

#### Candice Broce Director

# MEET OUR Tegn

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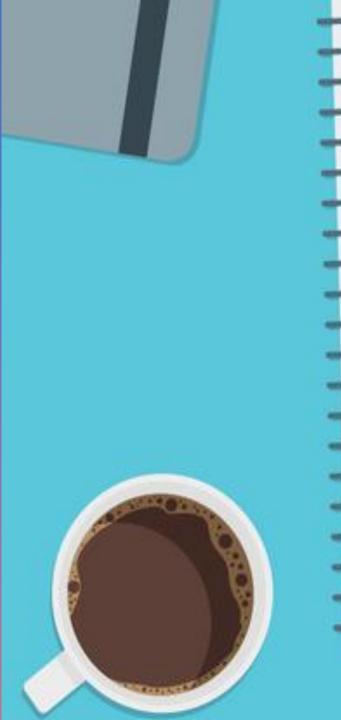


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GA SCORE Redesign/Enhancements CareSolutions Team

Data & Reminders: Mrs. Andria Bolton

enda

SAFE Initial Assessments: Ms. Treshana Davis & Ms. Amy Hill

SAFE Updates Ms. Shanise Wooten & Ms. Tomeka Branscomb

Addendum: Mrs. Azure McCollough





### We will now take a 15-minute break.

### GA+SCORE FY21 INITIAL HOMES DATA

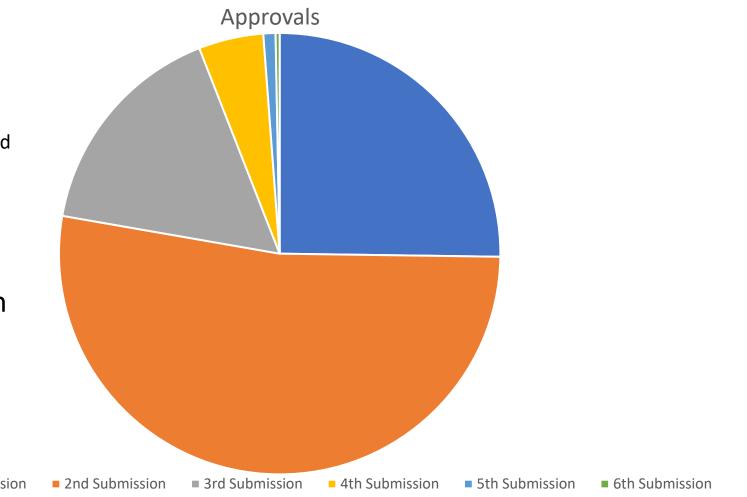
- From July 1, 2020, to June 30, 2021, there were:
  - 1,767 Foster Home Inquires added to GA+SCORE
  - 585 inquiries were withdrawn prior to approval
  - 357 were submitted at least once
  - 68 Foster Homes reopened

Leaving a total of **757** inquiries remaining.

Note: Of the **357** homes submitted for review **337** were approved and **20** had not been approved. Average time elapsed from initial inquiry created in GA SCORE to approval in GA SHINES **156-323** days. Policy **14.10\*** Complete the initial family evaluation no later than **30** calendar days after the applicant completes all pre-service activities (including pre-service training, home study interviews, submission of all questionnaires, verifications, forms, and other requested Documentation. Terminate the assessment process for applicants who do not submit all required documentation within **30** calendar days of completing all pre-service activities.

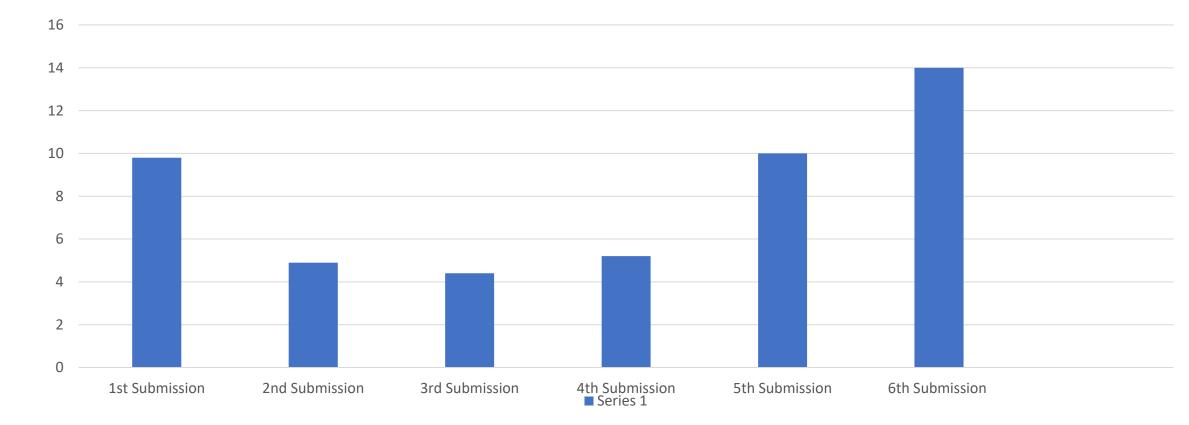
### Initial Home Submission Data FY21

- 85 homes approved on 1<sup>st</sup> submission
- 177homes approved on 2<sup>nd</sup> submission
- 55 homes approved on 3<sup>rd</sup> submission
- 16 homes approved on 4th submission
- **3** homes approved on 5th submission
- 1 homes approved on 6th
   submission



