

Home Study for the _____ family

Family address:

Notes:

Applicant Information

Provider Name:		Spouse Name:	
Date of Birth:		Date of Birth:	
Gender:		Gender:	
Religion:		Religion:	
Occupation:		Occupation:	
Employer:		Employer:	
Language(s):		Language(s):	
Education:		Education:	
Ethnicity:		Ethnicity:	
Cell Phone:		Cell Phone:	
Home Phone:		Marriage Date:	
Work Phone:		Work Phone:	
Email Address:		Email Address:	

Members of Household

Name	Date of Birth	Age	Relationship	Adopted (Y/N)

Pursuant to Federal Adam Walsh Act and Utah Code Sections 26B-2-120, 26B-2-121, and 26B-2-122, the required criminal record, Child Abuse Index checks, and vulnerable adult abuse and neglect checks were completed for

Indicate names of any other individuals who were screened:

Date the foster address was checked on Utah sex offender registry:



Pre-service training was completed on:

CPR/First Aid training date(s):

Motivation, Understanding and Expectations:

Child Matching:

Community and Support Systems:



Biographical Information of Each Prospective Caregiver: written description of in home interviews with applicants, their children and all household members such as roommates



Marriage:

Family:

Lifestyle:



Parenting:

Financial Summary:

References/Inquiries:

Home/Neighborhood (see attached Safety Inspection Checklist)

SUMMARY OF FINDINGS/RECOMMENDATIONS:



Please do not use this study for the purpose of adoption that is not directly involving a public welfare system.

COMPLETED BY:

Name:

Date:



Foster Care Home Inspection Checklist

Family address:

Notes:

Date of visit:

- ☐ Initial
- ☐ Renewal
- ☐ Other:

Home Safety Requirements: R501-12

- ☐ Address visible/home accessible
- ☐ Parents don't provide child care (*see statutory definition on licensure reference guide*) or DHHS licensed services in home
- ☐ Interior/exterior and contents maintained/clean and safe condition R501-12-7(3)(e)
- ☐ Hazards abated R501-12-7(1)
- ☐ Swimming pools secured to prevent unsupervised access
 - ☐ N/A
- ☐ Parents follow all laws regarding care and number of pets
 - ☐ Discussed with provider?
 - ☐ N/A
- ☐ No smoking in presence of foster children
 - ☐ No smokers in this home
- ☐ 2 exits on each level of home adequately sized for emergency personnel with egress to ground level (safety ladders, stairway, etc) or automatic fire suppression system
- ☐ Safety devices appropriate to age (outlet covers, safety gates, fireplace gates, etc)
 - ☐ Discussed with provider?
- ☐ Protective gear is accessible/utilized (helmets, life vests, safety certification training, body padding)
 - ☐ Discussed with provider?
- ☐ Working appliances/plumbing
- ☐ Bathrooms have locking capability R501-12-7(1)(f)
- ☐ Working smoke detector on each level R501-12-7(1)(c)
- ☐ Carbon monoxide detector on each level R501-12-7(1)(c)
- ☐ Extinguisher in home (minimum rating 2-A-10BC) R501-12-7(1)(d)



- ☐ 911 recognizable phone on site
- ☐ Emergency numbers posted visible to children (including address of the home)
- ☐ Fully supplied first aid kit in home (medications removed)
- ☐ Alcoholic beverages are monitored and inaccessible to children at all times
 - ☐ N/A
- ☐ Hazardous chemicals are locked in original or manufacturer complaint packaging
R501-12-8(10)
 - ☐ Where/how stored:
- ☐ Medications (including prescriptions, over-the-counter, vitamins, and supplements) are locked and in original packaging (can not be split into daily dose dividers)
 - ☐ Where/how stored:
- ☐ Flammable substances (gas, kerosene) are locked in ventilated areas separate from living areas
 - ☐ Where/how stored:

Bedrooms: R501-12-7(2)

- ☐ Number of available bedrooms for fostering:
 - ☐ Minimum 40 square feet per occupant
 - ☐ Measurements/Capacity:
 - ☐ Not shared by opposite genders (over age 2)
 - ☐ No foster children over age 2 in parents' room
 - ☐ Foster children do not share bedrooms with adults
 - ☐ Each child has an individual bed/crib and mattress and linens that meet their needs
 - ☐ If foster bedroom is on the ground floor, it has one screened window that opens to be used to evacuate
 - ☐ N/A
 - ☐ If foster bedroom is not on the ground floor, it has a source of natural lights, and 2 exits, one of which shall exit directly outside of the home in case of evacuation
 - ☐ N/A
 - ☐ Closet and dresser provided
 - ☐ No more than 4 total children in a foster bedroom
 - ☐ No more than 3 foster children in the home (see sibling and respite exceptions)
 - ☐ No more than 2 children under age 2 in the home (including biological, adopted, foster, etc.)
 - ☐ No more than 2 non-ambulatory children in the home (including biological, adopted, foster, etc.)



