adoption so that all pertinent information is shared , all potential connections are identified, and the best possible placement is made.
 - J. Continually build resource family competence in supporting connections between children and their families, such as:
 - 1. working with birth parents and families;
 - 2. sustaining children's connections;
 - 3. supporting reunification or transitions to permanence;
 - 4. encouraging a positive family time/visitation experience with parents, siblings, and/or extended birth family, recognizing these as critical elements of the service plan (as opposed to privileges that can be used as punishment or reward with children).

Developed with the support of Casey Strategic Consulting, updated March 2021

Strategic Recruitment, Development, and Support (Retention) Plan

Virginia Template – 2025

The overall goal of this plan is to help each agency develop a comprehensive recruitment and retention plan informed by local data/needs as well as known practices that promote permanence.

I. Child Data

First, the plan will ask you to gather local data regarding the children in your locality's care, their general characteristics and needs, and their current placement status. You will use this to develop "targets" – the kinds of kids for whom you most need to find families. Be sure to look at the needs of children who are in congregate care or TFCs where permanence is less likely to be achieved.

II. Family Data

Second, the plan will direct you to examine your family data to see how it meets with your current child needs, who is being utilized, and what your current true capacity is across families that are currently approved. Looking at overall number of opened/closed homes over time will also provide needed information as you move forward in the plan.

These two pieces of data—child, and family—are then put together to develop strategic recruitment and retention plans.

III. Recruitment Planning

The third section of the plan features a review of best practice strategies for three types of recruitment—general, targeted, child-specific—and offers guidelines of how to structure your recruitment campaigns. A sample recruitment strategy is included, along with a blank template for your agency to create a plan. Each activity will have a defined goal, potential partners, and a proposed timeline and budget.

IV. Retention Planning (Training, Development, and Support)

Finally, in section four, the plan asks you to look back at your family data to develop retention and support activities. This is a critical part of increasing competence in your existing families and making intentional use of support and in-service to (1) reduce disruptions and (2) increase family retention. This plan should also include the training and support needs of new families.

Timeline:

Child Data to be completed by: _____

Family Data to be completed by: _____

First Recruitment Plan Draft Due: _____

First Training/Retention Plan Draft Due: _____

Section I: Child Data Analysis

In this section, you will be using local data to develop a better picture of the children and families in your system and to guide you in the best way to meet their needs through resource family recruitment and support efforts. Potential sources of data may include recent surveys of families, OASIS data, anecdotal data from those who do placements in your agency, etc.

A. Breakdown of Children in Care

Information is current as of _____

Age Group	# of children (in out of home placement)	Demographic Data		Sibling Group Size and Placement	Placement Breakdown
All Ages	___ # of children	___ # Male ___ # Female	___ # African-American ___ # Bi/Multi-Racial ___ # Caucasian ___ # Hispanic ___ # Other	___ # One child (no siblings in care) ___ # sets with 2 children ___ # sets with 3 children ___ # sets with 4+ children ___ # sibling groups <i>not placed together</i> (count sets of siblings, not individual children)	___ # General (unrestricted) homes ___ # Child-specific (ICPC/kinship/etc.) ___ # TFC ___ # Residential/Group Home ___ # Other
Less than 1 year	___ # of children ___ % of total children <i>(# of children in age group divided by total # of children)</i>	___ # Male ___ # Female	___ # African-American ___ # Bi/Multi-Racial ___ # Caucasian ___ # Hispanic ___ # Other	___ # one child only (no siblings) ___ # placed with at least one sibling ___ # placed with none of her/his siblings (individual children, not number of sibling sets)	___ # General (unrestricted) homes ___ # Child-specific (ICPC/kinship/etc.) ___ # TFC ___ # Residential/Group Home ___ # Other
1 – 5 years	___ # of children ___ % of total children <i>(# of children in age group divided by total # of children)</i>	___ # Male ___ # Female	___ # African-American ___ # Bi/Multi-Racial ___ # Caucasian ___ # Hispanic ___ # Other	___ # one child only (no siblings) ___ # placed with at least one sibling ___ # placed with none of her/his siblings (individual children, not number of sibling sets)	___ # General (unrestricted) homes ___ # Child-specific (ICPC/kinship/etc.) ___ # TFC ___ # Residential/Group Home ___ # Other

