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LOCAL DEPARTMENT RESOURCE, FOSTER AND ADOPTIVE HOME APPROVAL GUIDANCE

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LOCAL DEPARTMENT RESOURCE, FOSTER AND ADOPTIVE HOME APPROVAL GUIDANCE

1.1 Introduction

This guidance addresses the approval of all types of families who provide care for children in the foster care system. While terms such as “kinship foster parent, foster parent,” “adoptive parent,” or “respite parent” indicate who a family is relative to a child’s permanency plan, these are not discrete or mutually exclusive activities; rather they are a few of the many ways a family can serve as a resource to that child. In this guidance, all types of families foster, adoptive, and respite caregivers, as well as approved relatives, concurrent planning families, etc. are generally referred to as resource families. For simplicity in this document, all individuals seeking approval as resource families are referred to as “providers.”

This guidance, pursuant to Regulation [22 VAC 40-211](#), addresses the provider approval/re-approval processes, including background checks, training, home studies, monitoring and suspension, or revocation of approval. This guidance also provides the local department of social services (LDSS) with specific required and recommended procedures and forms needed to carry out these regulatory standards. Requirements apply to adoptive families only until the final order of adoption is issued.

The approval processes as presented in this guidance are consistent with two significant approaches to working with care-giving families. Families are dually approved as foster and adoptive families and the approval process is a mutual endeavor between the LDSS and the family requesting approval. These processes are consistent with Virginia’s practice model.

1.2 Framework

The approval process for kinship, foster, and adoptive family home providers is based on the principles articulated in the [Children’s Services System Practice Model](#). These principles are instilled in all of Virginia’s child welfare guidance, practice, and training. They also undergird the guidance and practices that are used to approve those individuals in Virginia who wish to assume the daily care of children and youth placed in foster care or available for adoption.

1.2.1 Legal basis

1.2.1.1 Federal law and regulation

Specific foster care and adoption home approval requirements are set forth in the following federal laws, many of which are incorporated into Title IV-E of the Social Security Act.

- [P.L. 109-432](#) – Tax Relief and Health Care Act of 2006
- [P.L. 110-351](#) – Fostering Connections to Success and Increasing Adoption Incentives Act of 2008
- [P.L. 109-288](#) – Child and Family Services Improvement Act of 2006
- [P.L. 109-248](#) – Adam Walsh Child Protection and Safety Act of 2006
- [P.L. 109-239](#) – Safe and Timely Interstate Placement of Foster Children Act of 2006
- [P.L. 109-171](#) – Deficit Reduction Act of 2005
- [P.L. 109-113](#) – Fair Access Foster Care Act of 2005
- [Keeping Children and Families Safe Act of 2003](#)
- [Promoting Safe and Stable Families Amendments of 2001](#)
- [Strengthening Abuse and Neglect Courts Act of 2000](#)
- [Inter-Country Adoption Act of 2000](#)
- [Child Abuse Prevention and Enforcement Act, 2000](#)
- [Foster Care Independence Act of 1999](#)
- [Adoption and Safe Families Act of 1997](#)
- [Child Abuse Prevention and Treatment Act \(CAPTA\), as Amended, 1996](#)
- [Interethnic Adoption Provisions \(IEPA\) of the Small Business Job Protection Act of 1996](#)
- [Multiethnic Placement Act \(MEPA\) of 1994](#)
- [P.L. 96-272](#) – The Adoption Assistance and Child Welfare Act of 1980

- Additional requirements are set forth in the Code of Federal Regulations (CFR) Title 45 - Public Welfare Chapter XIII - Office of Human Development Services
 - [45 CFR 1355](#) – General
 - [45 CFR 1356](#) – Requirements Applicable to Title IV-E
 - [45 CFR 1357](#) – Requirements Applicable to Title IV-B

1.2.1.2 State law and regulation

Specific state laws relevant to the approval of provider homes are:

The Code of Virginia

- [§ 63.2-900](#) – Accepting children for placement in homes, facilities, etc., by local boards. [§ 63.2-901.1](#), Criminal history and central registry check for placements of children.
- [§ 63.2-1208](#) – Investigations; report to circuit court.
- [§ 63.2-1225](#) – Determination of appropriate home.
- [§ 63.2-1231](#) – Home study; meeting required; exception.
- [§ 63.2-1719](#) – Barrier crime, construction.
- [§ 63.2-1721](#) – Background check upon application for licensure or registration as child-welfare agency; background check of foster or adoptive parents approve by child-placing agencies and family day homes approved by family day systems; penalty.
- [§ 63.2-1722](#) – Revocation or denial of renewal based on background checks; failure to obtain background check.
- [§ 63.2-1723](#) – Child welfare agencies; criminal conviction and waiver.

The Administrative Code of Virginia, [22 VAC 40-211](#), Resource, Foster, and Adoptive Family Home Approval Standards.

1.3 Definitions

The following words and terms are defined in state regulation as identified below. When used in this chapter, they shall have the following meaning, unless the context clearly indicates otherwise:

<u>Term</u>	<u>Definition</u>
Adoptive Parent	Any provider selected and approved by a parent or a child placing agency for the placement of a child with the intent of adoption.
Adult	Any person 18 years of age or over.
Applicant	An individual or couple applying to be approved as a resource, foster, and/or adoptive home provider.
Background Check	A criminal history record information, child abuse and neglect central registry check, and any other requirement as set forth in § 63.2-901.1 of the Code of Virginia.
Caregiver	Any individual having the responsibility of providing care for a child and includes the following: (i) parent or other person legally responsible for the child's care; (ii) any other person who has assumed caregiving responsibility by virtue of an agreement with the legally responsible person; (iii) person responsible by virtue of their position of conferred authority; or (iv) adult person residing in the home with the child.
Central Registry	A subset of the child abuse and neglect information system and the name index with identifying information on an individual named as an abuser and/or neglector in founded child abuse and/or neglect complaints or reports not currently under administrative appeal; maintained by the VDSS.
Child	Any natural person less than 18 years of age.
Child-Placing Agency	Any person who places children in foster homes, adoptive homes, or independent living arrangements pursuant to § 63.2-1819 of the Code of Virginia or a local board that places children in foster homes or adoptive homes pursuant to § 63.2900 , 63.2-903 or 63.2-1221 of the Code of Virginia. Officers, employees, or agents of the Commonwealth, or any locality acting within the scope of their authority as such, who serve as or maintain a child placing agency, shall not be required to be licensed.

<u>Term</u>	<u>Definition</u>
Commissioner	The commissioner of the VDSS, their designee, or authorized representative.
Contingency Fund	A statewide insurance plan to supplement local board approved resource families' homeowner's policies in order to reimburse for certain damages or losses incurred due to behaviors of the child in placement with the family.
Corporal Punishment	Punishment administered through the intentional infliction of pain or discomfort to the body through actions such as, but not limited to, (i) striking, or hitting with any part of the body or with an implement; (ii) pinching, pulling, or shaking; or (iii) any similar action that normally inflicts pain or discomfort.
CRAFFT	An acronym for Consortium for Resource, Adoptive, and Foster Family Training. This contracted training service is available for prospective resource families in order to increase the pool of viable family-based placements. CRAFFT also delivers in-service training for currently approved families and conducts assessments specific to training needs of prospective resource families.
Department (VDSS)	The State Department of Social Services.
Dual Approval Process	A process that includes a study of the home, mutual selection, interviews, training, and background checks to be completed on all applicants to be considered for approval as a resource, foster, or adoptive family home provider.
Foster Parent	An approved provider who gives 24-hour family care, room and board, and services for children or youth committed or entrusted to a child-placing agency.
In-Service Training	The ongoing instruction received by providers after they complete their pre-service training.

<u>Term</u>	<u>Definition</u>
Interstate Compact on the Placement of Children	A uniform law that has been enacted by all 50 states, the District of Columbia, Puerto Rico, and the U.S. Virgin Islands that establishes orderly procedures for the interstate placement of children and sets responsibility for those involved in placing those children.
Kinship Foster Parent	A relative or fictive kin who is approved by LDSS to provide 24 hour substitute family care to specific children with whom they have a relationship, room and board, and services for children and youth committed or entrusted to a child placing agency.
Kinship Pre-approval	The process of completing a Virginia State Police name search and a search of the CPS Central Registry through Child Welfare Information System to allow for immediate placement of a child with a kinship foster parent prior to initiating the approval process.
Local Department (LDSS)	The local department of social services of any county or city in this Commonwealth.
Mutual Family Assessment	A process that includes both a study of the physical home as well as the prospective provider(s). It is mutual in that while the LDSS maintains final authority on the decision to approve or not approve, assessment is done with families as opposed to families.
Mutual Family Assessment Report	Contains narrative, checklist and other data as required for provider approval. Historically, this has been called the “home study.”
Parent	The birth or adoptive parent of a child.
Pre-Service Training	The instruction received by provider applicants during the initial approval process.
Provider	A kinship, foster, adoptive, or respite family.