Firearms: R501-12-8(5), (6) and (7)

- ☐ No firearms in this home **OR**
- ☐ Inaccessible to foster children at all times
- ☐ Unloaded, locked (or rendered inoperable) and ammo locked by a different key/combo elsewhere
- ☐ Stored together with ammo in gun safe (or other commercially manufactured gun storage container) Where/How stored:
- ☐ Parents obtain written permission from caseworker for child's firearm use
 - ☐ N/A

Transportation: R501-12-12

- ☐ Enclosed and registered (no motorcycles or recreational vehicles can be used for transporting foster children)
- ☐ Vehicles have adequate, functional seatbelts
- ☐ Emergency contact info (including agency and caseworker information at minimum) posted in vehicle
- ☐ First Aid kit in each vehicle
- ☐ Age appropriate car/booster seat
 - ☐ N/A

Safety plan initiated?

- ☐ Yes
- ☐ No

If yes, provide details below:

Comments to include hazards observed, restrictions on certificate, items to monitor, etc.:

Overall Recommendation:



1. Type:
2. Capacity:
3. Maximum Capacity for Siblings:
4. Genders:
5. Immunized Foster Children Only?
 - ☐ Yes (if all household members did not provide proof of immunization; make note on license)
 - ☐ No (proof provided for all household members)
6. Ages:

Comments on current capacity/maximum capacity/gender groupings, preferences etc.:

Printed name of person completing inspection:

Signature of person completing inspection

Date:

Note: This checklist is a tool for agency convenience and does not modify R501-12 or represent the rule in its entirety. It represents observations specific to the date above. The Licensee remains responsible in ensuring they are in full compliance with R501-12.



HELPFUL HOME STUDY HINTS

1. KNOW YOUR ROLE

You are the “gateway” for approving families to care for vulnerable children. You need to be able to justify all of your observations and decisions regarding the family’s licensure/certification.

2. KNOW YOUR GOAL

Your home study document will be used by DCFS and the courts to match kids to families, so ask questions you’d want to know if you were DCFS. Determine their capability through family’s experiences, history, and personalities. Be thorough - you are required to create a home study that is in line with Utah Statute.

3. ESTABLISH TRUST

Explain the process transparently, and answer all questions. Always be professional, cordial, non-confrontational, relaxed, and culturally sensitive. Remember that some cultures view eye contact as disrespectful, and others prefer no shoes in the home. Be respectful of the family living environment. Safety inspections can be considered intrusive, so you may want to do this last.

4. DON’T REACT

Let them talk; their reality is what you need to assess. Question respectfully to get more information, but do not belittle or overreact. You need to control how you receive the information that people divulge to you, and how you respond. Pay attention to your body language and nonverbal cues. Be matter-of-fact and do not act shocked at any information you hear, just continue to facilitate the conversation. Many sensitive topics will be addressed, and it’s important to remain neutral. Remember that a sordid history doesn’t mean they should be denied, it can speak to what they’ve been through. How they have resolved their issues, and where they are at now is more of a concern than what has happened in their past. Be sure to address how they resolved the issues they have faced.

5. ASK FOLLOW-UP QUESTIONS FOR CLARIFICATION

Even when there may be a long discussion and it is ‘inconvenient’ for you to have a long home study, ultimately you are gaining information that will help you match them with the best placements.

6. YOU CAN ASK FOR FURTHER ASSESSMENT

If you are uncomfortable with something they’ve discussed (ie: unresolved abuse history, pornography addiction, instability in finances, relationships, employment, residences, untreated mental health concerns, thinking errors, erratic behavior, substance abuse history, domestic violence history, hostility, unfavorable reference letters etc.), then run it by your supervisor (or peers) and determine if a meeting to recommend an outside assessment or evaluation is necessary.



7. REVIEW ALL FORMS AND RULES, AND READ SOME COMPLETED HOME STUDIES

This can help with developing additional questions to ask, and get an understanding of what a comprehensive home study is required to look like, according to Utah Statute.

8. REMEMBER YOUR RESPONSIBILITY

Families you approved will have abused and neglected kids placed with them- are you comfortable with your decision? If there appear to be disqualifying factors, then involve your supervisor and follow the formal process of denying licensure/certification (if determined to be the appropriate action). Be sure to report “just the facts”, and report objectively and professionally. Leave personal opinions and biases out of your document. Remember that you may have to argue your findings in an administrative hearing or other similar setting - are you comfortable with its contents?

9. KNOW THAT YOU CAN DENY/OR RECOMMEND DENIAL FOR PLACEMENTS TO DCFS

You can schedule to be present at the DCFS committee meeting to voice any concerns you have about the family (or communicate with the DCFS RFC once assigned to voice concerns).