6 – 9 years	___ # of children ___ % of total children <i>(# of children in age group divided by total # of children)</i>	___ # Male ___ # Female	___ # African-American ___ # Bi/Multi-Racial ___ # Caucasian ___ # Hispanic ___ # Other	___ # one child only (no siblings) ___ # placed with at least one sibling ___ # placed with none of her/his siblings (individual children, not number of sibling sets)	___ # General (unrestricted) homes ___ # Child-specific (ICPC/kinship/etc.) ___ # TFC ___ # Residential/Group Home ___ # Other
10 – 12 years	___ # of children ___ % of total children <i>(# of children in age group divided by total # of children)</i>	___ # Male ___ # Female	___ # African-American ___ # Bi/Multi-Racial ___ # Caucasian ___ # Hispanic ___ # Other	___ # one child only (no siblings) ___ # placed with at least one sibling ___ # placed with none of her/his siblings (individual children, not number of sibling sets)	___ # General (unrestricted) homes ___ # Child-specific (ICPC/kinship/etc.) ___ # TFC ___ # Residential/Group Home ___ # Other
13 – 15 years	___ # of children ___ % of total children <i>(# of children in age group divided by total # of children)</i>	___ # Male ___ # Female	___ # African-American ___ # Bi/Multi-Racial ___ # Caucasian ___ # Hispanic ___ # Other	___ # one child only (no siblings) ___ # placed with at least one sibling ___ # placed with none of her/his siblings (individual children, not number of sibling sets)	___ # General (unrestricted) homes ___ # Child-specific (ICPC/kinship/etc.) ___ # TFC ___ # Residential/Group Home ___ # Other
16 – 18 years	___ # of children ___ % of total children <i>(# of children in age group divided by total # of children)</i>	___ # Male ___ # Female	___ # African-American ___ # Bi/Multi-Racial ___ # Caucasian ___ # Hispanic ___ # Other	___ # one child only (no siblings) ___ # placed with at least one sibling ___ # placed with none of her/his siblings (individual children, not number of sibling sets)	___ # General (unrestricted) homes ___ # Child-specific (ICPC/kinship/etc.) ___ # TFC ___ # Residential/Group Home ___ # Other

Age 19 and over	___ # of children	___ # Male	___ # African-American	___ # one child only (no siblings)	___ # General (unrestricted) homes
	___ % of total children <i>(# of children in age group divided by total # of children)</i>	___ # Female	___ # Bi/Multi-Racial	___ # placed with at least one sibling	___ # Child-specific (ICPC/kinship/etc.)
			___ # Caucasian		___ # TFC
			___ # Hispanic	___ # placed with none of her/his siblings (individual children, not number of sibling sets)	___ # Residential/Group Home
			___ # Other		___ # Other

B. General Observations

Based on the data above, what are your general observations about your jurisdiction's child welfare population – consider not only future needs, but also the needs of your current youth who may be in more restrictive (or less permanent) placements.

(e.g. “We see that 70% of our children are over 15.” Or “Sibling groups of 3 or more are never placed together.”)

1. Kids coming into care ...
2. Kids who are in care already and in need of family placements (instead of congregate care, for example) ...

With your observations in mind, you can now create some “targets,” the kinds of children/youth for whom you most need to recruit. Knowing who you are recruiting for keeps you focused, feeds your facts, and tells you what your materials need to look like – even more, it gives you a goal from which you can derive a plan.

C. Narrow Down Your Targets

Based on your observations, you can create target groups -- the key children and youth you need to recruit for, who naturally has a connection to or skills with that group, and what are the key characteristics you need to consider when recruiting. Your target can be broad – such as teenagers, sibling sets of 3+, or youth currently in group care – or narrow, such as pregnant girls who will be keeping their infants, boys ages 10-12 with younger siblings, or kids with Autism Spectrum Disorders. (It may also be useful to consider if there any trends in CPS that you may need to keep in mind when recruiting.)