DIVISION OF FAMILY & CHILDREN SERVICES

# OPM RD Team Initial Approval Average Timeframes FY21



### Top Reasons for Initial Edit Requests:

- References
- Issues with submitted Forms
- SAFE Questionnaires
- SAFE Mitigation
- Safety Screenings
- Lack of Assessment



#### DIVISION OF FAMILY & CHILDREN SERVICES

#### Before the narrative is approved, did it contain and address the following?

- General Information
- Directions to the home
- Household Demographics
- Children (both inside and Outside of home
- Extended Family
- References
- Medical Summary
- Safety Screening Results
- Home and Community
- Applicant Introduction
- Applicant Profile
- Others residing in the home
- In-Home Daycare (if applicable)



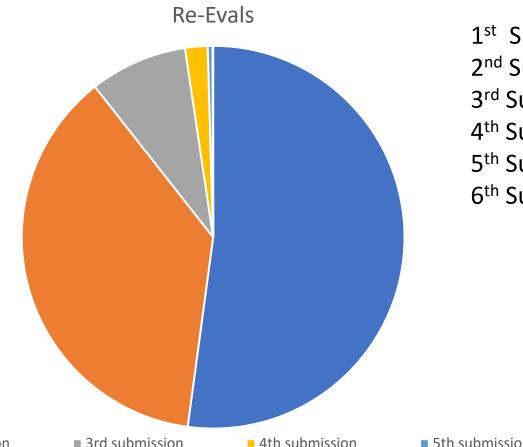
- Caregiver Protective Capacities
- Family Lifestyle & Interaction Patterns
- Motivation
- Legal/Financial Responsibilities
- Partnership with birth parents and DFCS
- Psychosocial Evaluation Report
- Physical/Social Environment
- Pre- Service Training/ Continued Parenting Development plan
- Caregiver's Placement Preferences
- Conclusion and Recommendation
- Required Signatures
- \*\*Forms & Attachments\*\*

### GA+SCORE FY21 RE-EVALUATION DATA

- July 1, 2020-June 30, 2021, there were **2,412** foster homes with re-evaluations required:
  - 2,263 re-evaluations were submitted
  - 2,208 homes were approved; however, 55 homes were not resubmitted with the requested edits.
  - 149 homes were not submitted during the required re-evaluation timeframes.

### **Re-Evaluation Home Assessment Data FY21**

2,263 re-evaluation records were ٠ submitted to OPM RD to review between July 1, 2020-June 30, 2021. Of 2,263 records submitted 2,208 were approved and 55 were not approved during these timeframes. At the first submission 1,151 were approved and the remaining homes were after additional edits were made to the re-evaluation.

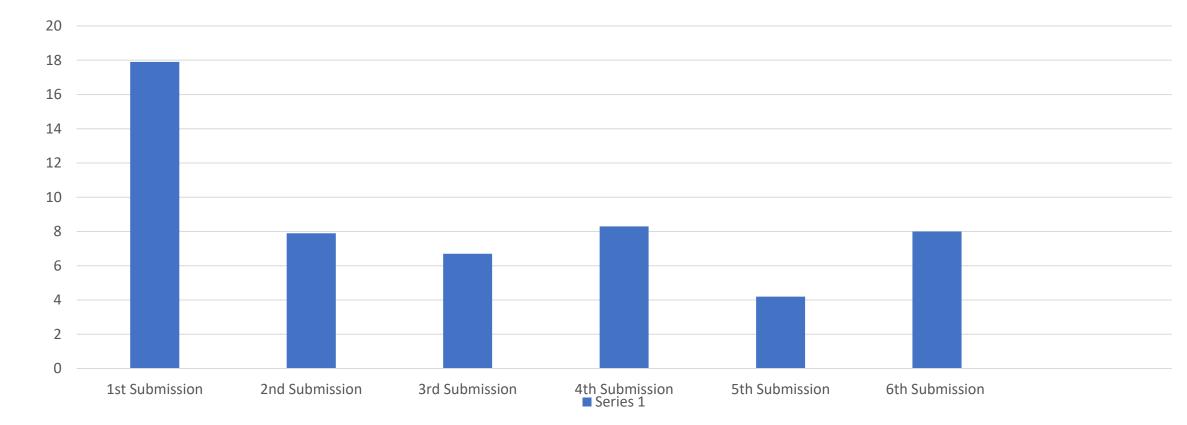


1<sup>st</sup> Submission: **1151** 2<sup>nd</sup> Submission: 823 3<sup>rd</sup> Submission: **182** 4<sup>th</sup> Submission: 42 5<sup>th</sup> Submission: 9 6<sup>th</sup> Submission: 1

