

DATE 10-1-2018

CHANGE NOTICE

CWS-CN-04-2018

MANUAL: Foster Home Licensing Manual, VII. Standards for Licensing –
Section. 1100, L. Exterior Setting and Safety

CHANGE NO: 04-2018

ATTENTION: Child Welfare Directors, Program Administrators, Supervisors, and
Social Workers, Private Child Placing Agency Directors and
Supervisors

RE: Revision to Foster Home Licensing Manual: **EFFECTIVE DATE:**
November 1, 2018

INTENT:

This policy change is prompted by the reevaluation of the application of Administrative Rule 10A NCAC 70E .1112 EXTERIOR SETTING AND SAFETY regarding Foster Home licensing and water hazards around the home. Given the need for foster parents and interest of families who live in coastal communities and the prevalence of water, the North Carolina Division of Social Services revised the policy in manner to provide Supervising Agencies more discretion in the evaluation of the exterior hazards around the home and the ability of the foster family to provide a safe environment for children placed in the home where a water hazard exists.

The policy is effective November 1, 2018; however, agencies may begin implementation of the new policy and forms effective immediately.

SPECIFIC CHANGES

Changes to the policy include:

- Completion of the Water Hazard Safety Assessment form (DSS-5018) by the Supervising Agency Licensing Worker during every initial licensure process and at every license renewal.
- Completion of the Individual Water Hazard Safety Plan (DSS-5018a) by the foster parent(s) and reviewed with the Social Worker at the initial visit, for every child placed in a home where a water hazard exists.
- A fence around the entire perimeter of the foster home where a water hazard exists on or near the property is no longer required. Clarification is provided regarding Requirements are clarified for water hazards such as ponds, beaches, rivers, lakes, streams, etc. that are on the property, or directly connected to the foster home that can be seen from the foster home at any time of year to be enclosed by a fence at least 48" high or for the home to have a fence at least 48 inches high with a locked gate around the yard.
- Potential water hazards that are not directly connected to the property are now to be assessed using the Water Hazard Safety Assessment Form.

- Guidance is added regarding the requirement for a foster family who installs a temporary or seasonal swimming pool that will remain in place for more than 24 hours, to either enclose the pool with a fence at least 48” high, or limit access to the pool by a removable ladder or a ladder that locks in place.

New Forms and Tools:

- Water Hazard Safety Assessment Form (DSS-5018)
- Individual Water Hazard Safety Plan (DSS-5018a)

INSTRUCTIONS

OBSOLETE	USE
Foster Home Licensing Manual, VII. Standards for Licensing – Section. 1100, L. Exterior Setting and Safety (May 1, 2014)	Foster Home Licensing Manual, VII. Standards for Licensing – Section. 1100, L. Exterior Setting and Safety (November 1, 2018)

To view the revised manual, visit: <https://www2.ncdhhs.gov/info/olm/manuals/dss/csm-94/man/>.

If you have any questions regarding the policy related to these changes, please contact Linda Waite, at 704-341-7300 or your Children’s Program Representative.

Sincerely,



Lisa Cauley, Deputy Director
Child Welfare Services

Attachments:

- Foster Home Licensing Manual, VII. Standards for Licensing Section 1100 L. Exterior Setting and Safety
- Water Hazard Safety Assessment Form (DSS-5018)
- Individual Water Hazard Safety Plan (DSS-5018a)

Cc: Michael Becketts, Assistant Secretary for Human Services
Kristin O’Connor, Section Chief for Policy and Programs
Linda Waite, Regulatory and Licensing Program Administrator
Teresa Strom, Local Support Team Manager
Kathy Dobbs, Staff Development Program Manager

CHANGE #04-2018
October 1, 2018

VII. SECTION .1100 | STANDARDS FOR LICENSING

This set of rules covers the basis for sound foster parenting. A review of this section provides the applicant and the foster home licensing social worker with an overview of the purpose and function of foster parenting. Beginning with client rights and ending with the rules for training, this section addresses most of the aspects of fostering. Foster parent applicants, licensed foster parents, and foster home licensing social workers should be familiar with each of the rules in 10A NCAC 70E .1100. Each of these rules is included on the Foster Home License Application (DSS-5016). A mastery of these rules helps the licensing social worker guide the applicant and speeds up the licensing process.