<u>Term</u>	<u>Definition</u>
Resource Family Consultant	The title of regional staff who work with the LDSS regarding the recruitment, development, and support of kinship, foster and adoptive families. This work includes conducting assessments with agencies to determine their strengths, needs, and capacities in regard to resource families.
Respite Care	The provision of temporary care for children on an emergency or planned basis for the purposes of providing placement stability, supporting the achievement of timely permanency, and promoting connections to relatives.
Respite Parent	An approved provider who gives temporary care to children on an emergency or planned basis.
Revocation	The permanent cancellation or withdrawal of approval of a provider.
Sworn Statement or Affirmation	<i>The document each adult household member in a prospective foster home completes to disclose whether or not the individual has a criminal conviction or is the subject of any pending criminal charges within or outside the Commonwealth and whether or not the individual has been the subject of a founded complaint of child abuse or neglect within or outside the Commonwealth. This document does not expire once completed.</i>
Suspension	The temporary deferment or cancellation of an approved home that allows for reinstatement of the approval when circumstances causing the suspension are resolved.
Waiver	The allowance of non-compliance with a specific requirement for approval as a resource parent. <i>There are two types of waivers: a Kinship Waiver, which is the same as a temporary waiver, and a Non-Safety Waiver, which is the same as a permanent waiver and requires an annual review.</i>

1.4 Requirements to Approve a Foster Parent

Through training and careful assessment, local departments should identify and approve those families who demonstrate a clear understanding of their role in supporting relationships between children and their parents. Kinship and foster

families should never be viewed as an alternative to children's families, but instead, they must clearly understand their role in supporting family reunification. In making decisions regarding placement, preference should be given to relatives and fictive kin as providers regardless of citizenship or immigration status, *so long as they can meet approval requirements as outlined in [1.7.1.8](#)*. The agency shall assist relatives and fictive kin with meeting approval requirements by identifying barriers, utilizing waivers and offering support. All providers, including adoptive families, should complete training and be carefully assessed to ensure that they have the ability to meet the physical, behavioral and emotional needs of children who enter foster care in Virginia.

The following standards must be met for local departments to approve a provider:

- Background Checks for all adult household members
- Pre-service training using a VDSS approved curriculum
- Completion of a Mutual Family Assessment
- Physical examination of approved providers and tuberculosis screening or tests for all household members

1.5 Placing Children with kinship foster parents

The local department of social services (LDSS) should prioritize placing children who enter foster care with relatives, including fictive kin upon removal or at any point that it is determined to be in the child's best interest and/or presents the greatest opportunity for family reunification. *Whenever a relative or fictive kin expresses interest in becoming a kinship foster parent, the LDSS must provide the relative or fictive kin with the Kinship Foster Parent Approval Process document found on FUSION within 15 calendar days.*

The LDSS must use the [Permanency Assessment Tool](#) when a relative or fictive kin expresses interest in becoming an approved kinship foster parent. The LDSS uses the tool to engage prospective kinship foster parents and facilitate an understanding of the role they will play in supporting reunification and permanency, to outline the expectations related to the approval process, and to identify supports necessary to make placement possible. The LDSS must use this tool to conduct and document the assessment of prospective kinship foster parents. The LDSS must maintain the completed Permanency Assessment Tool in the child's foster care record. During the assessment, the LDSS should ensure the following:

- *The child feels safe with the prospective kinship foster parent and the prospective kinship foster parent has the capacity to meet the physical and emotional needs of the child.*
- *The prospective kinship foster parent conveys a commitment to complete and maintain approval as a kinship foster parent, as well as a commitment to supporting reunification and permanency.*

If, during the course of the assessment, the prospective kinship foster parent or any adult household member acknowledges the presence of a potential barrier crime, which would prevent approval, the LDSS should immediately run a Virginia State Police criminal background check. If a barrier crime appears to be present, the LDSS must request that the prospective kinship foster parent or adult household member submit fingerprints to the state-approved vendor to determine eligibility prior to proceeding with placement and completing all approval requirements.

1.5.1 Appeal of Denial of kinship foster parent

If it is determined by the LDSS that it is not in the child's best interest to be placed with the prospective kinship foster parent following the completion of the [Permanency Assessment Tool](#), the LDSS must provide the relative with the Notification of Denial and Right to Appeal letter by mail within 10 business days of the denial. The Notification of Denial and Right to Appeal letter may be found on FUSION. The Notification of Denial and Right to Appeal letter must contain the following:

- *A clear and specific explanation of the reason for the denial;*
- *A statement that such denial is appealable to the Commissioner of the Virginia Department of Social Services should the relative choose to appeal; and*
- *Information regarding the procedure for filing such an appeal including contact information for the Office of Appeals & Fair Hearings.*

If the relative chooses to appeal the denial, they must contact the Office of Appeals & Fair Hearings in writing by US mail or email and disclose their intent to appeal within 30 days of the postmarked date on the Notification of Denial and Right to Appeal letter. Upon being made aware of the relative's intent to appeal the decision of the LDSS, a hearing must be conducted by the Office of Appeals & Fair Hearings as soon as practicable and a decision rendered in no more than 90 days.

1.5.2 Requirements to initiate placement in a kinship foster home

When kin or fictive kin are identified and assessed to be an appropriate placement for a child in foster care, the local department must make a visit to the home prior to or on the day of placement to ensure safety of the home environment and complete the [Physical Home Environment Safety Checklist](#). All adult household members must

submit to a Virginia State Police Name search and a search of the CPS Central Registry through Child Welfare Information System prior to placement of the child. When the presence of barrier crimes or CPS findings are ruled out, the child may be placed immediately and the provider will meet Kinship Pre-approval criteria.

1.5.3 Requirements to approve a kinship foster family

Within 72 hours of placing a child in the home, the individuals with whom the child has been placed and all other adult household members must present themselves for fingerprinting with the approved vendor. The LDSS must submit the required request for search of the CPS Central Registry and release of information form to the [State Office of Background Investigations](#) for processing. A certificate of approval may be issued upon receipt of the results of background checks that indicate “eligible” for all adult household members and the results of CPS Central Registry searches for all household members that are absent of CPS findings. Until a certificate of approval is issued, Children’s Services Act funding must be utilized for placement costs. Title IV-E funding eligibility begins at the beginning of the month during which the certificate of approval is issued.

1.5.4 Waivers to allow for placement with kinship foster parents

To allow children to be placed with kinship foster parents when they are identified, Kinship waivers must be granted for pre-service training, completion of a mutual family assessment, tuberculosis assessment, screening or tests and physical examinations for a period of 6 months. If all of the standards of approval are not met within 6 months the home will be considered unapproved. Non-safety waivers related to standards for the home of a provider, as referenced in section [1.7.6 Physical Home Environment Assessment](#), may be granted to kinship foster parents and should be reviewed annually. The process of obtaining a waiver is outlined in section [1.8 Allowing a Waiver](#).

In addition to the above background checks, Family Services Specialists must also complete the following required forms when approving kinship foster parents. A copy of these forms must be placed in the provider’s file:

- [Foster Care Agreement](#)
- [Confidentiality Agreement](#)
- [Discipline Agreement](#)
- [Foster Parent Bill of Rights](#)
- [Kinship Foster Parent Waiver](#)

1.5.5 Information for the kinship foster parent

Individuals who are approved as kinship foster parents must be provided with the following information:

- LDSS contact information, including but not limited to, Family Services Specialist name and phone number and after-hours contact information.
- Contact information including who the child may or may not have contact with and what type of contact is allowed (e.g., supervised visitation; phone contact; email; etc.).
- Information regarding the child's medical history and needs including allergies, immunizations, current medical treatment, the child's doctor's names, health insurance, and contact information and, when applicable, the child's medication.
- Educational information including provisions for getting the child to school and, if applicable, the plan for enrolling the child in a new school.
- The LDSS's plan for immediate follow-up regarding the child, including but not limited to, next Family Services Specialist visit to the home; school enrollment; medical follow-up; visitation between the child and family members including siblings.
- A review of and signing the Foster Care Agreement: Code of Ethics/Mutual Responsibility Agreement.
- A review and signing of the confidentiality agreement, including a discussion of the meaning of confidentiality.
- A discussion of the prohibition against the use of corporal punishment under any circumstances. Corporal punishment must be defined and the caregiver must agree to refrain from all such methods of discipline. The Corporal Punishment Agreement must also be signed.
- The expectation and process for obtaining full approval as a provider and the next steps the LDSS will take to support the caregiver's decision to pursue full approval.

1.6 Background Checks Required for all Approvals

Background checks are required for all prospective kinship, foster and adoptive parents and every adult household member 18 years of age or older who reside in the home. Required background checks consist of a national criminal record check, a Child Protective Services (CPS) Central Registry search, and a search of the Sex Offender Registry, which is included in the national criminal record check. Applicants cannot be approved as providers until the results of all background checks have been received. Applicants with barrier crimes as set forth in the Code of Virginia, [§ 63.21719](#) cannot be approved as a provider unless they meet one of the exceptions outlined in the above Code section. These requirements are not subject to a waiver. Other adults residing in the home with a barrier crime also preclude approval of the home. Results of these checks must be maintained in the file of the provider and in no other place (including any form of archiving or electronic storage). Criminal records cannot be shared with any person other than the specific subject of the search. Eligibility letters from OBI may be shared when transferring foster home approval between LDSSs.