Example: Teenage boys 14+. Common characteristics of those currently in care:

- most have a mental health diagnosis (ADHD, anxiety, & PTSD are the most common)
- many are currently in group care, rather than family settings
- over half are legally available for adoption
- most have significant school needs
- criminal backgrounds are not common, but having one generally means the youth will be going straight to group care because we have zero willing families

Use the space below to create your targets!.

Section II: Family Data and Analysis

This section explores who your families are, how they have been utilized, what kinds of children they prefer/are able to care for, trends over time, etc.

A. Overall trends of families in the system over time

Year	# of Total Resource Families		# of Resource Homes Closed		# of New Resource Families	
	General	Child-Specific	General	Child-Specific	General	Child-Specific
YTD-2025						
2024						
2023						
2022						

Based upon the above resource family data, what are a few trends that stand out to you?
(e.g. “Every year for the last three years we have approved more relative/child-specific homes but fewer general resource families.)

If you are closing more homes than you open, what are the most common reasons for closing (such as family adopted and cannot care for more children, family requested to be closed because dissatisfied, agency closed family for lack of compliance, etc.)?

B. SAMPLE Review and Instructions: Utilization of currently approved families

This review helps ensure the accuracy of information about families for use, identifies foster/adoptive families who can no longer be used, identify placement resources that have been unused but that could be available, and identify possible placements for children being “stepped down” from institutional care.

For “Recommended Capacity,” indicate the *realistic maximum number* of children that you recommend could be cared for by the family – either in general, or at this time (if there are specifics to the recommendation regarding age, ethnicity, gender, etc., please note). This number may be different from the number for which the home is *approved*.

FAMILY NAME	CURRENT APPROVAL DATE	APPROVAL TYPE (respite/dual) AND PRIMARY INTEREST (foster, adopt, child-specific)	CURRENT FAMILY STATUS? (open, on hold, etc.)	RECOMMENDED CAPACITY/AGES (note any specific limitations)	SPECIAL SKILLS or accommodations?	DECLINED PLACEMENTS? (if known, list # times in past year)	IF HOME NOT BEING USED, WHY?	WHAT IS NEEDED FOR USAGE? (family development plan)
Jones, A & M	3/12/23	Dual approval (only wants to foster)	Open	3 (boys only) 0-1 yr.	Physical disabilities (house is accessible)	Yes - 3	Limited age range	Counsel family to expand usage, provide training on older age groups to expand capacity
Smith, T & P	11/14/22	Dual approval (open to fostering or adopting)	Family hold	4 6-12 yrs.	PTSD, ADHD, some medical needs	No	Illness of foster parent	Check with family in 3 months
Hastings, C	7/14/23	Dual – child specific (relative caregiver)	Not open to other placements	2 (relative children only)	Moderate, behavioral problems, health issues	N/A	Working toward transfer of custody	Discuss openness to fostering beyond kinship placements
Rollings, Q	12/16/22	Respite only	Open	3 5-12yrs	ADHD, behavioral disorders, RAD, bedwetting/soiling	No	N/A (used regularly)	Look for specific placements that could be supported by this respite
Taylor, J & R	5/5/23	Dual approval (only wants to adopt)	Open	2 0 – 2 years	None – prefer a child “without issues”	Yes – 2	No children in care fit their preferences	Discuss infants with special needs, consider closing & referring to a private agency
Allen, D	7/22/24	Dual approval (open to fostering or adopting)	Open	5 (if 2 children can share a room with bunk beds) 5 – 15 years	School issues/IEPs, learning disabilities, moderate behavioral challenges	Yes - 5	Has declined all placements since approval	Discuss whether they want to stay open, if yes, look for a specific youth who need to step-down from residential, OR, if not sure, consider switching over to respite only?