A. 10A NCAC 70E .1101 CLIENT RIGHTS

Foster parents are protectors of children in their care; they are defenders of each child's rights. The idea that the parent's preferences and desires are secondary to the rights of a child may be new to some parents. Understanding children's rights helps foster parents appreciate that parenting children in care may be different from parenting their own birth children. Child welfare experience and research show that these rights are essential to caring for children in foster care. Foster parents need to understand, accept, and agree to implement each of these of these rights.

The subsection of this rule reads:

- (a) Foster parents shall ensure that each foster child:
 - (1) Has clothing to wear that is appropriate to the weather;

Foster parents are required to provide suitable and presentable clothes for the children in their care. This includes warm coats and jackets in cold weather, long sleeve shirts, trousers, dresses, skirts, and blouses as needed for the child to feel suitably attired for the climate. Summer clothes include short sleeve shirts, shorts, tee shirts, and suitable shoes for warm weather. Children should have underwear and socks appropriate to their age. All such clothing should be clean and in good condition. The intent of this rule is for the child to be able to engage in activities with other children without feeling conspicuous.

Licensing social workers should anticipate each child's need for appropriate clothing and discuss wardrobe issues with foster parents before the seasons change. A good time to do this is during a discussion of family rules and practices. Questions that can be asked to raise this subject include: How does the family dress for holiday outings, such as Christmas, Easter, Fourth of July, and Labor Day? How will the foster parents help the child to be acceptably dressed? This can be touchy, since the child may be attached to clothing that has strong emotional meaning. Making sure that a child is appropriately attired is not as simple as it may seem to new foster parents.

(2) Is allowed to have personal property;

Children may come into care with few belongings. Such belongings may be their only connection with the home of their birth parents and should be respected. These belongings may need to be protected and the child assured that their property is safe and secure. Sometimes children's property may be offensive to the foster parents (e.g., posters of music artists that portray rebellious behavior, music with lyrics the foster parents find objectionable, etc.). Sometimes these belongings may not meet the hygiene standards of the foster parents. In such cases, the foster parents may need help in accepting children's property in their homes. You may need to provide guidance to help foster parents resist the temptation to forbid, clean, or sanitize the child's personal belongings. As long as the belongings do not pose a health or safety hazard, the child has a right to have personal belongings.

This right is a conditional right requiring foster parents to exercise judgment. A child's safety and health are more important than belongings. An example of belongings that pose a health hazard would be clothing infected with lice. Belongings that may pose a safety hazard are weapons, such as a knife or brass knuckles. Although foster parents must tolerate some items in their home they consider undesirable, they must use good judgment to restrict items that are unsafe or unhealthy. Licensing social workers should counsel foster parents to help them understand the range and limits of a child's right to have personal property.

(3) Is encouraged to express opinions on issues concerning care;

A child may not be pleased to be in a foster home, even if the home is materially better than the home of the child's birth family. The child may miss the home of his parents and express feelings of loss. Loss can elicit feelings of deep anger. Children in care may express this anger by rejecting or denigrating the foster home.

By accepting the child's feelings, foster parents show the child that it is safe to be honest and open in their home. Some children move several times in foster care and may not trust that the current placement will last. In such situations, the child may keep an emotional distance to avoid being disappointed again. One way to keep emotional distance is to criticize the home.

You may need to provide guidance to help foster parents control their own emotional responses if the child makes unflattering comments about them. The licensing social worker can prepare foster parents by helping them to anticipate criticism and plan how they will respond when such comments and feelings are expressed. Children need to know that it is safe to express any opinion in appropriate ways.