1.6.1 Sworn Statement or affirmation

A [sworn statement or affirmation](#) is required disclosing whether or not the individual has a criminal conviction or is the subject of any pending criminal charges within or outside the Commonwealth and whether or not the individual has been the subject of a founded complaint of child abuse or neglect within or outside the Commonwealth. A sworn disclosure must be completed during the initial approval process and does not expire.

The following background checks must be completed no more than **120 days** prior to the provider's approval. *The following background checks expire 36 months from the date of verification for all approvals occurring after 1/1/2020.*

1.6.2 National criminal background check

Applicants are required to be fingerprinted and complete all requirements outlined by the VDSS approved vendor, [Fieldprint](#). All identifying information and prints will be electronically sent to the [Virginia State Police \(VSP\)](#), the Federal Bureau of Investigations (FBI), and [Office of Background Investigations \(OBI\)](#). OBI staff will screen criminal history results received from the VSP and the FBI in order to provide the requesting agency a determination of eligibility on the individual being searched. National criminal background checks must be completed no more than 120 days prior to the applicant being approved as a foster or adoptive provider. For detailed information on obtaining a criminal background check visit: [Fingerprint based criminal history search](#).

1.6.3 Central Registry of abuse and neglect

The LDSS shall submit a [Search of the Central Registry and Release of Information Form](#) to OBI to search the Virginia CPS Central Registry for each applicant and adult household member over the age of 18 years, no more than 120 days prior to the applicant being approved as a foster or adoptive provider.

If an applicant or household member has resided in another state within the preceding five years a check of that state's child abuse and neglect registry is required. LDSS agencies must not approve individuals with a founded complaint of child abuse as a foster or adoptive parent or adult household member. Out of state searches of the child abuse and neglect registry should be completed only at the time of initial approval and do not expire.

1.6.4 Other *adult* household members

For other adults residing in the home, background checks must consist of a national criminal record check, a CPS Central Registry search, and a search of the Sex Offender Registry, which is included in the national criminal record check. The [Registry](#) may be accessed on the Virginia State Police website. Any adult in the home who resided in another state within the previous five (5) years must also have a CPS Central Registry search run in those states in which they resided.

1.6.5 Department of Motor Vehicles Check

A Department of Motor Vehicle (DMV) driver record check must be obtained for the applicant(s) as well as all others in the home who may be transporting the child. A Virginia driving record must be obtained if the individual holds a Virginia driver's license. If the individual holds an out-of-state driver's license, the out-of-state driving record must be obtained. While there is no specific standard for a "satisfactory" DMV driver record check, results of this check should be considered in concert with other information gained in the Mutual Family Assessment process.

1.6.5.1 Local government access to DMV records

Local governments have access to DMV records free of charge in accordance with [§ 46.2-208](#) of the Code of Virginia. The information available includes convictions, accidents, driver's license suspensions or revocations, and other information that may be needed by the local government in order to carry out its official function. Most LDSS have established agreements with DMV to allow records access; however, for more information on this process contact the DMV or access www.dmvnow.com.

1.7 Initial approval

1.7.1 General provider approval requirements

All LDSS approved providers must meet minimal standards, as outlined below. Providers may be dually approved in order to eliminate the need for a second approval, if adoption by a foster parent is determined to be in the best interest of the child(ren) in foster care. However, foster parents may be required to meet additional legal requirements. Please see: [§ 63.2-1225. Determination of appropriate home.](#)

1.7.1.1 Provider application

Upon receipt of a completed provider application, the LDSS is responsible for ensuring the initiation of the approval process. If at any point in the process, the decision is made either by the agency or family to discontinue the process, the LDSS must notify the applicant(s) in writing as to the reason why the approval process was stopped. A letter should be issued to document why the approval process stopped so that everything is documented in the case should the family resume interest in the future. This includes kinship families regardless of the stage or whose decision it was to stop the approval process. A copy of this notice must be filed in the applicant's record.

The [Application For Department-Approved Provider Form](#) must be used by all individuals who are requesting to become agency-approved providers. The form provides basic information needed to begin the process of approval and eliminates obtaining such information during the interviews.

1.7.1.2 Age requirements

Providers must be at least 18 years of age. The age of the provider applicant is one of many considerations in the decision to approve an individual to foster, adopt or provide respite care.

1.7.1.3 Capacity

The number of children in foster care in the provider's home shall not exceed six (6) unless:

- To allow the child of a parenting youth in foster care to remain with the parenting youth.

- To allow siblings to remain together.
- To allow a child with an established meaningful relationship with the family to remain with the family.
- To allow a family with special training or skills to provide care to a child who has a severe disability.

1.7.1.4 Conflict of interest

Individuals who work for an LDSS, including relatives of the employee must not be approved to be a kinship, foster or adoptive parent by the LDSS for whom they are employed; *but, the employee and relatives of the employee may be a kinship, foster or adoptive parent for another LDSS or child-placing agency. In order to allow an employee or relative of the employee to be approved as a kinship, foster or adoptive parent for a child in the custody of the LDSS or child-placing agency for whom that individual works, the child's custody may be transferred to another LDSS.* ([See Foster Care Guidance 6.17.2](#)) LDSS employees can also play other significant roles in the life of a child or youth – as advocates, mentors, etc.

- Foster and adoptive providers who have met the requirements to be an approved childcare provider may provide childcare in their home for their child in foster care. However, Title IV-E federal funds may not be used to pay for the childcare service. The childcare provider may apply for childcare through Title IV-A childcare funds.

1.7.1.5 Provider approval period

Certificates of Approval are issued for periods of 36 months and are valid for 36 months or until the background check expires (36 months from the day of verification), whichever occurs first. In order to approve a kinship, foster or adoptive foster parent, all elements of approval must be met. When children are placed with kinship foster parents, kinship waivers may be obtained as outlined in Section 1.8.1 to allow for immediate placement of children in the home. The effective date of the certificate of approval for non-relative foster parents is the date the [Mutual Family Assessment](#) is signed by the supervisor. The results of background checks indicating eligibility for all adult household members must be obtained prior to signing a Certificate of Approval. The date of approval must be documented on the [Certificate of Approval](#). A copy of the Certificate must be maintained in the provider's file.

1.7.1.6 Anti-discrimination for approving providers

According to [federal statute](#), the LDSS may not deny to any person the opportunity to become an adoptive or foster parent on the basis of race, color, nationality, state of residence, religion, age, disability, political belief, sex or sexual orientation.

1.7.1.7 Marital status

Only individuals or married couples may be approved as providers. *Unmarried/cohabitating couples may be approved with one individual approved and identified on the Certificate of Approval and the other person listed as a household member or adult caregiver.*

1.7.1.8 Citizenship

Citizens of other countries who are residing in the United States in a legal and documented manner may become approved foster parents when they meet approval standards. *Prospective foster parents must be a citizen of the United States or a qualified alien, as outlined in the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996. As indicated in the PRWORA of 1996, the term “qualified alien” refers to the following individuals:*

- *An alien who is lawfully admitted to the United States for permanent residence under the Immigration and Nationality Act (INA);*
- *An alien who is granted asylum under section 208 of the INA;*
- *A refugee who is admitted to the United States under section 207 of the INA;*
- *An alien who is paroled into the United States under 212(d)(5) of the INA for a period of at least one year;*
- *An alien whose deportation is being withheld under section 243(h) of the INA, as in effect immediately before April 1, 1997, or section 241(b)(3) of the INA;*
- *An alien who is a Cuban or Haitian entrant; or*
- *An alien (or the child of a parent) who has been battered or subjected to extreme cruelty in the United States.*

1.7.2 Pre-service training

1.7.2.1 Training requirements

The LDSS must ensure that pre-service training is provided for kinship, foster, and adoptive family home providers, using a VDSS-approved curriculum, and completion of the training must be documented in the provider’s file. Each provider must satisfy the pre-service training requirements. Certain curricula have been verified to meet the required competencies: Parent Resources for Information, Development and Education (PRIDE), Model Approach to Partnerships in Parenting (MAPP), and

Parents as Tender Healers (PATH). The Department supports PRIDE as the preferred curriculum. **All other curricula must be approved by the VDSS in order to satisfy the preservice requirement.**

- If a curriculum has been approved for Title IV-E Pass-Through Training, this is the VDSS's approval.

To obtain approval for a curriculum other than those listed above; an agency should submit a copy of the curriculum (outlines, handouts, etc.) to the regional Family Engagement & Resource Family Consultant.

- The curriculum will either be approved, returned with recommendations (for addressing any missing competencies), or rejected.

1.7.2.2 Core competencies

Pre-service training must address, but not be limited to, the following core competencies:

- Factors that contribute to neglect, emotional maltreatment, physical abuse, and sexual abuse, and the effects thereof.
- Conditions and experiences that may cause developmental delays and affect attachment.
- Stages of normal human growth and development (not required for respite providers).
- Concept of permanence for children and selection of the permanency goal (not required for respite providers).
- Reunification as the primary child welfare goal; the process and experience of reunification.
- Importance of visits and other contacts in strengthening relationships between the child and their birth family, including their siblings.
- Legal and social processes and implications of adoption (not required for respite providers).
- Support of older youth's transition to independent living (not required for respite providers).