C. TEMPLATE: Utilization of currently approved families

DATE LAST UPDATED: _____ PERSON COMPLETING INFORMATION: _____

Page _____ of _____
(add pages as needed)

FAMILY NAME	CURRENT APPROVAL DATE	APPROVAL TYPE (respite/dual) AND PRIMARY INTEREST (foster, adopt, either)	CURRENT FAMILY STATUS? (open, on hold, etc.)	REALISTIC CAPACITY (note any specific limitations)	SPECIAL SKILLS or accommodations?	DECLINED PLACEMENTS? (if known, list # times refused in past year)	IF not being used, WHY?	WHAT IS NEEDED FOR USAGE? (family development plan)

Section III: Recruitment Planning

A. Recruitment Plan Guidance Chart

Recruitment Strategy & Use	Goals of Strategy	Potential Activities	Potential Partners
<p>General Recruitment (should be 10% or less of recruitment)</p> <p><i>General recruitment is intended to reach as many people as possible, but has the least effective rate of bringing in families who become homes for children in care.</i></p>	<ul style="list-style-type: none"> Raise public awareness of the need for foster and adoptive parents Build a positive image of fostering and adopting in the community Bring in new families interested in fostering or adopting 	<ul style="list-style-type: none"> Actively pursuing press coverage by reaching out to radio, television, newspaper and magazines with story ideas, articles and information Creating and placing advertisements in various media including yellow pages, radio, television, and newspapers, billboards and free publications Distributing information at community events including fairs parties and in public spaces Speaking at clubs, organizations and community groups to provide general information <p>NOTE: Most media appearances and press coverage can be arranged for free. Partner with local newspapers and provide them with profiles of kids in care who can be publicized, or to partner with local organizations.</p>	<ul style="list-style-type: none"> Local media of all kinds Local businesses, organizations and community partners who can donate services, goods or advertising space or allow the agency to reach their employees Local Foster Parent Association
<p>Targeted Recruitment (most of community-based recruitment efforts should be targeted)</p> <p><i>Targeted Recruitment helps recruit for children that have especially high need, by identifying specific skills and populations and recruiting intentionally to those targets.</i></p>	<ul style="list-style-type: none"> Bringing in new families for the specific populations of children most in need of homes Raising community awareness about the need for homes for specific populations of children 	<ul style="list-style-type: none"> Same activities as above, though they should be focused on finding families for specific, high-need child populations Forming recruiting partnerships with those who can help the targeted population (e.g. foster parents who currently care for a child from high-need population and can speak about their experiences) <p>For example:</p> <ul style="list-style-type: none"> Advertising in a nursing magazine or at a hospital, use info specifying the need for foster families for medically fragile children Attending an autism awareness event with information about autistic children in need of homes Speaking at the opening of a new youth recreation center if the targeted population is teenage boys 	<p>Same as above PLUS</p> <ul style="list-style-type: none"> Resource parents who are already working with children from the targeted population (their networks of friends, coworkers and acquaintances) Formal and informal community organizations who will partner with us (schools, churches, hospitals, service providers, clubs, fraternities, sororities, clubs, gathering places including barbershops, restaurants, etc.)
<p>Child-Specific Recruitment</p> <p><i>Child-specific efforts should include intensive searches for any previous or ongoing connections in the child's life, both family and non-kin, who may be viable, AND identifying potential families unknown to the child but a good potential match.</i></p>	<ul style="list-style-type: none"> Find a permanent home for every child in need Matching children with families who will best support their needs (locally or nationally) 	<ul style="list-style-type: none"> Creating a dynamic, strengths-based profile of the child to be shared publicly through AdoptUSKids, MARE and brochures Recruit and partner with key identified people based on the child's personality and interests (e.g. if the child loves animals, connect with veterinarians, zoo workers, volunteers at the animal shelters, dog groomers, breeders and others who will spread the word) Recruit and partner with key identified people based on the child's needs (i.e. if the child is deaf, talk to and connect locally and nationally with interpreters, staff at schools for the deaf, support groups, and deaf organizations) 	<p>Same as above PLUS</p> <ul style="list-style-type: none"> Any connections already in the child's life (e.g. networks of friends, coworkers and acquaintances even if they cannot themselves become a permanent home for the child) National organizations with any relationship to the child's needs or interests