(4) Is provided care in a manner that recognizes variations in cultural values and traditions;

Each child comes into care with a set of cultural values and traditions. This connection with family is essential to the child's ability to develop a sound self-image and sense of identity. Foster parents are expected not only to accept these values and traditions, but also to help the child maintain and practice these traditions. For example, a foster family used to hugging and touching will need to respect the needs and preferences of children who come from families that do not easily touch each other. Understanding family traditions is important. For children of African ancestry, the practice of Kwanzaa may be as important as celebrating Christmas. Foster parents are expected to become experts on the cultural needs and traditions of the children in their care.

Shared parenting offers foster parents an excellent way to practice this right. Asking the birth parent for guidance on cultural issues and other preferences can be the starting point of a working relationship. This is an excellent opportunity to reinforce with the foster parent the expectation they work with the birth parents. The licensing social worker can help prepare the foster parents for communication with birth parents and set up contacts. The licensing social worker, operating as facilitator between foster parent, the child's social worker, and the birth parent, can show the way that shared parenting and working in partnership benefits the child and his family. (Please refer to: Section 1201; Chapter XI of the Child Placement Manual
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-10/man/>)

(5) Is provided the opportunity for spiritual development and is not denied the right to practice religious beliefs;

Child rearing involves helping a child develop morally and spiritually. This is as important as helping the child grow physically and psychologically. At a minimum, each child needs to learn the basic values of honesty, respect for others, and integrity. Many children receive this support and instructions through religious beliefs and practices.

Foster parents help children develop spiritually and morally by instructing children in basic values. They also encourage a child to grow spiritually and morally by maintaining religious practices of the child's family of origin. To develop spiritually, a child needs instruction that is caring and accepting. For a child to practice his or her religious beliefs may require foster parents to be involved in religious practices different from their own. For example, caring for a child from a Catholic family may require the foster parent to take the child to Catholic Mass, confession, etc.

Children in foster care have a right to be free of attempts to change their religious beliefs. Foster parents may not insist that the child participate in the religious activity of the family. An effective way to support children's spiritual development is to ask questions and then listen very carefully for the reply. The licensing social worker may encourage this practice by demonstrating this technique to the foster parents. By asking questions of the foster parents (such as "How do you know if something is right or wrong?") the licensing social worker can

demonstrate how to listen without evaluating or correcting the answer. By asking the foster parents to describe spiritual values important to them, the licensing social worker shows the parents how to engage the child. Acceptance is crucial in helping a child develop spiritually. This value can be demonstrated in conversations with foster parents about their own spiritual development.

(6) Is not identified in connection with the supervising agency in any way that would bring the child or the child's family embarrassment;

A child is not a walking advertisement for the child-placing agency. As much as possible, a child in foster care should not stand out from other children in the family or the neighborhood. The child shall not have his or her image (photograph) displayed or circulated in reference to foster care, social services, mental health services, or any other circumstance, which led to the placement of the child. Foster parents may need help so that they do not inadvertently disclose the status of a child in a way that embarrasses the child.

(7) Is not forced to acknowledge dependency on or gratitude to the foster parents;

A child incurs no obligation or duty of gratitude by coming into care. Requiring expressions of gratitude and obligation from a child in foster care can be harmful and dishonest. To require such expressions is an unloving request that hints at power and dominance rather than love and compassion. Licensing social workers can prepare foster parents for the possibility that a child placed in their home may never express gratitude or acknowledge the help received from the foster parents. Foster parents are expected to care for the child with the hope that some day the child will appreciate what was done for them.

(8) Is encouraged to contact and have telephone conversation with family members, when not contraindicated in the child's visitation and contact plan;

Because our origins are important to our development, well-being, and identity, children in care need help maintaining and increasing contact with their families. The best hope for children in foster care is to strengthen their birth family network so they will be nurtured and protected in the care of their birth parents or extended family. This is the central conviction of family-centered practice.