- The professional team's role in supporting the transition to permanency and preventing unplanned placement disruptions.
- Relationship between child welfare laws, the LDSS's mandates, and how the LDSS carries out its mandates (not required for respite providers).
- Purpose of service planning (not required for respite providers).
- Impact of multiple placements on a child's development.
- Types of and response to loss, and the factors that influence the experience of separation, loss, and placement (not required for respite providers).
- Cultural, spiritual, social, and economic similarities and differences between a child's primary family and foster or adoptive family.
- Preparing a child for family visits and helping them manage their feelings in response to family contacts.
- Developmentally appropriate, effective, and nonphysical disciplinary techniques.
- Promoting a child's sense of identity, history, culture, and values.
- Respecting a child's connection to their birth family, previous foster families, and/or adoptive families.
- Being nonjudgmental in caring for the child, working with their family, and collaborating with other members of the team.
- Roles, rights, and responsibilities of foster parents and adoptive parents (not required for respite providers).
- Maintaining a home and community environment that promotes safety and well-being.

1.7.2.3 Additional training requirements

The following content areas are to be included in the pre-service training of applicants:

- The Children's Services Practice Model and Implication for Practice.
- Virginia's Family Partnership Meetings: The Purpose and Process.
- Rate structuring and the provider's role in the process.

The [Foster Home Agreement: Code of Ethics and Mutual Responsibilities](#). The [Adoptive Home Placement Agreement](#).

- Standards of Care for Continued Approval (see [Section 1.10.1](#)).
- Shaken Baby Information.

Any additional LDSS requirements.

1.7.2.4 Training for Mandated reporters

The Code of Virginia identifies those persons who are mandated reporters. These persons must report suspected child abuse or neglect that they become aware of in their professional or official capacity.

Effective July 1, 2012, kinship, foster, adoptive providers, and respite providers are considered mandated reporters due to their association with a public organization that is responsible for the care, custody and control of children as referenced in [§ 63.2-1509 A](#).

Mandated reporter training and other resources for mandated reporters are available from the Virginia Department of Social Services at (<https://www.dss.virginia.gov/abuse/mr.cgi>).

Resource parents may complete [CWS 5692 - Recognizing & Reporting Child Abuse & Neglect](#) as part of their pre-service training.

1.7.2.5 Prior training considerations

Families who have previously completed foster parent training are not exempt from meeting training requirements; however, an agency has several options when considering the family for approval. For families who are able to provide verification that they 1) completed a foster parent course within the last five years, or 2) completed the training more than 5 years ago AND have completed ongoing additional training which addressed competency areas, then the agency may consult their Regional Resource Family Consultant to determine how best to proceed based on the three options outlined below:

- Utilize the [Pre-Service Competency Checklist](#) to affirm that these competencies have been observed over the course of the family's experience with the agency. This checklist should be maintained in the provider's file to indicate compliance with the pre-service standard.
- Conduct one-on-one training to address areas lacking sufficient competence.

- Request that the family complete pre-service training.

Families whose previous training is accepted as meeting Virginia's requirements for pre-service training must still be provided with training on the additional training areas under [Section 1.7.2.3](#) and [Section 1.7.2.4](#) above. This training must be documented in the [Mutual Family Assessment](#) .

1.7.3 Mutual Family Assessment

Mutual Family Assessment is a process that includes both a study of the physical home as well as the prospective provider(s). It is mutual in that while the LDSS maintains final authority on the decision to approve or not approve, the assessment is done with families rather than to families. Prospective providers are empowered to assess themselves as applicants and to determine if the role of foster, adoptive, or resource parent is right for them. A thorough assessment integrates pre-service training topics into the home visits to maximize opportunities for developing and documenting a family's competence in meeting the special needs of children in care.

Training and home visits are primary sources for assessment, while also drawing information from sources such as references, background checks, etc.

Each prospective kinship, foster, and adoptive family must be encouraged to participate in an open and honest assessment of their strengths in fostering or adopting, as well as their needs for support. Their strengths and needs must be utilized in making a match with the needs of a specific child to be placed.

As a result of this process, the final decision to approve the home must reflect the family's perceived ability and willingness to foster or adopt as well as the agency's assessment of the family.

1.7.3.1 Purpose of the Mutual Family Assessment Report

As part of the approval process, the LDSS must conduct a family assessment. This family assessment must address all elements required by regulation and be documented by a combination of narrative, and must be signed and dated by the individual completing the assessment and the director of the LDSS or their designee. The information contained in the [Mutual Family Assessment](#) Report must consist of demographic information including:

- Age of applicant
- Marital status and history
- Family composition and history

- List of agency individuals involved in completing the assessment process and their roles
- Information indicating that the provider has been given and understands the standards for sleeping space and maintaining a safe environment as listed in [Section 1.7.6](#).

1.7.4 Assessing applicant's knowledge, abilities, attitudes, relationships, and capacity to foster and/or adopt

Narrative documentation must include information from the interviews, references, observations, and other available information, and must be used to assess and document the applicant's skills to foster and/or adopt. Decisions to approve may also be based on information gained through discussions, recommendations, etc. and should assess that the applicant:

- Is knowledgeable about the necessary care for children and is physically and mentally capable of providing the necessary care for children
- Is able to articulate a reasonable process for managing emergencies and ensuring the adequate care, safety, and protection of children
- Expresses attitudes that demonstrate the capacity to love and nurture a child born to someone else
- Values children's birth family and other significant relationships
- Expresses appropriate motivation to foster or adopt
- Shows stability in all household relationships
- Has the financial resource to provide for current and ongoing household needs

1.7.5 Family Services Specialist-family interviews

The LDSS must conduct a minimum of three (3) face-to-face interviews with each applicant; at least one (1) must be in the applicant's home. If there are two (2) individuals listed as applicants, at least one (1) interview must be with both individuals. At least one (1) interview must be with all individuals who reside in the home.

The LDSS Family Services Specialist is responsible for providing the applicants with specific information about what is involved in being a provider and engaging in a discussion with them about their expectations and motivation for becoming a provider at this time. LDSS representatives are responsible for ensuring that applicants have the qualifications and abilities they will need to protect, parent, and nurture the abused

or neglected children in their care. Within these interviews, the LDSS Family Services Specialist should:

- Discuss and assess the applicants' ability to meet children's immediate and short-term needs for health, education, social and emotional development, as well as their therapeutic needs, including special needs identified in children's service plans.
- Discuss and assess the applicants' ability to meet not only the short-term needs but, for children where adoption may be the permanency goal, those children's long-term needs for supportive families.
- The LDSS Family Services Specialist may identify, through conversations or review of the application, issues that may raise questions about the family's willingness or ability to become a provider. The Family Services Specialist should explore these issues with the family during these interviews.

1.7.5.1 Making the most of interviews

- Connect visits to the family's pre-service training, to allow for give-and-take of information that helps inform mutual decision-making.
- Approach visits from the perspective that assessment is truly mutual—just as the VDSS must assess the family's ability to support children and families, so should the family assess the VDSS's ability to support them in this endeavor.
- Observe interactions among household members, looking for the strengths and/or challenges individuals have in sustaining their current family relationships.
- Have conversations with all family members in the home, focusing on how fostering/adopting will impact the current family system.
- Carefully and thoroughly examine the family's expectations of children in foster care, and how realistic these are.
- Use opportunities to stress the importance of maintaining children's connections, and explore applicants' attitudes, skills, and willingness to support these connections.

1.7.5.2 Provider agreements

The LDSS Family Services Specialist must discuss the following mandatory agreements with the provider:

- [Discipline Agreement](#)
- [Confidentiality Agreement](#)
- [Foster Parent Bill of Rights](#)
- [Foster Care Agreement: Code of Ethics and Mutual Responsibility](#) (for discussion purposes only)
- [Adoptive Placement Agreement](#) (for discussion purposes only)

The content of these documents is reviewed, and prior to the applicants' approval, they must agree to abide by the values and requirements as specified in these agreements. All applicants sign the Discipline and Confidentiality Agreements *and the Foster Parent Bill of Rights*. The Foster Home Agreement: Code of Ethics and Mutual Responsibilities must be signed upon the placement of a child in the home. The Adoptive Placement Agreement is signed only upon the placement of a child in the home for the purpose of adoption (see [Section 1.4](#) on approval process requirements).

1.7.5.3 Applicant history

The applicant's historical information is gathered during the course of the interviews and from supporting documentation (see [Section 1.5.5](#)). The applicant's historical narrative regarding their life history builds the LDSS Family Services Specialist's basis for understanding and assessing the applicant's capacity to serve as a provider and what development may be needed to be effective foster parents. Information gathered regarding the applicant history is documented in the form of a narrative in the [Mutual Family Assessment](#) Report (see [Section 1.6](#)).

1.7.5.4 Training

The LDSS Family Services Specialist also explains training requirements and the concept of competencies necessary for foster and adoptive parenting.

1.7.6 Physical home environment assessment

The physical environment of the home must be assessed both in terms of the physical space (e.g., adequate furnishings, heat, ventilation, etc.) as well as the applicant's attitude toward, and ability to provide for the child's need for space and privacy and separate sleeping arrangements. Documentation of an assessment of the home environment should include the [Physical Home Environment Checklist](#). The following areas must be assessed, as appropriate, in the course of interviews at the applicant's home.