B. SAMPLE Recruitment Plan

This is a shortened example of a recruitment plan that focuses on our sample target group and identifies recruitment activities over the next 6 - 9 months (you'll want to evaluate and make changes as needed along the way). It is critical to have admin support for the staff time required to do this, since follow up with contacts is essential to make it work!

This plan flows from the sample target: Teenage boys 14+. Common characteristics of those currently in care:

- most have a mental health diagnosis (ADHD, anxiety, & PTSD are the most common)
- many are currently in group care, rather than family settings
- over half are legally available for adoption
- most have significant school needs
- criminal backgrounds are not common, but having one generally means the youth will be going straight to group care because we have zero willing families

Targeted groups	Who is likely to connect with this group?	Where do we find such people?	Specific places and contacts	Our recruiting partners and connections	Planned activity and timeline	Cost/ Budget
Males age 14+	People who work with teens and/or boys in education, youth services, & youth activities. Also, explore homeschool community – especially families who have or have raised teen boys.	<p>Schools – middle & high (coaches, counselors, teachers, aides, mentors, etc.)</p> <p>Out-of-school time programs (Boys & Girls Club, 4-H, parks & rec camps in the summer)</p> <p>Coaching community (rec leagues, little league, county softball, etc.)</p>	<p>1 - McIntire High School, Ed Coleman</p> <p>2 - Georgia Middle School, Jill Rogers</p> <p>3 - YMCA (near middle school), Mary Sirosi</p> <p>4 – Southside Youth Soccer League, Gina Green</p>	<p>1 - Deb in benefits will contact Ed for meeting (son goes to MHS)</p> <p>2 - Judy (IL Coord) will contact Jill thru school office</p> <p>3 - Ann in reception will ask husband, who sits on Board, to contact Mary</p> <p>4 - Valerie in CPS has kids in SYSL, will reach out to Gina</p>	<p>1 - Presentation at all-school staff meeting about who we need and how schools can help recruit</p> <p>2 - Quarterly speaking spot at GMS's PTA meeting, highlighting types of families we need</p> <p>3 - Article in fall newsletter, flyers mailed out with spring pool membership, and joint parent workshop (open to community) in summer</p> <p>4 – Insert in mailings, half page in spring catalogue for teams and events</p>	<p>- Flyers & bulletin insert printing (\$50)</p> <p>- Workshop supplies (\$20)</p> <p>- Staff time (about 10 hours per month)</p>

C. TEMPLATE: Strategic Recruitment Plan

Recruitment Plan for _____

Last updated: _____

By: _____

Targeted groups	Who is likely to connect with this group?	Where do we find such people?	Specific Places and Contacts	Our Recruiting Partners and Connections	Planned Activity and Timeline When/how often will event take place?	Cost / Budget

Section IV: Family Development, Training, and Support (Retention)

Having the development, training, and support needs of families *in your plans before they enter pre-service* ensures that the groups you are targeting will gain additional skills & minimize disruptions/system-caused trauma to children and youth). This plan also allows you to consider current families who may need to increase their skills in order to remain active and meet the needs of the children the agency's custody.