Since many children come into foster care due to abuse or neglect by their birth family, this goal may be difficult for foster parents to grasp. Indeed, encouraging contact with parents who have been neglectful or abusive may seem wrong to the foster parents. If it is not contraindicated in child's visitation and contact plan, foster parents need to presume that contact with family members is to be encouraged, respected, and facilitated. Foster parents will need guidance and instruction to accomplish this.

(9) Is provided training and discipline that is appropriate for the child's age, intelligence, emotional makeup, and past experience;

Effective parents teach their children to master the skills, knowledge, and attitudes they need to be more self-reliant and eventually become independent. In a way, training and discipline are a gift a parent gives the child. Foster parenting is no different. Foster parents are expected to train and teach the children in their care. Neglecting this parenting duty leaves a child less able to contend with the demands of the larger society.

Training and providing discipline requires an understanding of child development. Children develop physical and mental abilities as they age. Effective foster parents take this into account when training and disciplining children. For example, to tell a preschool child who is taking candy from the display in a store, "Now, we do not eat things that do not belong to us" is ineffective because the child has not yet developed the capacity for abstract thinking. A preschool child needs direct instructions, such as, "If you take the candy off the shelf, we will have to leave the store without getting any at all." Such a specific statement with direct consequences is more age-appropriate and therefore a more effective method.

An understanding of child development involves an understanding of intelligence levels. Quoting Bible passages on the basis of right and wrong to a child of less than average intelligence may frustrate the child and have limited success. It would be better to accept that such a child needs direct, explicit instructions.

Another factor in child development is being aware of differences in personality. One child may be introverted and need time to think before speaking. Another may be extroverted and need to talk to know what he is thinking. Effective training gives quiet children time to reflect on the lesson and talkative children parental attention while they talk their way to understanding.

Each child comes into care having mastered some developmental tasks. Understanding this and building on this progress makes training and discipline easier. For example, a child who has been helping care for siblings may have learned to make decisions involving other people. Building on this skill by asking the child to help solve problems may enhance their learning.

There are many ways foster parents train and discipline children in their care. By preparing and explaining the house rules to children, the parents help the child understand and respect boundaries. By using positive reinforcement, foster parents can motivate a child to adopt desired behaviors. By giving specific and sincere feedback to a child, a child quickly learns what is expected.

Encourage foster parents to acquire knowledge about child development, since much of child welfare practice uses technical terms such as 'boundaries,' 'stages,' and 'needs.' Provide parents with training, references, and materials in this area. Some experienced foster parents may have learned what new parents need to know. Introduce these experienced foster parents to new ones. The right of the child to effective training and discipline is a key component of a productive experience in foster care.

(10) Is not subjected to cruel or abusive punishment;

Punishment, the imposition of a penalty (something negative or unpleasant), is a tool some parents use in their efforts to discipline children. The ultimate goal of discipline is to teach children what to do and set clear limits about what not to do so that, over time, children learn self-discipline and behave appropriately on their own. As they discipline children, parents have a wide variety of strategies to choose from, including time out for younger children, behavior contracts, motivation systems, natural consequences, etc.

Often used after a problem surfaces, punishment can be less effective than other techniques because it: tends to focus on what's wrong instead of what needs to be done right; frequently consists of penalties unrelated to the misbehavior; puts responsibility for enforcement on the parent instead of teaching children to be responsible for their actions. Licensing social workers should make sure that licensed foster parents and foster parent applicants understand both the disadvantages of punishment and more effective methods of managing child behavior.

Some forms of discipline are cruel and abusive and not permitted when it:

- is an act of retribution and intended to inflict pain;
- involves in any way eating, drinking, smelling, seeing, urinating, or having a bowel movement; and
- is intended to show who is boss, demonstrate power and influence, or unduly embarrass someone.