1.7.6.1 Space and furnishings

The home must have sufficient appropriate space and furnishings for each child receiving care in the home, including:

- Space to keep clothing and other personal belongings.
- Accessible basin and toilet facilities.
- Space for recreational activities.

1.7.6.2 Physical comfort

- The applicant must be able to provide safe, comfortable sleeping furnishings.
- All rooms used by the child must be heated in winter, dry, and well ventilated.
- Rooms and study space used by the child must have adequate lighting.

1.7.6.3 Sleeping space

- Sleeping space must be 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.
- Multiple children sharing a bedroom must each have adequate space including closet and storage space. Bedrooms must have adequate square footage for each child to have personal space.
- Children over the age of two (2) years must not share a bed.
- Children over the age of two (2) must not share a bedroom with an adult unless the LDSS approves a plan to allow the child to sleep in the adult's

bedroom due to documented needs, disabilities, or other specified conditions.

- Children of any age must not share a bed with an adult.
- Children of the opposite sex over the age of three (3) must not sleep in the same room.
- Children under age seven (7) or children with significant and documented cognitive or physical disabilities must not use the top bunk of bunk beds.

1.7.6.4 Access to telephone

The provider and children must have access to a working telephone in the home. This may be a cell phone.

1.7.6.5 Home safety requirements

1.7.6.5.1 Emergency preparedness plan

Providers need to develop plans [Emergency Plans](#) Form, that help protect their families and also provide communication information for use in emergency situations. State regulation [22 VAC 40 21170](#) requires a plan that includes, but is not limited to fire and natural disasters. It also requires the plan to include:

- How the provider plans to maintain the safety and meet the needs of the child in their home during a disaster.
- How the provider will evacuate the home, if necessary, during a disaster.
- How the provider will relocate in the event of a large-scale evacuation.
- The requirement to notify the LDSS of where they are relocating and contact information in the event of evacuation.

The LDSS Family Services Specialist should encourage the provider to review the appropriate sections of the [Emergency Plans](#) Form with the children who are old enough to understand. The Emergency Plans Form should be posted in a location that is accessible to the children.

Suggestions for information the providers should include in the plan are:

- The phone number of the agency.

- The phone number of a close neighbor or relative who could come to the home quickly.
- Plans for having emergency food, water, and batteries for flashlights and radios.
- The location and contact information for friends or relatives they may go to in an emergency or evacuation.

The LDSS will keep a copy of all sections of this plan in the provider's file.

1.7.6.5.2 Fire safety

The provider must permit a fire inspection of the home by appropriate authorities if conditions indicate a need and/or the LDSS requests such an inspection.

- Every home must have an operable smoke detector, the specific requirements of which must be coordinated through the local fire marshal. If a locality does not have a local fire marshal, the state fire marshal must be contacted.

1.7.6.5.3 Weapons

Possession of any weapons, including firearms, in the home must comply with federal and state laws and local ordinances. The provider must store any firearms and other weapons (e.g., BB guns, air guns, etc.) in a locked closet or cabinet, with the activated safety mechanisms. Ammunition must be stored in a separate and locked area. The key or combination to the locked closet or cabinet must be maintained out of the reach of all children in the home.

1.7.6.5.4 Pets

Providers must ensure that household pets are not a health or safety hazard in accordance with state laws and local ordinances, and the LDSS must request verification of provider compliance.

1.7.6.5.5 Other

- The home and grounds must be free from litter and debris and present no hazard to the safety of the child receiving care.
- Providers must keep cleaning supplies and other toxic substances stored away from food and locked, as appropriate. Medications must

be out of reach of children and locked as appropriate. Medications must be stored separately from food, except those medicines that require refrigeration.

- Every home must contain basic first aid supplies.
- Drinking water is available to children at all times.
- The LDSS may require other safety-related checks or verifications as deemed necessary (e.g., well water tests, electrical safety, home structure stability).

1.7.7 Supporting documentation

1.7.7.1 References

The LDSS must obtain at least three (3) references from persons who have knowledge of each applicant's character and applicable experience with children and caregiving of others. At least one (1) reference per person must be from a non-relative. If a single reference addresses the skills and abilities of both applicants, it may count as one of the three references for each. The state approved [Reference Request](#) Form is acceptable as reference documentation as well as references conducted via telephone and documented in the file.

1.7.7.2 Physical examination

The applicant(s) and other adult caregivers residing in the home must submit the results of a physical examination, conducted by a licensed health care professional, administered within 12 months prior to the provider's approval. These results must include comments regarding the person's mental and/or physical condition or abilities, such as they relate to caring for a child in the foster care system. A [Physical Examination](#) Form is available for use.

All household members who come in contact with the child must submit to a tuberculosis screening and/or test, in compliance with current VDH requirements. For most individuals, a TB risk assessment *should be sufficient*. Information regarding the [TB risk assessment form](#) is found on the Virginia Department of Health website. If risk factors or TB symptoms are present, a TB test may be required. The Center on Disease Control offers more information on [Testing for Tuberculosis Infection and Disease](#).

1.7.7.3 Prior experience

The LDSS Family Services Specialist must confirm if an applicant previously applied to, or was approved, denied, and or closed by any other LDSS or licensed child-placing agency through the [Application for Department Approved Provider](#) and Child Welfare Information System. The LDSS must have the applicant sign a request to release information for the other agency in order to obtain information about previous applications and performance and must use that information in considering approval of the applicant.

1.7.7.4 Verification of marriage and divorce documents

During a meeting with the provider(s), the Family Services Specialist must visually verify all documents that give proof of the provider(s)' marriage(s) or divorce(s). This requirement is documented on the [Checklist for Initial Provider Approval](#).

1.7.7.5 Agreements

The following agreements must be discussed with and, when noted, signed by the applicant during the interview process.

1.7.7.5.1 Discipline Agreement

The LDSS must have the applicant sign a [Discipline Agreement](#). This provides an opportunity to discuss the applicant's approach to discipline and attitude towards, and beliefs about, the use of corporal punishment with children. The LDSS must clearly communicate that no form of corporal punishment as defined in [Section 1.3](#) of this manual ("Definitions") may be used for any reason. The range of possible actions the LDSS may take as a result of the use of corporal punishment (e.g., additional training on discipline; anger management for the provider; suspension of the approval of the home; removal of the child from the home) must also be discussed.

1.7.7.5.2 Confidentiality Agreement

The LDSS must have the applicant sign a [Confidentiality Agreement](#). The LDSS Family Services Specialist must discuss confidentiality requirements with the applicant and ensure the applicant understands the need to keep confidential all information regarding the child, their family, and the circumstances that resulted in the child coming into care. A copy of the signed agreement must be provided to the applicant.

1.7.7.5.3 Foster Care Agreement/Adoptive Placement Agreement

The [Foster Care Agreement: Code of Ethics and Mutual Responsibilities](#) Form is required to be signed whenever a child is placed in a provider's home except when the placement is solely for the purpose of adoption. Although it does not need to be signed during the provider home approval process, its contents are to be reviewed and discussed with the applicant. The [Adoptive Placement Agreement](#) also is not signed during the provider approval process but should be reviewed with the applicant.

1.7.7.5.4 Foster Parent Bill of Rights and Dispute Process

The purpose of the Foster Parent Bill of Rights, as authorized by Virginia Code [§ 63.2-902](#) and established pursuant to Virginia Administrative Code [22VAC40-211](#), is to ensure collaboration, communication, access and transparency between local departments, licensed child placing agencies and foster parents. Local departments must share the [Foster Parent Bill of Rights](#) with all approved foster parents and maintain a signed copy in the family file.

Foster parents have a right to file a complaint regarding alleged violations of collaboration, communication, access, and transparency between the local boards and LCPAs and the foster parents.

Prior to filing a formal complaint, the foster parent must contact the Family Services Specialist assigned to the foster home and provide a description of the alleged violation. For LDSS approved homes, this would be the Resource Family Services Specialist assigned to the home. For LCPA approved homes, this would be the Foster Care Family Services Specialist for the child in foster care. The Family Services Specialist shall respond within five business days and explain any corrective action to be taken in response to the foster parent's complaint. If the foster parent and Family Services Specialist are unable to informally resolve the complaint, the foster parent may file a written complaint through the dispute resolution process with the foster care supervisor or designee. The supervisor shall respond to the complaint within five business days with the findings regarding the alleged violation and any correction action that will be taken.

If the foster parent disagrees with the supervisor's response, the foster parent may appeal the resolution to the local director by filing a written notice of appeal. The appeal shall include a description of the alleged violation, and a copy of the foster care supervisor's report. The director shall hold a meeting with all the parties within seven business days to determine the validity of the alleged violation and the appropriateness of the response from the Family

Services Specialist and supervisor. A summary of the meeting shall be documented by the Family Services Specialist after approval by the foster care supervisor. The director shall issue written documentation of findings to all parties, and when applicable, recommendations for corrective actions.

This dispute resolution process does not apply to a complaint related to the denial or failure of a local board to act upon an individual's claim for benefits. Complaints related to a claim for benefits shall be appealable pursuant to federal law ([42 USC § 671\(a\)\(12\)](#)) and state law ([22VAC40-201-115](#)).