#### DIVISION OF FAMILY & CHILDREN SERVICES

# OPM RD Team Re-Evaluation Approval Average Timeframes FY21

Days Elapsed



### Top Reasons for Re-Evaluations Edit Requests:

- Issues with Forms
- SAFE Questionnaires
- Training
- Immunization
- SAFE Update Mitigation
- Lack of assessment (FP Discipline, Updated Safety Screening, Sleeping Arrangement, updated Water Safety Assessment)



# SAFE Assessment Update

- General Information
- Safety (Criminal/CPS Record Checks)
- Home and Community
- Family Lifestyle & Interaction Patterns
- Psychosocial History/Personal Characteristics
- Marriage/Partner Relationship
- Children/Others Residing or Frequently In
  The Home
- Extended Family Relationships

- Physical Environment
- General Parenting/ Caregiver Protective Capacity
- Specialized Parenting
- Adoption/Foster Care Issues
- Children Placed in the Home
- Conclusion and Placement Considerations
- Recommendations
- Required Signatures and Caregiver's Review of Re-Evaluation Report
- Psychosocial Inventory Results

# SAFE Update Required Forms

#### S.A.F.E Consortium Forms

SAFE Harvesting Sheet SAFE Update Questionnaire SAFE Update PSI SAFE Update Assessment SAFE Supervisor Certification

#### **Georgia Specific Forms**

- Caregiver Child Safety Agreement (Form 29)
- Financial Statement (Form 44)
- \*CPS History Request Form
- Caregiver Feedback Survey
- Caregiver Placement Preferences Form
- Water Safety Assessment (if applicable)
- Caregiver Home Inspection Safety and Compliance Checklist
- Confidentiality and Privacy Standards Agreement
- Approval Letter

### CURRENT CPA HOME STATUS DATA

UNAPPROVED RE-EVALUATIONS	INITIAL'S PENDING OPM RD REVIEW	RE-EVALUATIONS PENDING OPM RD REVIEW
384 Homes	19 Homes	122 Homes
140 Homes at or less than 30 days overdue	17 Homes pending less than 5 days	127 Homes pending Less than 14 days
244 Homes are more than 30 days overdue	2 Homes pending more than 5 days	9 Homes Pending More than 14 days



#### **OPM RD Reminders**

# Remember to add Non-RBWO Placements

Examples of Non-RBWO Youth

- DJJ Youth or Juvenile Court Placement
- DBHDD
- Private Placements
- Other DFCS (ICPC Youth or Youth Pending Adoption Finalization)

# Daily Non-RBWO Roster In GA+SCORE

<b>GA</b> <sup>+</sup> SCORE						~	QUICK LINKS
Rachel's Place (Test Only) • <u>Child Placement Services</u> (5 <u>Select Foster Home</u>	128) - <u>Child Placing Agency</u> (	ACTIVE)				<u>GA_SCORE</u>	: > <u>Provider</u> > Snap Shot
✓ PROFILE		✓ SERVICES	ROSTERS	*	REPORTS	~	RISK MANAGEMENT
Snap Shot		Daily Roster Foster Home Roster <u>Daily Non-RBWO Ros</u> t	tor				
STATUS Active FOSTER HOMES 7	VENDOR ID 87921		RBWO Referrals				
SHINES RESOURCE ID 8009723	PROGRAM SIZE Small						
OPM TEAM South	SITE CAPACITY 7	(compliant homes only)					
COMPLIANT FOSTER HOMES	3						

#### DIVISION OF FAMILY & CHILDREN SERVICES

### Remember to Add Non-RBWO Placements

		✓ SERVICES	✓ ROSTERS	✓ RISK MANAGEMENT
nsert Non RBWO A	dmission			
FIRST INITIAL	LAST INITIAL			
DATE OF BIRTH				
PLACEMENT TYPE	~			
SELECT DJJ Private placement			~	
BHDDAD Juvenile Court Other DFCS (e.g., Ac	loption)			
DISCHARGE DATE				

# 14.1 Safety and Quality Immunization Reminder

- All children who are household members must be up to date on immunizations unless the immunizations are contrary to the child's health as documented by a licensed health care professional.
- All household members who will be caregivers of infants must have an up to-date pertussis (whooping cough) vaccination unless the immunization is contrary to the individual's health as documented by a licensed health care professional.
- All household members who will be caregivers of infants and children with special medical needs must have an up-to-date annual influenza vaccination unless the immunization is contrary to the individual's health as documented by a licensed health care professional.