A. SAMPLE Training & Support Plan

Targeted skill set and competencies	Which families need this training and support?	List options: Specific speakers, online courses, videos, etc.	Activity Details What is the activity? When will it occur? Where will it be?	Budget What is needed and how much will it cost?	Tasks and Timeline What steps must occur, who is responsible for each step, and what is the timeframe?
<u>Caring for older youth</u> – pre-service	Fall pre-service will be limited to recruited families for teens ONLY (or sibs?) <i>Would Allen family benefit?</i>	- Sibling needs, visitation, and support (Supervisor?) - I/L services (Matt in Foster Care Unit) - Project LIFE Youth Speakers Bureau - Unpacking the “No” with youth	PRIDE pre-service (September) at the agency, with added speakers <i>**Use the Andersons as parent co-trainers or speakers when possible since they had so many teen placements and adopted a sibling group**</i>	- Pre-service flyers, postage, and training announcements - Food - PRIDEbooks and handouts	- Judy will train & contact/arrange additional speakers - Beth will do flyers/announcements, mail items as needed, arrange food, and make copies of PRIDEbooks - Judy and Ann will divide families for assessment and “hand-hold” the first placement that each family gets (pulling in Beth and Supervisor for help as needed) - Beth will match each new family up with an experienced family for mentoring and send reminder messages to mentors to do follow-up after pre-service and especially during first placement
<u>Caring for older youth</u> – training in-services/ supports 1- Adolescent development 2- Sexual development 3- General support	All new families & select current families (Jones, Hastings, and Rollings)	1- PRIDE in-service module (2 workshops) on pre-teen & teen development 2- In-service (local therapist – Dr. Mills) on sexual safety, identity, & development 3- Support group meeting targeting these topics, assoc. membership & weekly Facebook chat	1- February “super Saturday” double in-service 2- April in-service session 3- Support group– once per quarter, will focus on a teen topic; family association membership drive at end of pre-service (November for current families) – our staff will also target specific families and encourage participation	1- Lunch, copies of handouts 2- Refreshments, copies of handouts, speaker fees 3- Refreshments, nice flyers of teens in need of family placements	1- Judy will make training announcements (send in early Jan) and conduct sessions, Beth will organize registration and food and make copies 2- Judy to do announcement (send in late March) and coordinate with Dr. Mills, Beth will do registration/food and make copies 3- Ann will contact adoption contractor for flyers of youth available for adoption (1 month before mtg) and make flyers for our youth in need of new foster placements, Judy will host meeting, Beth will do food and copies; Beth will do membership drive in November/December and coordinate with FACES, foster care workers will let Judy of any specific needs

B. TEMPLATE: Strategic Retention Plan

Last updated: _____ By: _____

Targeted skill set and competencies	Which families need this training and support?	List options: Specific speakers, online courses, videos, etc.	Activity Details What is the activity? When will it occur? Where will it be?	Budget What is needed and how much will it cost?	Tasks and Timeline What steps must occur, who is responsible for each step, and what is the timeframe?

(add pages as needed)

Resource Family Tip Sheet

Initial Approval of a LDSS Non-Relative Resource Home

STEPS:

- Complete an Information Session (general overview of the process): either in a group or individually
 - Application to become an approved provider may be provided at this time
- Complete State Approved Pre-Service Training:
 - If the home is a two parent household, both applicants must successfully complete all training requirements

Required paperwork to be completed:

- MFA: Each individual agency will need to establish appropriate timeframes to complete the mutual family assessment (MFA). Collect the following forms as part of this process:
 - Corporal Punishment Agreement
 - Confidentiality Agreement
 - Sworn Statement of Affirmation (no more than 120 days prior to provider's approval)
 - FieldPrint information for Criminal History Check (Results must be within 120 days of approval)
 - OBI information for Central Registry Search (Results must be within 120 days of approval)
 - Driving record Check (DMV, for all household drivers)
 - Physical Examination Report (to be completed by a medical professional for foster parents)
 - TB test/screening form (for all household members)
 - MFA template (for them to begin capturing their family/personal dynamics)
 - Emergency Plan (posted in the home visible to all family members and a copy kept in the file)
 - Provider Approval Budget (should be sufficient to support current household) with income verification.
 - References (each reference should be able to speak about both individuals OR they can provide more than 3 references).
 - Visual verification of marriage and divorce documents (if applicable)
 - Pre-Service Competency Requirements: Completion of PRIDE training & MFA should indicate that the prospective family meets the 5 competencies outlined in the curriculum
 - Checklist for Initial Provider Approval
 - Mandated Reporter Training
 - Foster Care Agreement w/ Code of Ethics & Mutual Responsibilities