Foster Parents may call 833-TELL 2FC (833-835-5232) to reach the Virginia Division of Family Services for disputes at any point in the dispute process. As per [§ 2.2-445](#), Foster Parents must also be notified and directed to the website for the [Office of the Children's Ombudsman](#).

1.7.7.6 Financial/employment history

1.7.7.6.1 Income verification

The LDSS Family Services Specialist must verify the provider has income sufficient to meet the basic needs of the household. Requesting credit checks may have an adverse effect on the applicant's credit history and are discouraged. Applicants are not required to be employed so long as there is sufficient income to meet the needs of the family. Where there is no employment, agencies should carefully examine the source and reliability of any other income or resources in establishing whether there is sufficient income to meet the needs of the family. Financial or employment history information that may be used to assess income sufficiency may include:

- Recent pay stubs.
- Tax documents (e.g., W-2s).
- Verification of any assistance received (SSI, food stamps, public assistance, etc.).
- Utility bills (with payment history).
- Deployment information (military).
- Rental lease, public housing agreement, or mortgage statement.
- Bank statements.

1.7.7.6.2 Assets and resources

Assets and resources include any other sources of income (e.g., real estate), estate holdings, monetary gifts or bonuses, or any public assistance. There is no general restriction on the receipt of public assistance for resource families.

1.7.7.6.3 Debts and obligations

Debts may include aggregate amounts owed to credit cards, student loans, car leases/loans, etc., as well as individual amounts owed for home/rental, home maintenance.

Income requirements should be documented on the [Checklist for Initial Provider Approval](#). Income requirements are not applicable to applicants who are solely approved as respite care providers.

1.7.8 The decision to approve or deny

Except when children are placed with kinship foster parents, applicants must meet all standards as established by the regulation and be approved by the LDSS prior to placement of a child in the home. Approval may be achieved by the applicant meeting all standards or by meeting most standards and having a waiver granted for one or more standards.

1.7.9 Documenting approval

1.7.9.1 Format of approval narrative

The LDSS must document the Mutual Family Assessment process through a narrative report that addresses specific information obtained in the course of the approval process. The minimum required areas to be contained in the narrative are outlined in the preferred template discussed below.

1.7.9.2 Preferred template

The [Mutual Family Assessment](#) Report is the preferred format for use in approving provider families. LDSS that choose to use another format for their narrative report must clearly address each of the categories in the preferred template.

1.7.9.3 Approval checklist

Not all information obtained in the course of an assessment need be written into the narrative report. LDSS are required to complete the [Checklist for Initial Provider Approval](#).

Once completed, this form, attached to the completed narrative report, constitutes the completed [Mutual Family Assessment](#) Report.

1.7.10 Notification to the provider

Once approved, providers are to be given a [Certificate of Approval](#) specifying the following: Type of approval (dually approved as a resource provider or respite provider).

- Date when the approval became effective and the date when the approval will end.
- The effective date cannot be any earlier than the date on which any of the items required to approve the home was received.
 - The approval period cannot exceed 36 months.
 - Specifications or limitations of the approval (e.g., number/types of children).
- The signature and title of the individual approving the home and the supervisor's signature and title.

NOTE: A Certificate of Approval cannot be issued unless all required documents are received. A copy of the Certificate must be filed with the applicant's record.

If the approval process results in the LDSS's denial of the application, the LDSS must notify the applicant in writing of its decision. A copy of the letter must be filed in the applicant's record.

1.8 Allowing a waiver

The local department may request a non-safety or a Kinship waiver for the provider, if the waiver does not jeopardize the safety and proper care of the child or violate federal or state laws or local ordinances.

1.8.1 Waivers for kinship foster parents

To allow children to immediately be placed with Kinship Foster Parents, Kinship waivers must be granted for a period of 6 months for pre-service training, mutual family assessment, tuberculosis screening or tests and physical examinations. If all

of the standards of approval are not met within 6 months, the home will be considered unapproved.

Example of a time-limited kinship related waiver:

The LDSS identifies a relative or fictive kin who is willing to start caring for the child in foster care immediately. A Kinship waiver may be granted for 6 months to allow for completion of pre-service training, mutual family assessment, tuberculosis screening or testing and physical examination by the provider(s). If a kinship foster parent is unable to complete all of the standards related to approval within 6 months, the home will be considered an unapproved placement.

1.8.2 Process and exclusions

1.8.2.1 Process for obtaining a Non-safety Waiver

- Complete all requested information on the [Waiver Request](#) Form .
- Submit form electronically to the Regional Resource Family Consultant as notification.
- Maintain waiver documentation in the applicant's file.
- If granted, conduct an annual review of the waiver.

1.8.2.2 Exclusions

No waivers will be granted that would compromise:

- Safety-related standards;
- Requirements set by law (such as [barrier crimes](#) or a search of the Child Welfare Information System); or
- Any waiver that, if granted, would violate federal or state law or any local ordinances.

1.8.3 Annual review of Waivers

1.8.3.1 Approval status

If a provider is granted a Non-safety waiver and is in compliance with all other requirements of this guidance, the provider is considered approved. The Non-

safety waiver request/decision form must be maintained in the provider's file, and must be updated annually.

1.8.3.2 Annual review

While some Non-safety waivers are permanent in nature, others may only be active for a set period of time. In this case, documentation that the waiver is no longer applicable must be kept in the provider's file. Annual reviews are not necessary when a waiver is no longer necessary.

For example, a waiver is granted to allow a grandmother to become approved and begin caring for her grandson prior to completing pre-service training. This is because training does not begin for two more months and waiting does not serve the best interests of the child. Once the grandmother completes training, this waiver is no longer necessary. The Family Services Specialist must update the waiver request/review form to indicate training was completed, send the notice to the regional Resource Family Consultant, and file the form in the provider's file along with proof of the completed training.

1.8.4 In-service training

1.8.4.1 Training requirements

The LDSS must ensure and document that each provider receives annual in-service training. Such training allows the provider the opportunity to review and learn additional information relevant to the care of children placed in foster care or an adoptive home. It also provides the LDSS the opportunity to engage with the provider in discussions related to child safety, permanency, and well-being and assess the provider's skill level and needs for additional training. The provider is required to complete annual in-service trainings.

1.8.4.2 Training needs

Training must be relevant to the needs of children and families and may be structured to include multiple types of training modalities (for example, online foster parent training courses, seminars, and conferences).

While a specific number of hours is not specified, ten (10) hours of in-service annually (per parent) should be considered the minimum acceptable amount with no more than half of these hours obtained utilizing self-paced training methodologies (e.g., online courses, self-study books, etc.).

1.8.4.3 Annual training

The LDSS must provide opportunities for training on an annual basis.

- Families should be surveyed no less than annually to determine training needs.
- Utilization of CRAFFT as well as collaborations with neighboring localities to conduct training can bolster LDSS offerings of pre- and in-service training.
- When providers wish to receive credit for training conducted outside of social services (i.e., through a local school, at a state conference), the LDSS should request information about the content (through an outline, handouts, etc.) as well as verification of attendance (certificate, training roster, etc.). Those LDSS that use Title IV-E funds to support the costs of such trainings must submit the training information in advance of the training to the State office for approval. To access Title IV-E submission and funding information go to the DSS internal website and click [“Instructions for IV-E Funding.”](#)

1.9 Provider file

1.9.1 Establishing a provider file

A provider file should be established at the time a formal application is received. The application should be on VDSS-approved forms [Application for Department Approved Provider](#); alternatively, other forms/letterhead may be used if all required components are addressed.

1.9.1.1 Child Welfare Information System record

The Resource Section of Child Welfare Information System is the electronic file that captures information on provider homes and other resources. Information on the household applying to be a provider should be updated in the Child Welfare Information System as the family assessment and approval process moves forward.

It is important to search the Child Welfare Information System Resource Directory prior to opening a new record in Child Welfare Information System to

prevent duplication. The Child Welfare Information System Help section has several topics such as “Search for a Resource” and “Open a New Resource” which provide assistance when completing the screens. Contact VCCC at 1 (866) 6378482 for additional assistance in entering resource homes into Child Welfare Information System. The Home Office enters all Residential Facilities and Child Placing Agencies.

1.9.1.2 Paper case file

Although the Child Welfare Information System is the official case record, all forms, letters, and other original hard copy documents (as referenced in this guidance) must be retained in the paper provider file. The [Checklist for Initial Provider Approval](#) can help organize the file.

1.9.2 Maintenance of the provider file

Any changes in the provider family that require new documents (e.g., criminal background search for a new adult in the home) or re-approval documents must be retained in the paper file and information updated in the Child Welfare Information System as needed.

1.10 Monitoring approved homes/providers

1.10.1 Standards of care for continued approval

LDSS are required to engage in ongoing discussion with and supervision of providers. The “Standards of Care for Continued Approval” as described below are first discussed during the assessment in order to ensure providers are knowledgeable of what is expected of them once a child is placed in their home. The “Standards” should be part of the ongoing dialogue with providers. Local Family Services Specialists should discuss and monitor how the provider meets these standards. Several of the “Standards” noted below also require the LDSS Family Services Specialist to document compliance on the [Checklist for Family Re-Approval](#).