Other forms of cruel and abusive punishment include confining a child, locking a child in a room, time-outs that are not appropriate for the child's age, permanent loss of privileges (e.g., use of the phone), and anything motivated by the desire to invoke fear. If a foster parent is embarrassed or reluctant to tell the licensing social worker or other individuals how they punished a child, the punishment is not acceptable.

Licensing social workers should discuss this topic openly with the foster parents; ask them about their use of discipline strategies. Licensing social workers may need to have multiple conversations with potential foster parents on this topic to get a good indication of how applicants intend to discipline children. Foster parents must understand that at times they may need to be assertive and direct with children who exhibit little or no respect for authority. However, this cannot be done in a cruel or abusive manner. Any "red flags" must be addressed before a placement is made. Encourage the foster parent to call you about this topic any time.

(11) Is not subjected to corporal punishment;

Corporal punishment is the invoking of physical pain as a form of punishment. This restriction prohibits the use of corporal punishment in any form, including the following: hitting, spanking, slapping, pinching, ear pulling, striking, kicking,

spitting, eye gouging, or any other form of causing pain to the body of a child.

Make sure foster parents understand this limitation. Some may have been raised by parents who used corporal punishment. Some may have used it raising their own children. With such parents, emphasize that there are no exceptions to the prohibition on using corporal punishment with foster children. Discuss what they should do when they feel a behavior needs to be changed and the child needs consequences in order to make this change. Foster parents should have an action plan ready because some children expect to be hit and may test foster parents to see if they truly are safe. Train foster parents in other forms of discipline; help them problem solve and select appropriate means of discipline for children in their care. Encourage foster parents to be consistent with discipline methods; patience is also important; it takes time for children to learn new ways of managing behaviors. Foster parents need more assistance and need to be visited more frequently when a child is first placed in their home. Appropriate discipline and behavior modification techniques are important subjects to discuss during these visits. Help foster parents prepare a behavior modification or a discipline plan before a confrontation with the child occurs.

(12) Is not deprived of a meal or contacts with family for punishment or placed in isolation time-out except when isolation time-out means the removal of a child to an unlocked room or area from which the child is not physically prevented from leaving;

The foster parent may use isolation time-out as a behavioral control measure when the foster parent provides it within hearing distance of a foster parent. The length of time alone shall be appropriate to the child's age and development; Depriving a child of necessities is cruel, inappropriate and an unacceptable disciplinary practice. Help foster parents understand that withholding necessities such as food, contact with family, warm clothes in the winter, access to the house when it is hot or cold outside, all are considered deprivations and are not effective or appropriate forms of discipline. Locking a child in a room or closet is not allowed. Many children in care have experienced the trauma of being physically or emotionally abandoned. Any form of deprivation may trigger feelings of terror and helplessness. Children in foster care need to know that they will never be abandoned.

One effective discipline technique is "time out," during which a child is asked to go to an area where there is nothing fun, amusing, or stimulating for the child to do. This area cannot be locked and the child cannot be physically prevented from leaving. Time out is not punishment. Rather, the intent is to allow the child to regain emotional composure so he or she can comply with the parent's request. Time out should be tailored to the developmental level of the child. Time out periods are usually about a minute for each year of the child's age. Children placed in time out should be within hearing distance of the foster parent.

(13) Is not subjected to verbal abuse, threats, or humiliating remarks about

himself/herself or his/her families;

Words can be cruel, especially when used on someone who is dependent on you for the basic necessities. Young children are unable to leave a home where they are verbally abused; teenagers are restricted by law from leaving. Name-calling is not allowed in foster homes when a child is in placement. If name-calling is a usual practice in a home, the licensing social worker should be very cautious about using such a home. Name-calling ranges from calling a child a “brat” to name calling about a child’s race or ethnicity or place of origin. Words such as ‘dummy,’ ‘shorty,’ ‘beanpole,’ ‘tubby,’ ‘fatty,’ ‘carrot top,’ ‘four eyes,’ etc. are inappropriate, even if used in jest. Children in foster care are aware of many of the societal prejudices and opinions about themselves, their parents, and their families. Many feel the shame such labels and prejudicial statements incur. For many children in foster care even nicknames are experienced as a type of name-calling. Therefore, the use of any term except their name is not appropriate unless the child voluntarily requests that he or she be called by his or her nickname. Some families give each other nicknames as a sign of affection. Some families use verbal threats as a means to emphasize they are serious about a topic. Such habits need to be curtailed when foster children are in the home.