# Immunization Waiver Requests

- All formal immunization waiver requests should be submitted on your agency letterhead, signed and dated by your agency approving authority or designee to <u>opm.leadership@dhs.ga.gov</u>
- The waiver should list the family name, health of all household members, impacted foster youth health if applicable, how long the family has fostered and the family's compliance status with the agency if applicable.
- Barrier to obtaining the caregiver immunization, date of last immunization if applicable for all household members.
- Supplemental Verification: Concurrences from impacted youth county leadership team, medical documentation if applicable from the impacted youth's physician with regards to youth remaining in the home of an unvaccinated caregiver/s and if applicable medical documentation from the caregiver's physician.

# Re-Evaluation Policy 14.13 Reminder

- Initiate a comprehensive re-evaluation of the household at least 90 calendar days prior to the expiration date.
- The annual re-evaluation must be completed prior to the expiration of the current foster home approval period.
  - i. No home shall have more than 12 months of approval (e.g., the re-evaluation for a foster home approved 01/10/2019 is due by 12/31/2019).
  - ii. If a re-evaluation is completed within 30 calendar days of the due date, then the approval term (starting month to ending month -e.g., 01/1/2019-12/31/2019) and re-evaluation date will remain the same.
  - iii. If the re-evaluation is completed more than 30 calendar days early or late, then the approval term and re-evaluation date must change.

# Approval Letter Content

• Approval Letter Date Name and Address of the Caregiver • Approved Placement Age Range • Approved Placement Capacity Approved Placement Gender Approval Terms Begin and End Date • Agency Case Support Working Name, Contact and **Urgent or After-Hours Contact Information** Agency approver/designee signature

Re-Evaluation Approval Terms Reminder

Month of Approval	Re-Evaluation Expires
January 1 <sup>st</sup>	December 31 <sup>st</sup>
February 1 <sup>st</sup>	January 31 <sup>st</sup>
March 1 <sup>st</sup>	February 28 <sup>th</sup>
April 1 <sup>st</sup>	March 31 <sup>st</sup>
May 1 <sup>st</sup>	April 30 <sup>th</sup>
June 1st	May 31 <sup>st</sup>
July 1st	June 30 <sup>th</sup>
August 1st	July 31 <sup>st</sup>
September 1st	August 31 <sup>st</sup>
October 1st	September 30 <sup>th</sup>
November 1st	October 31 <sup>st</sup>
December 1st	November 30 <sup>th</sup>

Test Your Knowledge

1. If Mr. and Mrs. Smith's initial approval terms are 2/15/2021-01/31/2022. When should the Smith's assessor begin gathering their re-evaluation information?

#### 90 Days Prior to Jan.31, 2022

2.Assuming the Smith's re-evaluation was completed timely, what approval terms should be placed on the Smith's approval letter?

#### 02/01/2022-01/31/2023

3. Can timely re-evaluation approval terms be 05/31/2022 - 05/30/2023? No: 05/1/2022-04/30/2023

4. Can timely re-evaluation approval terms be 01/19/2021 – 1/18/2022? No: 01/1/2021-12/31/2021

# CY2020 Approved Caregiver Continued Parent Development Training Data

- 4,339 Caregivers requiring training
- 1,010 Caregivers were exempt due to a prorated number of training hours required during first year of approval
- 2,527 Caregivers met minimum training requirement
- 802 Caregivers did not meet minimum training requirement
- Policy 14.9 requires that each caregiver obtain a minimum of 15 hours of purposeful Continued Parent Development training per calendar year.

Newly approved families are required to begin CPD within 60 days of their approval date. Based upon the month of approval, a prorated number of hours are required. As families are approved throughout the year, the following prorated chart applies:

Approval Date	Start of Training (60 days from Approval Date)	Hours Due by December 31 <sup>st</sup>					
January	March	15 hours					
February	April	15 hours					
March	Мау	15 hours					
April	June	9 hours					
Мау	July	9 hours					
June	August	9 hours					
July	September	6 hours					
August	October	6 hours					
September	November	3 hours					
October	December	3 hours					
November	January	15 hours *					
December	February	15 hours *					

\* By December 31<sup>st</sup> of the following year of approval

Policy 14.9 Continued Parent Development (CPD)





### We will now take a 30-minute break.

# INITIAL ASSESSMENT

#### **HISTORY SECTION**



# Initial: White Family

#### History Section

• Anise White was born August 1, 1996 in Savannah GA to her parents John and Alice White. Ms. White reports that she had a "normal" childhood. She reports that she was an only child and bashfully reports that she was very spoiled! Ms. White attended White Bluff Elementary School and reports having a lot of friends that she enjoyed playing with. Her favorite childhood memory from her elementary school days was going fishing with her father. Ms. White states that this was one of her favorite activities to share with her father. She stated that her dad was super patient with her in teaching her how to fish. Ms. White states that she attended Coastal Middle School and was a cheerleader. Ms. White reports that her parents attended every basketball game and football game that she cheered at. Ms. White reports that her childhood/preteen relationship with her mother was close. She was able to share everything with her mother. Ms. White reports that she was a daddy's girl for as long as she can remember. She states that her mother would jokingly say that she could get away with anything when it came to her dad.