- The provider must provide care that does not discriminate on the basis of race, color, sex, national origin, age, religion, political beliefs, sexual orientation, disability, or family status.
- The provider must ensure the child receives meals and snacks appropriate to their daily nutritional needs. The child must 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.

- The provider must ensure that they can be responsive to the special mental health or medical needs of the child.
- The provider must establish rules that encourage desired behavior and discourage undesired behavior. The provider must not use corporal punishment or give permission to others to do so and must sign an agreement to this effect.
- The provider must provide clean and seasonal clothing appropriate for the age and size of the child.
- If a provider transports the child, the provider must have a valid driver's license and automobile liability insurance. These will be checked at approval and re-approval but verification may be required at any time deemed necessary.
- The vehicle used to transport the child must have a valid registration and inspection sticker.
- Providers and any other adults who transport children must use functioning child-restraint devices in accordance with requirements of Virginia law. See [Section 10.6.1.2 of the Foster Care Manual](#) and the following link for additional information. [Virginia's Child Passenger Safety Laws](#)

1.10.2 Change in household composition or circumstances

Providers should inform the LDSS as soon as possible but no later than 45 days **before** a significant change occurs in the household composition or circumstances, including but not limited to:

- A child turning 18 years of age;
- A new adult entering the household;
- A household member leaving the household;
- A change in marital status of a provider;
- A significant change in health status of a provider;
- A change of address (a move);
- A substantial change to the residence (such as adding a swimming pool);

- Any changes that may impact the health or safety of a child placed in the home such as recent arrests or pending charges of a foster parent or adult household member;
- Any decline in a foster parent's physical or mental health which directly impacts the provider's ability to care for a child in foster care should be reported immediately but no later than seven (7) days from the time of occurrence.

1.10.2.1 Background checks for new adults entering the household

For any new adult entering the home, background checks must be conducted, consisting of a national criminal record check, a CPS Central Registry search, and a search of the Sex Offender Registry, which is included in the national criminal record check. The [Registry](#) may be accessed on the Virginia State Police website. If the new adult in the home has resided in another state within the previous five (5) years, they must also have a CPS Central Registry search run in those states in which they resided. If the adult will be transporting the child, a DMV check is required.

In instances where it is not reasonable to complete all the background checks prior to the new adult entering the household, **at minimum**, a written statement of affirmation disclosing any criminal and child abuse and neglect history in Virginia and any other state of residence within the past five (5) years, satisfactory findings on a Central Registry search, and a Virginia criminal name check must be completed.

The new household member must schedule themselves for fingerprinting and the LDSS must submit to a Search of the Central Registry and Release of Information Form, to the [State Office of Background Investigations](#) for processing **within 3 days**.

Within **60** days of a person in the home becoming 18 years old, the results of background checks must be obtained by the local department, consisting of a national criminal record check, a CPS Central Registry search, and a search of the Sex Offender Registry, which is included in the national criminal record check. A written [Sworn Statement or affirmation](#) disclosing any criminal and child abuse and neglect history in Virginia and any other state of residence within the past **five (5)** years must be completed when the individual becomes 18. If the 18 year old will be transporting the child, a DMV check is required.

Any individual participating in the Fostering Futures program, which allows local departments to continue to provide foster care services to individuals who are 18 years of age or older but have not reached 21 years of age, who is placed in a foster home must be subject to the background check requirements. The

results of such background check must be used for the sole purpose of determining whether other children should be placed or remain in the same foster home as the individual subject to the background check. The results of the background check must not be used to terminate or suspend the approval of the foster home.

1.10.2.1.1 Required monitoring efforts

LDSS are required to monitor providers as follows:

1.10.2.2 Required family visits

The local Family Services Specialist must visit the home of the approved provider as often as necessary, but at least quarterly, to provide support to and monitor the performance of the provider and must document these visits in the provider record.

- When a child is placed in the home, these visits may coincide with the monthly visits to the child and be completed by the same LDSS Family Services Specialist.
- If there is no child placed in the home, the quarterly visit may be replaced by telephone contact.

1.10.2.3 Monitoring activities

If monitoring efforts indicate that significant changes in the household composition or circumstances of the provider have occurred and would impact the conditions of approval, an [Addendum Template](#) must be completed and included with the Mutual Family Assessment Report and appropriate action taken. Such action may include a plan to correct any deficits noted, suspension of the provider's approval, or revocation of the provider's approval.

1.10.2.4 Actions

If the re-approval process results in the LDSS's decision to suspend or revoke the provider's approval, the LDSS must notify the provider in writing of its decision (see [Section 1.11](#)). A copy of the notification letter must be placed in the provider's file.

1.11 Re-approval requirements

The approval period for a provider is 36 months. Re-approvals are due **no later than three (3) years** from the begin date of the previous certificate of approval. LDSS are required to complete all required documents including new background checks as outlined in [Section 1.10.2.1](#).

1.11.1 Interview requirements

During the re-approval process, the LDSS Family Services Specialist must conduct a minimum of one (1) interview with the provider(s) in their home. Family Services Specialists are to use the visit to conduct a review and update the Mutual Family Assessment.

1.11.1.1 Review

The LDSS Family Services Specialist must conduct a review of the previous home approval information with the providers. By reviewing the information with the provider, the Family Services Specialist and provider have the opportunity to identify and discuss any changes in the provider's situation that may affect the approval of the home, such as the number and types of children for which the provider will be approved.

1.11.1.2 Written addendum

The LDSS Family Services Specialist must update the Mutual Family Assessment Report through a written [Addendum Template](#), documenting the decision to reapprove the home. The addendum includes any new information the Family Services Specialist has obtained and considered in deciding to re-approve the provider: (i.e., new additions to the household, changes to the home, changes in marital status, or updates to capacity).

1.11.2 Supporting documentation

1.11.2.1 Criminal background checks

All adults in the home should already have had a national background check of criminal records completed and reflected on the Checklist for Initial Provider Approval. For re-approval, a Virginia criminal name check and CPS Central Registry search are required. Completed background checks must be dated within the 36 months since the date of the most recent central registry finding and the most recent criminal history record check report. A sworn statement or affirmation does not expire and does not need to be completed at re-approval.

1.11.2.2 Driver's license, registration, and insurance

The provider and other adults expected to transport children must show evidence of a valid driver's license, a valid motor vehicle inspection, and proof of automobile insurance.

1.11.2.3 Tuberculosis screening/test

Household members must obtain and provide to the LDSS the results of a new [TB Risk Assessment](#) or TB Screening form as documentation of the absence of tuberculosis in a communicable form.

1.11.2.4 Confidentiality and Discipline Agreements

LDSS Family Services Specialists must review and complete new the [Confidentiality and the Discipline Agreements](#). A copy of the forms must be given to the provider.

1.11.2.5 In-service training

All in-service training must be documented in the provider's file, as well as any additional training that is needed.

The [Addendum Template](#) to the Mutual Family Assessment Report must indicate that the above requirements were met. When applicable, any documents received during the approval process (e.g., TB screening, training verification) are to be included in the provider's file.

1.11.3 Re-approval report

1.11.3.1 Mutual Family Assessment addendum

This narrative must address all requirements for re-approval as outlined in this guidance and contain documentation from interviews and submitted forms, and must be signed and dated by the Family Services Specialist completing the addendum and the director of the LDSS or their designee.

1.11.3.2 Re-approval checklist

LDSS are required to complete the [Checklist for Family Re-approval](#). Once completed, this form attached to the completed addendum constitutes the completed re-approval report.

1.11.4 Notification to provider

If the provider is re-approved, they are to be provided with a new [Certificate of Approval](#) specifying the following:

- Type of approval (dual or respite).
- Date when the approval became effective and the date when the approval expires.

The effective date of the re-approval certificate should be no later than the expiration date of the previous certificate. The home is not eligible for re-approval if all required documents are not received by the end date of the previous certificate of approval.

- The signature and title of the Family Services Specialist approving the home and the supervisor.

If the re-approval process results in the LDSS's denial of the application, the LDSS must notify the provider in writing of its decision. A copy of the letter must be filed in the provider's file.

1.12 Suspending or revoking provider approval

Actions by the provider or changes in the provider's situation may require the LDSS to take action that results in the suspension or revocation of a provider's approval. Providers who do not maintain compliance with the standards of approval as outlined in this guidance must have their approval either temporarily suspended or completely revoked. Frequent contact with the provider and visits to the home by an LDSS Family Services Specialist are the major mechanisms for determining maintenance of standards. If there are concerns regarding the providers' ability to maintain the safety and well-being of a child, the local department has the authority to change the placement.

1.12.1 Suspensions in provider approval

Suspensions may occur when a change in the circumstances of the provider results in the provider's temporary inability to meet standards (e.g., individuals living in the home with barrier crimes that would jeopardize the safety of the child(ren); safety concerns regarding the physical structure of the home). The LDSS may suspend a provider's approval when the provider cannot temporarily maintain full approval through corrective measures or issuance of a waiver, and all agree that a violation of

the standards for approval can be resolved. If a provider has received a founded disposition of child abuse or neglect after being granted approval, the local department must suspend the provider's approval. In situations where the founded disposition is under appeal, the provider's approval must be suspended until the appeal process is completed. Suspensions mean the provider is no longer approved for the placement of children, and therefore, no child may reside in the home until the suspension is lifted. Reinstating approval requires resolution of the circumstances that caused the suspension and must be documented in the addendum to the provider's file. Any child placed with a provider at the time approval is suspended must be immediately removed. No other children may be placed with the provider during the period of suspension. A suspension does not change the approval period.