(14) Is provided a daily routine in the home that promotes a positive mental health environment and provides an opportunity for normal activities with time for rest and play;

Effective foster homes encourage growth and development. In these homes the daily foster home routine assures that each person feels seen, heard, wanted, and appreciated. Meeting each person’s needs in the home is imperative. Each person’s strengths should be identified, appreciated, and utilized. In effective foster homes, the routine includes times for rest and sleep, recreation and play. There are times to work and improve the home, as well. These times are predictable and reliable. When asked, the foster parents can describe a ‘typical’ day in the life of their family.

Often children come from homes that are chaotic and unreliable. People may eat, play, and sleep at random times. Meeting individual needs is not the concern in such families; each person is expected to meet his own individual needs. The environment may be competitive and self-centered. Children in foster care may find it strange to be in an environment of positive mental health. It may be a new experience to be appreciated, recognized as special, and welcomed into a household where family members show concern and care for each other.

Initially, the child may not accept the routine in the home. Foster parents need to be patient and persistent. Most children will soon begin to feel comfortable and thrive in the homes where a dependable routine of compassion and nurturance is provided.

(15) Is provided training in good health habits, including proper eating, frequent bathing, and good grooming. Each child shall be provided food with nutritional content for normal growth and health. Any diets prescribed by a licensed medical provider shall be provided;

Some children come into care not knowing how to care for themselves. If the child has not developed age-appropriate habits, foster parents provide this instruction and provide appropriate meals. This should be done in an accepting and non-judgmental manner. It is important to understand and accept that children come from different cultures. Other cultures are neither better nor worse. They are simply different. From this perspective, foster parents may instruct children in how things are done in their home without implying criticism of the child's birth parents. If a child has a prescribed diet, foster parents must assure that diet is followed. This may be a point of contention, as it may require preparing separate menus for the child. The child may not like the diet and ask for food not prescribed. The licensing social worker can reduce any confrontation by helping the foster parent understand the importance of the diet, providing some recipes that follow the diet, and suggesting ways to handle a child's request for foods not on the diet.

(16) Is provided medical care in accordance with the treatment prescribed for the child;

Children need medical care. Even a healthy child needs a regular check up. Foster parents are expected to have professional medical care available. In addition to professional care, foster parents need to maintain emergency medical supplies in the home. A Red Cross First Aid kit is an effective way to assure a child will get emergency care until professional care is provided.

Some children have special medical needs and foster parents are expected to implement this care, under professional supervision. It is important to review with the foster parent what they will do if the child gets sick, has an accident, or cuts himself. Make sure the foster parents have a Medicaid card for the child or another form of insurance. Make sure the foster family has phone numbers of medical personnel and agency personnel posted and readily accessible. Preparation is a key ingredient to providing necessary medical care.

(17) Of mandatory school age maintains regular school attendance unless the child has been excused by the authorities;

It is a foster parent's duty to make sure the child gets to school. The child's social worker must make sure the foster parent knows where the school is located and how to get the child to the school. The child's social worker may need to assist the foster parent in registering the child in school. The foster parent should have the names and contact information of the child's teachers. Foster parents need to be responsive to the updates and messages from teachers about the child's progress or school needs. Children frequently need assistance with homework and school projects. The agency, foster parents, and

school system must work together to obtain any special educational assistance the child may require.

