

	<b>INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE POLICY</b>	
	<b>Chapter 12:</b> Foster Family Home Licensing	<b>Effective Date:</b> September 1, 2019
	<b>Section 22:</b> Licensing File Requirements	<b>Version:</b> 3

**STATEMENTS OF PURPOSE**

The Indiana Department of Child Services (DCS) local office or Licensed Child Placing Agency (LCPA) will be responsible for obtaining and maintaining forms and other materials used to document its decision-making process for a foster family home to become licensed and maintain licensure.

Licensing files are the property of DCS. The Placement Support and Compliance Division will conduct random reviews and/or audits of DCS local office and LCPA licensing files.

Code Reference

1. [IC 31-27-2-5: Monitoring of licensed entities](#)
2. [IC 31-27-4-19: Records of monitoring activities and inspections](#)
3. [IC 31-27-4-20: Cooperation by licensees](#)

**PROCEDURE**

The licensing worker<sup>1</sup> will:

1. Use forms, [Initial Licensure Checklist for Foster Family Homes \(SF53153\)](#), [Annual Review Checklist for Foster Family Homes \(SF53154\)](#), and [Re-Licensure Checklist for Foster Family Homes \(SF53155\)](#), to aid in gathering all the necessary documentation for the relevant licensure action (i.e., initial licensure, annual review, or re-licensure). These forms may also be used for supervisory review;
2. Log dates of completed forms and other materials in the appropriate checklists in the case management system; and
3. Ensure the forms and other materials listed below are in the licensing file, as appropriate, for foster family homes to be licensed and to maintain licensure:
  - a. Completed [Application for Foster Family Home License \(SF10100\)](#),
  - b. [Resource Family Home Physical Environment Checklist \(SF53186\)](#) completed at initial licensure, annual review, and re-licensure,
  - c. [Water Agreement \(SF54612\)](#) and documentation of results or statement of city water completed at initial licensure, annual review, and re-licensure,
  - d. Original state-approved foster family home licensing study,

**Note:** If the original home study was not the [Structured Analysis Family Evaluation \(SAFE\)](#), the signed [Resource Family Preparation Assessment Cover Page \(SF52795\)](#) should also be included in the licensing file.

<sup>1</sup> The licensing worker refers to the DCS Regional Foster Care Specialist (RFCS) or the Licensed Child Placing Agency worker

- e. Original signed [Resource Parent Role Acknowledgment \(SF54642\)](#) and each subsequent signed agreement at initial licensure, annual review, and re-licensure,
- f. Completed [SAFE Annual Update](#),
- g. Completed [Licensing Staff Inquiry Regarding Foster Family Home \(SF53214\)](#) form regarding each child placed in the foster family home at the time of the child's departure from the home or at annual review or re-licensure, whichever comes first,
- h. Verification the foster parent has met the pre-service training requirement (copy of training records) completed at initial licensure, annual review, and re-licensure,
- i. Completed [Pre-Service / In-Service Evaluation of Trainee \(SF52760\)](#) if applicable,

**Note:** The [Pre-Service / In-Service Evaluation of Trainee \(SF52760\)](#) will be completed by the Resource and Adoptive Parent Training (RAPT) Trainer if there are concerns or issues that arise during RAPT training.

- j. Verification of the required annual in-service training hours (copy of training records),
- k. Verification of Cardiopulmonary Resuscitation (CPR), first aid, and universal precautions training (copy of training records) at initial licensure, annual review, and re-licensure to ensure certification of the licensee remains current,
- l. Completed [Application for Criminal History Background Check \(SF53259\)](#) at initial licensure, annual, and re-licensure,
- m. Results of background checks at initial licensure, annual review, and re-licensure, and the results of criminal history checks at annual review (see separate policy, [13.10 Evaluating Background Checks for Foster Family Licensing](#)),
- n. Copy of supporting documentation for any waiver, variance, or exception, if applicable (see separate policies, [12.12 Foster Family Home Capacity](#), [12.19 Waivers](#), [12.20 Variances](#)),
- o. A copy of the [Medical Report for Caregivers \(SF45145\)](#) for each applicant at initial licensure and re-licensure,
- p. A copy of the [Medical Report for Household Members \(SF45144\)](#) for each household resident at initial licensure and re-licensure,
- q. Four (4) [Request for Personal Reference Statement for Foster Family Home License Applicants \(SF53203\)](#),
- r. Completed questionnaires (assessment tools) and inventory (psychosocial) from the SAFE (process) home study should be documented in case management system and in the hard copy file,
- s. Completed [Financial Verification for Foster Family Homes \(SF 55734\)](#) completed at initial licensure, annual review, and re-licensure (see separate policy, [12.31 Financial Verification for Licensure](#)),
- t. Completed [5.B Tool- Family Network Diagram Instruction Guide](#) completed at initial licensure, annual review, and re-licensure,
- u. Completed [Compatibility Inventory](#),
- v. Completed [Child Care Plan \(SF54608\)](#) completed at initial licensure, annual review, and re-licensure,
- w. Verification of the applicant or licensee's birth (birth certificates or other forms of verification),
- x. Verification of the applicant or licensee's marriage and divorce (if applicable),
- y. Documentation (letters, narratives, forms) related to the closure of a resource home, whether it is the result of a voluntary withdrawal or an action of the DCS local office to revoke the license, if applicable,
- z. Completed [Initial Licensure Checklist for Foster Family Homes \(SF53153\)](#),
- aa. Completed [Annual Review Checklist for Foster Family Homes \(SF53154\)](#),