### Initial: White Family (con't)

**History Section** 

Ms. White reports that she had a close relationship with her dad in her childhood/preteen years. She reports that she and her father would watch football together, they would cook together, and that they play board games often. Ms. White reports that the close relationship she shared with her father continued all through her high school and college years. Ms. White reports that she heavily relied on the guidance that her father provided for her to be a successful adult.

Ms. White report that she lost her father six months ago. She reports that the death was unexpected for her and her mother. She states that her father died in a car accident when he was hit head on by a drunk driver. She states that she continues to have a close, loving relationship with her mother. Ms. White was choked up while sharing her father's death.

### PSI: White Family

#### SAFE Psychosocial Inventory

Applicant(s) \_\_\_\_ The White Family

#### Evaluator Mary-Beth Bray

Person #1 Anise White

Person #2\_Lexington White

Interview with	Location	Date
Lexington White/Anise White	home	9/1/2021
Lexington White/Anise White	home	9/3/2021
Lexington White/Anise White	Home	9/17/2021

	Person #1				Person #2								
Α	History	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	Mit. Rating	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	Mit. Rating
A-1	Childhood Family Adaptability	2	2	2									
A-2	Childhood Family Cohesion	2	2	2									
A-3	Childhood History of Deprivation/Trauma	2	2	2									
A-4	Childhood History of Victimization	2	2	2									
A-5	Adult History of Victimization/Trauma	2	2	2									
A-6	History of Child Abuse/Neglect	2	2	2									
A-7	History of Alcohol/Drug Use	2	2	2									
A-8	History of Crime/Allegations/Violence	2	2	2									
A-9	Psychiatric History	2	2	2									
A-10	Occupational History	2	2	2									
A-11	Marriage/Partner History	2	2	2									

# What are your thoughts?

• What edits would you add for the history section?



### OPM notes

- Applicant reports that she lost her father unexpectedly and based on what's written in the narrative, she had a close relationship with him. How did the applicant cope with this death? Did she attend any type of counseling? Does she still have difficulty with coping with her father being gone? Is there anyone that can corroborate how she's coped with the death? Please expound on this in the narrative.
- PSI rating of 2 is incorrect for this section. Please refer to SAFE guidelines when assigning the ratings.

- If the Final SAFE Desk Guide Rating is a 3, 4, or 5 provide a narrative that includes the following:
- I. What issue, behavior or event warranted the SAFE Desk Guide Rating of 3, 4 or 5? State what the issue, behavior or event is/was.
- II. Describe the societal, personal, cultural and/or family dynamic that contributed to or set the stage for the issue, behavior or event.
- III. Describe the frequency and severity or intensity of the issue, behavior or event.
- IV. Describe how the issue, behavior, or event influenced the Applicant's ability to function.

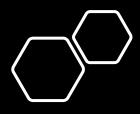
### SAFE Ratings Over a 2

### Mitigation

- REMEMBER: All mitigation must include supporting evidence or documentation from outside sources – facts, observations, analyses, and/or examples.
- Sustaining: If an issue, behavior, or event is not resolved and you are sustaining the SAFE Desk Guide Rating, please indicate how it affects the Applicant's current functioning, ability to parent, and how it would or does affect children in the home.
- Reducing: If an issue, behavior, or event is partially resolved and you are reducing the SAFE Desk Guide Rating, please provide evidence that indicates how the issue, behavior, or event was reduced, how it would or does affect current functioning, ability to parent, and how it would or does affect children in the home.
- Erasing: If you believe that an issue, behavior, or event no longer affects the Applicant and you are erasing the SAFE Desk Guide Rating, please provide evidence to support your assessment that the issue, behavior, or event no longer affects the Applicant's current functioning or ability to parent.

## Initial (Corrections): White Family

Anise White was born August 1, 1996 in Savannah GA to her parents John and Alice Walsh. Ms. White reports that she had a "normal" childhood. She reports that she was an only child and bashfully reports that she was very spoiled! Ms. White attended White Bluff Elementary School and reports having a lot of friends that she enjoyed playing with. Her favorite childhood memory from her elementary school days was going fishing with her father. Ms. White states that this was one of her favorite activities to share with her father. She stated that her dad was super patient with her in teaching her how to fish. Ms. White states that she attended Coastal Middle School and was a cheerleader. Ms. White reports that her parents attended every basketball game and football game that she cheered at. Ms. White reports that her childhood/preteen relationship with her mother was close. She was able to share everything with her mother. Ms. White reports that she was a daddy's girl for as long as she can remember. She states that her mother would jokingly say that she could get away with anything when it came to her dad.



## Initial (Corrections): White Family

 Ms. White reports that she had a close relationship with her dad in her childhood/preteen years. She reports that she and her father would watch football together, they would cook together, and that they play board games often. Ms. White reports that the close relationship she shared with her father continued all through her high school and college years. Ms. White reports that she heavily relied on the guidance that her father provided for her to be a successful adult.

