

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE MANUAL	
	Chapter 12: Foster Family Home Licensing	Effective Date: March 1, 2007
	Section 22: Licensing File Requirements	Version: 1

POLICY	OLD POLICY: 609.42
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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 resource family home to become licensed and maintain licensure.

The Central Office Licensing Unit will conduct random reviews of DCS local office and licensed LCPA licensing files.

The Central Office Licensing Unit will conduct field audits of LCPA licensing files.

DCS owns the licensing file and the entire file should be copied when transferring a license.

Code Reference

[IC 31-27-4-20: Cooperation by licensees](#)

PROCEDURE

The licensing worker will:

1. Use Requirement Sheets to aid in gathering all the necessary documentation. These may be used for supervisory review;
2. Log dates of completed forms and other materials in Indiana Child Welfare Information System (ICWIS), where applicable; and
3. Ensure the forms and other materials listed below are in the licensing file, as appropriate, for resource family homes to be licensed and to maintain their license:
 - a. Completed [Application for Foster Family Home License \(SF10100/CW0317\)](#),
 - b. [Foster Family Home Physical Environmental Checklist \(SF53186/CW3417\)](#) completed annually,
 - c. [Instructions for Water Analysis](#) and documentation of results or statement of city water,
 - d. Original approved [Foster/Adoptive Family Home Preparation Assessment Summary](#), including [Cover Page](#) with signatures,
 - e. Original signed [Substitute Care Agreement \(SF47344/CW0015\)](#) and each subsequent signed agreement at licensure and relicensure,
 - f. Completed [Annual Report Regarding Foster Family Home \(SF53187/CW3518\)](#),
 - g. Updated [Foster/Adoptive Family Home Preparation Assessment Summary](#), including [Cover Page](#) with signatures (at every relicensure) incorporating annual reports,
 - h. Completed [Licensing Staff Inquiry Regarding Foster Family Home \(SF53214/CW3519\)](#) form regarding each child placed in the resource home at the

- time of the child's departure from the home or at annual review or relicensure, whichever comes first,
- i. Verification that the resource parent(s) has met the pre-service training requirement (copy of training records),
 - j. Completed [Foster, Adoptive, Kinship Training \(FAKT\) Evaluation of Trainee](#),
 - k. Verification of the required annual in-service training hours (copy of training records),
 - l. Verification of Cardiopulmonary Resuscitation (CPR), first aid, and universal precautions training (copy of training records) at initial and relicensure,
 - m. Completed [Applicant's Statement of Attestation \(SF46151/CW0025\)](#) at initial, annual, and relicensure,
 - n. [Application for Criminal History Background Check](#),
 - o. Results of background checks at initial and relicensure. Results of criminal history checks at annual review. See separate policy, [12.30 Evaluation of Background Checks for Foster Family Home Licensing](#),
 - p. Copy of supporting documentation for the waiver or variance, if applicable. See separate policies, [12.19 Waivers](#) and [12.20 Variances](#),
 - q. A copy of [Medical Report for Primary Caregiver \(SF45145/CW0039\)](#) for each applicant at initial and relicensure,
 - r. A copy of [Medical Report for Household Members \(SF45146/CW0038\)](#) for each household resident at initial and relicensure ,
 - s. Four (4) [Request for Personal Reference Statements for Foster Family Home Applicants \(SF53203/CW3419\)](#),
 - t. Completed [Foster/Adoptive Family Inventory](#),
 - u. Completed [Foster Care/Adoption Information \(SF53184/CW3415\)](#),
 - v. Completed [Paving the Way to a Decision \(SF53185/CW3416\)](#),
 - w. Completed [Family Network Diagram Guide](#),
 - x. Completed [Child Behavioral/Health Challenges Checklist \(SF53199/CW3517\)](#),
 - y. Completed child care plan,
 - z. Verification of applicant(s) or licensee(s) birth (birth certificates or other forms of verification),
 - aa. Verification of applicant(s) or licensee(s) marriage and divorce,
 - bb. Documentation that the [Foster Parent Handbook](#) has been reviewed with prospective resource parents,
 - cc. 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,
 - dd. Completed [Initial Licensure Requirements Sheet for Foster Family Homes \(SF53153/CW2310\)](#),
 - ee. Completed [Annual Review Requirement Sheet for Foster Family Homes \(SF53154/CW2311\)](#), and
 - ff. Completed [Relicensure Requirement Sheet for Foster Family Homes \(SF53155/CW2312\)](#).

DCS will conduct a licensing file Quality Assurance Review (QAR) process for DCS local offices and LCPAs. The Central Office Licensing Unit will review a random sampling of hard copy licensing files licensed each quarter. 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 total file to the Central Office Licensing Unit. Documentation should be organized according to the Licensure Face Sheets. 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. Hard copies of the complete licensing files should be sent via mail to:

Licensing Unit, MS 08, #22
ATTN: Quality Assurance
Department of Child Services
402 W. Washington St., Rm. W364
Indianapolis, IN 46204

2. Upon completion of the review, a feedback notification will be forwarded to 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 that two week (2) period will not be reviewed as part of the QAR and will be noted as an error or omission. The licensing worker will provide the requested information in hard copy to Central Office via mail using the address given above;
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 each LCPA and DCS local office within 60 days of the QAR completion.
- 5.

PRACTICE GUIDANCE

N/A

FORMS AND TOOLS

1. [Application for Foster Family Home License \(SF10100/CW0317\)](#)
2. [Foster Family Home Physical Environmental Checklist \(SF53186/CW3417\)](#)
3. [Instructions for Water Analysis](#)
4. [Foster/Adoptive Family Home Preparation Assessment Summary, including Cover Page with signatures](#)
5. [Substitute Care Agreement \(SF47344/CW0015\)](#)
6. [Annual Report Regarding Foster Family Home \(SF53213/CW3518\)](#)
7. [Licensing Staff Inquiry Regarding Foster Family Home \(SF53214/CW3519\)](#)
8. [Application for Criminal History Background Check](#)
9. [Applicant's Statement of Attestation \(SF 46151/CW 0025\)](#)
10. [Request for Child Protection Service \(CPS\) History Check \(SF 52802/CW2128\)](#), on all household members
11. [Medical Report for Primary Caregiver \(SF 45145/CW 0039\)](#)
12. [Medical Report for Household Members \(SF 45146/ CW0038\)](#)
13. [Request for Personal Reference Statements for Foster Family Home Applicants \(SF53203/CW3419\)](#)
14. [Foster/Adoptive Family Inventory](#)
15. [Foster Care/Adoption Information \(SF53184/CW3415\)](#)
16. [Paving the Way to a Decision \(SF53185/CW3416\)](#)
17. [Family Network Diagram Guide](#)
18. [Child Behavioral/Health Challenges Checklist \(SF53199/CW3517\)](#)
19. [Foster, Adoptive, and Kinship Training \(FAKT\) Evaluation of Trainee](#)

20. [Initial Licensure Requirement Sheet for Foster Family Homes \(SF53153/CW2310\)](#)
21. [Annual Review Requirement Sheet for Foster Family Homes \(SF53154/CW2311\)](#)
22. [Relicensure Requirement Sheet for Foster Family Homes \(SF53155/CW2312\)](#)

RELATED INFORMATION

Due to accreditation standards, the licensing agency may require additional documentation. This information can be added in the comment section of state forms or documented in the licensing file. State forms can not be altered.

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