****All Forms can be found on the Fusion web page in the forms section under Family Recruitment***

Mutual Family Assessment (MFA) Completed

- 3 in-person visits are required, however more may be necessary to ensure a thorough assessment of the family
- A home walk-through (utilizing the physical home environment & safety checklist) must be completed during one of these visits and address weapon storage in the home.
- Interviews must occur with all household members (including children) and this should be included in the MFA section under 'other household members'

- Each section of the template must contain specific information related to the family.
- CWS3103 MFA Course is available and is best practice for agencies when completing their own mutual family assessments (register through VLC)
- MFA program for referrals: partner with MFA consultants to assist with completion of approval (as needed or if applicable)



Resource Family Tip Sheet

Re-approving a LDSS Resource Home

Guidance 1.11 Re-approval requirements apply to kinship resource families as well as non-relative resource families.

Assess the willingness and ability of the family to continue to serve as a resource family for your LDSS.

- If they do not want to continue with the re-approval process, close the case in OASIS and send a closure letter.
- If they do want to continue with the re-approval process, schedule a re-approval appointment for a home visit (see below).

90 days prior to the expiration of the Certificate of Approval (COA):

Plan to secure the following information (do not let background checks expire):

- Virginia State Police Criminal Name Checks for each household member who is 18 years of age or older.
 - Resource Family Guidance 1.11.2.1: Completed background checks must be dated within the three years since the date of the most recent central registry finding and the most recent criminal history record check report.
- Central Registry checks on each household member who is 18 years of age or older.
- TB risk assessment/screening or TB test on each household member.

At the home visit, review the following information:

- Resource parents sign Confidentiality Agreement (032-04-0055-01-eng (11/17))
- Resource parents sign the Discipline Agreement (032-04-0056-03-eng (07/22))
- Update the DMV information on the resource parents or any person in the home who transports the children in foster care that includes:
 - Driver Record Check obtained (Guidance 1.6.6)
 - Valid Motor Vehicle Inspection (Guidance 1.11.2.2) *Visually Verified*
 - Proof of automobile insurance (Guidance 1.11.2.2) *Visually Verified*
- Review and discuss any addendums added for household composition changes made over the last three years such as:
 - Birth children turning 18
 - Other household members who have left the home
 - Other household members who are new to the home
- Review, discuss and document all the items listed on the Checklist for Re-Approval (032-04-0109-02-eng (07/22)) for each section:
 - Background Checks
 - TB Information
 - Physical Exam Information
 - Documentation
 - Child-Specific Information
 - New (Applicant) Resource Parent in the Home
 - In-Service Training
- Review, discuss and document if the resource parents and children have access to a working phone in the home (which can be a cell phone).

Resource Family Tip Sheet

Re-approving a LDSS Resource Home

- Review, discuss and document if the resource parents exhibit that the care they provide does not discriminate on the basis of race, color, sex, national origin, age, religion, political beliefs, sexual orientation, disability or family status.
- Check to see if there is an “Emergency Plan” (032-04-0064-01-eng (10/10)) completed and posted in the home where the children can see it? Does the “Emergency Plan” include the following?
 - Back-up persons in an emergency
 - CPS Hotline #
 - Plan for provisions such as food, water, batteries
- Review, discuss and document what In-Service Training or support the family wants/needs in future.

After the Home Visit:

- Check on the status of any waivers that were granted.
- Complete a DFS re-approval addendum (032-04-0065-01-eng (1/24))
- Make sure that the Checklist for Re-approval is completed in its entirety with all supporting documentation in the hardcopy record. **Completed Checklist for Reapproval must be uploaded to COMPASS.**
- Complete a new COA (032-03-136-2-eng (07/22)) with the updated approval period. **COA must be uploaded to COMPASS.**
- Update the resource contact in OASIS about the home visit and the decision for re-approval.

Questions about this Tip Sheet should be directed to Resource Family Consultants:

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