## Initial (Corrections): White Family

Ms. White report that she lost her father six months ago. She reports ٠ that the death was unexpected for her and her mother. She states that her father died in a car accident when he was hit head on by a drunk driver. Ms. White noted that her father died instantly, and she was unable to say goodbye. She explained that when she initially heard of the loss, she was in shock and refused to believe that it was him. For days after the funeral, she could not find the strength to get out of bed and spent most of the days weeping. Her husband and her mother were there for her daily, praying for and encouraging her to attend grief counseling. Mr. White noted in his interview, that the loss was significant for his wife and at first, she appeared to be depressed as she would not leave the couple's bedroom which meant that he took on most of the household chores during that time. He explained he was able to hold down the "fort" while his wife grieved. Ms. White explained that she eventually went to counseling where she learned that grief is normal after losing a loved one. She and the therapist developed coping strategies for dealing with the everyday after experiencing the loss which Ms. White explained were helpful as now when she misses her father, she thinks of a good memory shared together. A letter submitted from the therapist, Sally Applewhite , who Ms. White saw weekly for 12 weeks after her father's death, noted that she made tremendous progress during her time with them and no further treatment or medication was needed at this time.

Mr. White noted that he does not believe the loss currently impairs his wife's ability to function as she is back to her "usual" cheerful self and in moments of sadness she relies on her coping skills and prays about it. Ms. White's mother, Alice Walsh who was interviewed, noted that though the loss was hard for the entire family, they have been getting together once a month on Sundays' for family dinner to keep her husband's memory alive. She believes this has been therapeutic for the whole family as they are able to spend time together and laugh and talk about Mr. Walsh. Ms. White believes that the loss of her father does not currently impair her ability to provide love and care to a foster youth and explained she believes she would be able to help them through loss after experiencing it herself.

## Initial (Corrections): White Family



## PSI (Corrections): White Family

#### SAFE Psychosocial Inventory

Applicant(s) \_\_\_\_ The White Family

Evaluator Mary-Beth Bray

Person #1 Anise White

Person #2\_Lexington White

Interview with	Location	Date
Lexington White/Anise White	home	9/1/2021
Lexington White/Anise White	home	9/3/2021
Lexington White/Anise White	Home	9/17/2021

Α	History		Person #1					Person #2					
		<b>1</b> <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	Mit. Rating	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	Mit. Rating
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A-6	History of Child Abuse/Neglect	2	2	2									
A-7	History of Alcohol/Drug Use	2	2	2									
A-8	History of Crime/Allegations/Violence	2	2	2									
A-9	Psychiatric History	2	3	3			2						
A-10	Occupational History	2	2	2									
A-11	Marriage/Partner History	2	2	2									





### We will now take a 15-minute break.

## Re-Evaluation Policy 14-13:

 Gather basic data to determine present household status, including significant information on the current household, health, employment, and financial status. Require proof of current motor vehicle license and insurance. Include a verification statement that the documentation was reviewed and valid.



### SAFE Personal Characteristics:

• The premise of this section is that Applicants who meet the SAFE Desk Guide criteria with a rating of 1 or 2 for each factor possess the strengths needed to meet the challenges of parenting a special needs child. Such individuals would be both reliable and good communicators. They would also have strong problem-solving abilities and the capacity for close enduring personal relationships. Good health and physical stamina are also important. Positive self-esteem and the ability to accept those with different worldviews are examined in this section. Also considered are: each Applicant's coping skills and impulse control; the extent to which the Applicant's mood is consistently positive, relaxed and comfortable and that anger is managed in a healthy manner; and finally, whether there is a demonstration of good judgment and the capacity to adapt to others.

# Re-Evaluation Example 1: Personal Characteristics

### **SCENARIO**

#### • Personal Characteristics

#### • Example 1

• The caregiver is a 52-year-old Caucasian female, who describes herself as loving, honest, forthright, and loves kids. The caregiver appeared to be friendly and welcoming The caregivers last medical exam was June 25, 2017. She was diagnosed with asthma, diabetes, high blood pressure and depression. She takes prescribed medication for all her diagnoses. The medical evaluation determined the caregiver to be suitable to foster. The caregiver appears to be able to foster children in her home with no concerns as to any physical or mental health limitation currently.