- bb. Completed [Re-Licensure Checklist for Foster Family Homes \(SF53155\)](#),
- cc. [Foster Parent Safety Agreement Regarding Firearms and Other Weapons \(SF 56320\)](#) completed at initial licensure, annual review, and re-licensure, if applicable,
- dd. Completed [Record of Child Placement \(SF 54610\)](#), and
- ee. Documentation of [Corrective Action Plan \(SF 53171\)](#), if applicable.

The DCS Central Office Licensing Unit will conduct a licensing file Quality Assurance Review (QAR) process for DCS local offices and LCPAs. Random samplings of hard copy licensing files will be reviewed. The process will be as follows:

1. LCPA and DCS local office's will receive a listing of licensing files that have been selected for review. Licensing staff will forward copies (NOT ORIGINALS) of the complete file to the Central Office Licensing Unit. Documentation should be organized as requested. The complete licensing case files are due in Central Office two (2) weeks after the QAR notice is received by the DCS Local Office or LCPA. The licensing worker will provide a copy of the requested information to the Central Office Licensing Unit via mail or scanned into email;
2. Upon completion of the review, a feedback notification will be forwarded to the licensing agency. The licensing worker will be expected to correct any errors and provide missing documentation within a two (2) week time period. Anything received by the Central Office Licensing Unit after the two (2) week period will not be reviewed as part of the QAR and will be noted as an error or omission;
3. The Central Office Licensing Unit may request additional licensing case files to be reviewed when errors or omissions appear to be consistent throughout the initial sample files; and
4. A summary outlining the general findings will be sent to each LCPA and DCS local office within 60 days of the QAR completion.

<b>PRACTICE GUIDANCE</b>
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N/A

<b>FORMS AND TOOLS</b>
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1. [Application for Foster Family Home License \(SF10100\)](#)
2. [Resource Family Home Physical Environment Checklist \(SF53186\)](#)
3. [Water Agreement \(SF54612\)](#)
4. [Resource Parent Role Acknowledgment \(SF54642\)](#)
5. [Licensing Staff Inquiry Regarding Foster Family Home \(SF53214\)](#)
6. [Application for Criminal History Background Check \(SF53259\)](#)
7. [Request for a Child Protection Service \(CPS\) History Check \(SF 52802\)](#) on all household members
8. [Medical Report for Caregivers \(SF45145\)](#)
9. [Medical Report for Household Members \(SF45144\)](#)
10. [Request for Personal Reference Statement for Foster Family Home License Applicants \(SF53203\)](#)
11. [Financial Verification for Foster Family Homes \(SF 55734\)](#)
12. [5.B Tool- Family Network Diagram Instruction Guide](#)
13. [Child Behavioral / Health Challenges \(SF53199\)](#)
14. [Child Care Plan \(SF54608\)](#)
15. [Initial Licensure Checklist for Foster Family Homes \(SF53153\)](#)

16. [Annual Review Checklist for Foster Family Homes \(SF53154\)](#)
17. [Re-Licensure Checklist for Foster Family Homes \(SF53155\)](#)
18. [Structured Analysis Family Evaluation \(SAFE\)](#)- available at <http://www.safehomestudy.org/Home.aspx>
19. [Compatibility Inventory](#)- available at <http://www.safehomestudy.org/Home.aspx>
20. [Foster Parent Safety Agreement Regarding Firearms and Other Weapons \(SF 56320\)](#)
21. [Record of Child Placement \(SF 54610\)](#)
22. [Corrective Action Plan \(SF 53171\)](#)

## RELATED INFORMATION

### **Additional Information**

Due to the accreditation standards of the Council on Accreditation (COA) (see <http://coanet.org/standards/standards-updates/> for further information), the licensing agency may require additional documentation. This information may be added in the comments section of state forms or documented in the licensing file. State forms may not be altered.

### **DCS Central Office Licensing Unit Address**

DCS Central Office Licensing Unit  
Indiana Department of Child Services, Central Office  
302 West Washington Street, E306  
Indianapolis, IN 46204