1.12.2 Revocation of provider approval

The LDSS may revoke a provider's approval when conditions in the home or actions of the provider are a threat to the safety, permanency, or well-being of a child placed in the home. The LDSS must revoke a provider's approval when:

- A provider has been convicted of a [barrier crime](#) as defined by Virginia Code.
- A provider does not comply with approval standards (unless a waiver has been obtained).
- A provider whose approval has been suspended does not correct the conditions that led to the suspension.

The LDSS may also revoke a provider's approval when other conditions result in the VDSS's determination that the provider is not or cannot provide a safe, stable, and nurturing home for children. Decisions to revoke and the factors that lead to such a decision must be documented in the provider's file and discussed with the provider. A provider whose approval has been revoked and who subsequently wants to seek approval must submit a new application.

1.13 Respite provider approval

1.13.1 Purpose of respite placements

Respite care is a placement resource designed to provide relief to families caring for children by providing short-term substitute care for children. The purpose of respite care for provider families is to reduce foster home disruption and provide a stable foster care placement for the child. See [Section 10.5 of the Foster Care Manual](#).

Respite placements may be used when a family emergency arises, in the event of an illness, to provide the foster family with time to spend with immediate family members and friends, or for foster parents to have some time to themselves. It may also be used to provide respite to support the needs of a child who is transitioning to an adoptive placement or stepping down from a more restrictive placement (i.e., congregate care setting) to a foster or adoptive home or to the home of a relative through regularly scheduled visits. Such visits may help evaluate appropriate matching of the child with the prospective family and ultimately reduce the number of placement disruptions. Relative respite care is a viable tool to help maintain vital family connections that are important in establishing and maintaining permanency. Relative respite care also may increase the possibility of relative adoption or custody of the child by relatives.

Individuals with whom a child may spend time socially (e.g., overnight stays with a friend, church camp, etc.) are not subject to approval as respite providers.

1.13.2 Approval of respite providers

- **Dual Approval:** Providers with full, dual approval may also provide respite care except in cases of kinship foster parents who are dually-approved for specific children.
- **Respite Approval Only:** Providers approved for respite only must satisfy all requirements for dual approval with the exception of:
 - Of the 21 pre-service training core competencies required for approved providers, only 13 specific core competencies are required for respite-only providers (see [Section 1.5.6.2](#)).
 - Provision of financial information.
- **Re-approval of Respite Providers:** LDSS Family Services Specialists should follow requirements for re-approval for respite providers as spelled out in Sections [1.9](#), [1.10](#), and [1.11](#).
- **In-service Training:** The LDSS must provide opportunities annually for in-service training.

1.14 Provider's right to grieve

1.14.1 Allowable grievances

1.14.1.1 Provider approval

For initial approval or for provider re-approval, the applicant must have the right to dispute the actions of the LDSS to the local board on issues related to their application to become a provider. See dispute process in [Section 1.7.7.5.4](#).

1.14.1.2 Child placement

Decisions on the placement of a specific child with a provider are not subject to grievance. The local board shall have the final authority to determine appropriate placement for children pursuant to [§ 16.1-278.2](#) of the Code of Virginia. Decisions regarding final adoptive placements are made by the circuit court pursuant to Chapter 12 ([§ 63.2-1200 et seq.](#)) of Title 63.2 of the Code of Virginia.

1.15 Best practice

Local departments are encouraged to create Collaborative Local Board Placement programs, which are collaborative relationships with neighboring localities to recruit, train, assess and approve kinship, foster and adoptive families. Such programs will:

- *Promote Kin First practices within localities by prioritizing search, engagement and approval of kinship foster parents;*
- *Ensure staff members are specifically devoted to Resource Family work, including approving and supporting kinship foster parents;*
- *Promote a shared understanding and awareness of available foster and adoptive families approved by LDSS who are prepared to build relationships with the families of children and preserve the connections children have to their communities and natural support networks;*
- *Increase opportunities for collaborative data-driven recruitment efforts; and*
- *Create opportunities for specialized training and development of foster parents to better meet the needs of children in care.*

1.15.1 Recruiting providers

1.15.1.1 Basic principles

- Utilize data to drive recruitment, developing a profile of those children for whom the agency most needs families.

- Conduct utilization studies of provider families to determine priorities for targeted recruitment of new families as well as the in-service needs of existing resource parents.
- Support the retention of current families is the most effective overall recruitment strategy.
- Focus on strengthening the LDSS's capacity for assessment and training of resource families prior to engaging in recruitment.

Increase utilization of CRAFFT to bolster support and retention of existing families.

1.15.1.2 Balancing types of recruitment

A balanced recruitment plan incorporates a majority of targeted and child-specific recruitment, with a nominal amount of general recruitment.

- Conduct a minimal amount of general recruitment (e.g., 10%), using data to inform prospective families of the number, types, and needs of the children in foster care.
 - General recruitment typically serves as community education and creates an awareness of the foster care system and who it serves.
- Utilize targeted recruitment for the community at-large, focusing in on those populations whose characteristics match with the needs of the children currently in care.
 - Targeted recruitment should be used to develop a diverse pool of families who can receive and nurture children and youth as the agency works to establish permanence.
- Child-specific recruitment is child-focused, exploring existing connections when possible; the amount of child-specific recruitment needed is dependent upon the population of children in care, and is most effective for certain populations:
 - Youth who have lingered in care for more than two (2) years.
 - Large sibling groups.
 - Children with exceptional needs or circumstances.

- All children and youth with TPR for whom permanence is not yet established.

In a proactive system, child-specific recruitment is a natural extension of the diligent searches that have been conducted throughout the life of a case for the purpose of establishing supports for the birth family and/or maintaining connections for the child.

1.15.1.3 Responding to inquiries

- Activities such as managing the initial phone call, information packets, and information sessions are extensions of recruitment.
- A welcoming, “screen in” approach is more effective than the traditional “screen out” practice (which turns away many viable families who could be developed and reinforces a negative community image of DSS).
- Regularly scheduled information sessions are better attended than sporadic scheduling.
- Tracking prospective families from the first phone call to completed approval minimizes “application drift,” ensures that all documentation is obtained, and provides the opportunity for follow-up with families for quality assurance.

1.15.1.4 Exploring other ways to serve children

All recruitment plans should include consideration of other service options for those individuals who cannot be approved as a foster, adoptive home, such as mentoring, volunteering, or in other ways providing service to children and youth.

1.15.2 Supporting and retaining resource families

1.15.2.1 Basic principles

- Resource families provide a service that the agency cannot; therefore, they should be treated with respect and valued as members of the child’s permanency team (see Section 1.7.7.5.4).
- Because children in foster care often have exceptional needs, the families caring for them must have the services and supports that will enable them to provide appropriate care for children and connections to their families.

- Support and retention of currently approved families is the single most effective recruitment strategy.
- Data regarding the utilization of resource families, their expressed needs for training and support, and their overall level of satisfaction should be collected and regularly used to inform both recruitment and retention activities.

1.15.2.2 Supporting placements

Providing a high level of information and support at both the early and ongoing stages of placement is critical in order for both the family and the agency to meet a child's needs.

The very first placement a family experiences after approval should be given extra time and responsiveness to assist the family in putting their training into practice, making the needed adjustments to their home and schedule to meet the child's needs, preparing for and responding to their own children's needs during this transition, and beginning the early work of maintaining the connection between the child and the birth family.

- All relevant information about the child (and where appropriate, the birth parents) should be shared with resource parents caring for that child; without it, they are unable to meet the child's needs, and this inability undermines placement stability.
- The LDSS should 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. This relationship should be regarded as a priority, facilitated by the agency, and valued by the child's permanency team.
- When appropriate, planned or emergency respite should be used to provide resource families with opportunities to take care of themselves and nurture marital and family relationships.
- In cases where a child in foster care has caused extensive damage to the property of the resource family, the LDSS should explore the use of the [Contingency Fund](#) to reimburse the resource parent for associated expenses.

1.15.2.3 Valuing resource families

As the providers of the child's daily care, resource parents possess a unique perspective and should be regarded as persons with expertise about the child.

They should be treated as valued members of the child's permanency team as reflected in the [Foster Parent Bill of Rights](#).

- Communication is a fundamental component of teamwork with resource families, requiring prompt efforts and a high level of overall customer service.
- Providing timely notification of court hearings, team meetings, visits, etc. allows families to plan schedules and prepare accordingly, and displays a fundamental level of respect for the family.
- Support and respond to the needs of resource families in a timely manner, including providing ongoing training and linking them to community resources.
- Ensure that training and support activities are driven by family needs and incorporate a variety of topics; utilize CRAFFT to connect families to training opportunities.
- Utilize an ongoing process to gather information about the needs of resource families and their overall satisfaction level regarding their relationship with the agency.
- Recognize and acknowledge resource families for their expertise and service.