#### **PSI UPDATE**

В.	PERSONAL CHARACTERISTICS	A	В	No Change	A	В	No Change
B-1	Communication	2	2				
B-2	Commitment/Responsibility	2	2				
B-3	Problem Solving	2	2				
B-4	Interpersonal Relations	2	2				
B-5	Health/Physical Stamina	4	2				
B-6	Self-Esteem	2	2				
B-7	Acceptance of Differences	2	2				
B-8	Coping Skills	2	2				
B-9	Impulse Control	2	2				
B-10	Mood	2	2				
B-11	Anger Management/Resolution	2	2				
B-12	Judgement	2	2				
B-13	Adaptability	2	2				

Consortium for Children, SAFE Psychosocial Inventory Update-US, Copyright 2021



## **OPM** Notes

- Assessor doesn't assess the caregiver's medical concerns and/or provide an update on medical history (asthma, diabetes, high blood pressure and depression).
- Assessor doesn't assess how the caregiver manages her health and how it may/may not impact her ability to continue fostering.
- There is a final mitigation of a 2. However, assessor doesn't provide enough evidence on why the rating of 2 is sufficient.

### Re-Evaluation Policy 14.1

- Safety and Quality Standards 14.1
- Safety Compliance Checklist
- Animal Safety
- Water Safety
- Gun Safety
- Medication Safety
- Motor vehicle safety



# Re-Evaluation Example 1: Physical and Social Environment

• The Safety check list have been reviewed during the reevaluation period. There were no concerns identified in the home. The home appeared to be clean, and no safety hazards found in the home. There are smoke detectors/carbon monoxide detectors located in the home. The fire extinguisher is in the kitchen. All hazardous materials are inaccessible to children. Cleaning supplies, and toxic chemicals are stored in the laundry room on the top shelf. The medications were observed to kept in the foster parent bathroom. The alcohol is store on the top shelf of the refrigerator. The caregiver has an inground pool. The children do not have access to the pool. The caregiver understand that the children must be supervised at all times around the pool. The caregiver has one gun, a Smith and Wesson bodyguard, that she keeps in her nightstand. The ammunition is locked in her closet. The caregiver has a 5-year-old medium size dog that is up to date on his vaccination. The dog appears to have a lot of energy. Nothing has changed since the last review.



## **OPM** Notes

- Assessor doesn't go into detail about the safety of the home
- Assessor doesn't input the location and functional status of the smoke and carbon monoxide detectors.
- 911 calls aren't documented if they are reported or not
- Safety of the weapons doesn't include if they are double locked.
- Water safety needs to be assessed further
- Observation of the pet in the home (temperament around children and adults)
- Alcohol stored on top of refrigerator (best practice)

# Best Practice for Interviewing Youth in the home...

- <u>Things to consider when interviewing foster youth in the home</u>
- Visit each child privately as well as in the presence of the caregiver
- Engage in private face-to-face conversation
- Assess and ask questions around child safety (discipline in the home)
- What is the child's/household routine (bed-time, dinner, lunch weekends)
- Are they involved in any extra curricular activities? Do they enjoy it? (sports, music, art club, church)
- How is their interaction with other household members including the foster families extended family members?
- Describe the child's adjustment to the placement based on observations.
- Assess the child's physical appearance (if there has been any changes, weight gain, hair loss)
- Does the child feel angry, sad, happy, scared in the placement setting? If so, what things cause these emotions?
- Does the child feel as if they have anyone they can talk to when they are feeling down or if something is bothering them?
- Who else provides supervision for them?
- Any changes to the child's personality or emotional state?

Re-Evaluation Example 1: Children in Home Will Smith is a 17-year-old. Will was placed in the caregivers' home in 2019. Will is thriving very well in his placement. Assessors asked Will was he safe, Will stated yes. Assessor asked Will does he have enough to eat, Will stated yes. Assessor asked Will if he has a good relationship with the caregivers, and he responded yes. Assessor did not observe any bruises or unusual marks on Will. Will was dressed appropriate for the season. Will stated that when he gets in trouble his TV is taken. No other concerns reported.

### **OPM** Notes



- Assessor asked closed ended questions.
- Assessor doesn't go into detail regarding the youth participating in ILP programs or future permanency goals (school, military, career..)
- Assessor doesn't ask about Will's interaction between all household members (extended family)

### Scenario Examples Revised...



CPA Partnership Meeting 9-28-21 Scenario Document.pdf



## Addendums

DFCS Foster Care Policy 14.14

All written addendums should be on the agency's letterhead

All written addendums should have author and/or director/designee signatures/dates.

Complete a written addendum to the Family Evaluation within 30 calendar days of significant changes within a family

- Change of Address
- Martial Status
- HH composition(births, deaths, move-ins/outs
- Employment status
- Capacity Increase/decrease
- Placement Preference changes
- New Safety requirements(pool firearm, pet)
- HH member turns 18



## Change in Address

The change in address is like assessing homes in the initial phase.

- Directions to the home
- Family operations
- Home Environment (neighborhood and community)
- Safety issues (pools and/or community pools, firearm location, pets)
- Sleeping arrangements (Types of beds, storage space, who sleeps where?)
- Any changes in income with moving to new home
- Upload Safety Compliance Home Inspection Checklist (this can be used to summarize the safety of the home)

## Change in Marital Status or Relational Issues

- Household demographics
- Caregiver's description and history
- Safety screening results
- Motivation and interviewing; views on fostering (Expectation of when they will be enrolled and/or complete IMPACT)
- CPR/First Aid
- Previous marital or significant other relationships
- History of child abuse/neglect
- History of drug/alcohol use
- Medical Evaluation (TB, drug screen, Flu and Pertussis (if applicable))
- Family interaction
- Caregiver Capacity
- Income and Financial status



## Member move-In

When an adult household member moves in, the assessment should include;

- Demographic of the household member (Name, Age, Race, DOB,)
- Reason for the move-in
- Sleeping arrangements
- Their role as it relates to fostering and/or parenting (if so, Form 29 and Confidentiality form is needed)
- Results of safety screens (Adam Walsh is needed if HH member has moved from out of state less than 5 years)
- Medical Evaluation (TB included)
- Financial impact
- Household member MUST be interviewed
- \*Best Practice to complete a SAFE Q2 Questionnaire\*
- Birth of household member should include Child(ren) name, DOB, and immunizations (if applicable)

### Member move-out

When a household member moves out, the assessment should include;

Reason for move-out

Change in sleeping arrangements

**Financial impact** 

## Death and of Household Member

- When a household member is deceased a thorough assessment should be done demonstrating the impact of the household members
- The date of death and cause is needed
- Indicate if the home should be placed on hold
- How does the death impact the children in the home and if any support is needed (grief support/counseling).
- Did this impact the financial status of the family?

### Change in Employment/Financial Status

Reason for change

Updated Financial Form (Form 44)

Assess if the caregiver can continue to foster with the change in income and/or employment

Changes in schedule and/or routine with new employment



# Capacity Change

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Assessments for Capacity change should include;

- Reason for Change
  - Why are we increasing this capacity for these caregivers?
- Household Members
  - including the new foster child's name if available
- Sleeping arrangements
  - who sleeps where? And what type of bed?
- Program designation for all foster children
- Caregiver Protective Capacity
  - How will they meet the child's vulnerabilities? How will the increase impact the caregiver's ability to care for all the children in the home? What are their strengths? What supports do they have to maintain the stability of the household? What is the agency doing to assist with meeting the needs of the child(ren)?
- Transportation
  - What type of vehicle does the caregiver have? Will seating accommodate the household?
- Signatures and dates on the assessment
- Upload approved capacity waiver (if applicable)

**NOTE:** Capacity addendum MUST be approved prior to making the placements.

## Specialty Program Designations

- Children with a Specialty program designation have intensive needs and require significant levels of care and supervision.
- Therefore, children who have a Specialty Watchful Oversight program designation --Specialty Base (SBWO), Specialty Maximum (SMWO) and Specialty Medically Fragile (SMFWO) must be the only placement in the foster home. This includes respite for the Specialty designation child or another child coming into the Specialty home for respite.
- If a home is considered to provide care for more than one youth with a specialty program designation, the foster home must meet the following requirements:
  - The foster home must be a two-parent foster home in which at least one of the foster parents is a stay- at home parent.
  - At least one of the foster parents must have a clinical or nursing background or have professional experience in caring for children and youth with specialty specified medical diagnoses and/or disabilities.
  - Any exceptions to this standard (whether for respite or placement) must be approved in advance of the placement by the Office of Provider Management. Waiver requests should be sent to www.gascore.com and include a complete explanation of the supporting circumstances and concurrence from all children's DFCS Case Manager(s)

## Placement Preferences

- Reason for Change
- If caregiver desire to change age range to care for children under 2 (Influenza and Pertussis must be added in SCORE)
- If caring for medically fragile, Influenza is needed
- Sleeping arrangements
- Upload updated Placement Preference Form(New form effective 08/01)
- Signature and Date on assessment

## Safety Requirements (Policy 14.1 SQS)

- New pet (name, breed type, updated inoculation, and temperament around children and adults)
- Swimming Pools (Water Safety Assessment and the caregivers plan for supervision, Basic water rescue training, and plans to enroll children over 3 in swimming lessons)
- Weapons (What type of weapon? Where is the weapon kept? Where Is ammunition kept?

# Household Member turning 18

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When household members turn 18 the following is needed;

- Online Safety Screens (DOC, P&P, and SOR)
- GA CPS Screens
- Criminal Background Checks (GCIC/NCIC)
   \*This is the OIG letter\*
- TB shot
- All screening results must be uploaded into GA SCORE prior to approval

## Scenario #1

• Mr. Elliot Jones passed away on June 4, 2021. Please remove him from SCORE.



## Scenario #2

 Mr. and Mrs. Bergin want to increase the capacity of their home from 1 to 6. The Bergins were approved in August 2021 and have not had any placements. They have the bed space and are willing to open their home to more children. The vehicles are large enough to fit all the children. The family has experience as they raised 3 children of their own.



## Questions





OPM RD TEAM would love your feedback and suggestions. Please send information to <u>opm.leadership@dhs.ga.gov</u>