(18) Is encouraged to participate in neighborhood and group activities, have friends visit the home and visit in the homes of friends;

Learning to get along with others is a necessary life skill. Foster parents' help children gain this skill by providing opportunities for the child to play and socialize with other children. It is not appropriate for a child to spend all his unscheduled time alone. If a foster family does not live in an area where children can easily engage with others, ask them how they plan to assure that children in their care will have social opportunities. Let foster parents know that the child is permitted to visit their friends' homes, and to have their friends visit the foster home. Children may need to be encouraged to go to parties and celebrations with other children. It is permissible for children to visit in the homes of other families and go to sleepovers as long as the foster parents know the families and have no concerns about safety. It is the responsibility of foster parents to encourage children to develop socially.

(19) Assumes responsibility for himself/herself and household duties in accordance with his/her age, health, and ability. Household tasks shall not interfere with school, sleep, or study periods;

Developing a sense of community and participation is a major developmental task. Foster parents should show children how to take care of their own room and possessions in accordance with their age, health, and ability. To ask a toddler to clean up in the kitchen is unreasonable; asking a ten-year-old to take his dishes to the sink is reasonable. A reasonable regimen of chores and tasks complements school, study, personal care, recreation, and sleep. A regimen of personal care tasks and family chores should help the child fit into the family. Before placement, ask the foster parents what chores they will expect children in their home to undertake. Provide advice to foster parents that assuming personal care tasks, such as: putting dirty clothes in a hamper, putting the cap on the toothpaste, hanging up wet towels, and putting the milk back in the refrigerator helps the child feel part of the family.

(20) Is provided opportunities to participate in recreational activities;

Children need recreation to help their minds and bodies grow and develop. Organized recreation develops social skills as well. Foster parents should encourage children to play with other children in the neighborhood, participate in community and afterschool activities, join sports leagues, go to the YMCA or YWCA, etc. Regular family outings, hikes, outdoor adventure sports, and other activities provide excellent recreational opportunities. Foster parents with a more sedentary life style may need help and suggestions on how to fulfill this very necessary part of parenting.

(21) Is not permitted to do any task, which is in violation of child labor laws, or not

appropriate for a child of that age;

Foster parents must obey child labor laws. For specific information on this topic, refer foster families to the county department of social services in the community where they live. Foster families that operate a family farm or a family business may need additional guidance with this right. Children are excluded from certain work requirements or tasks that birth children may perform. Before a child in foster care engages in labor for which a person would be paid, encourage the foster parents to discuss this with their supervising agency.

(22) Is provided supervision in accordance with the child's age, intelligence, emotional makeup, and experience; and

Children need to be kept safe, yet develop independence and self-reliance. Foster parents must supervise this process. The foster parent is the child's protector. Safety is paramount in deciding how much freedom a child should have. Allowing a toddler to play in the front yard or on a busy street while the parent is in the house is not safe. Allowing a teenager to play unsupervised in the same yard most likely is safe. Using specific scenarios in discussion with the foster parents is an effective way to illustrate the range and limits of appropriate supervision. Do not assume that foster parents who have raised their own children understand that supervising children in foster care may take more attention. Some children have been left on their own in their birth families and feel free to wander off. Older and more mature children may be left alone for short periods of time. However, foster parents need to discuss this and obtain approval from their supervising agency before leaving children alone. Children should never be left unattended if they feel fearful or anxious. Children left alone need to know how to call for help and how to contact their foster parents. Neglect and inadequate supervision kill and injure more children than actual physical abuse.

(23) If less than eight years of age and weighs less than 80 pounds is properly secured in a child passenger restraint system that is approved and installed in a manner authorized by the Commissioner of Motor Vehicles;

All passengers in motor vehicles need to be restrained. In a collision, secondary impact causes serious injury if a person is not restrained by a seat belt. Special car seats keep smaller children safe. Small children (under age of 8 or fewer than 80 pounds) are required by law to be in a special car seat in the back seat. The licensing social worker must make sure that foster parents accept this requirement. Have the foster parent demonstrate to you that they have an appropriate car seat and that they can place the child in the seat correctly.

When applicants sign the Foster Home License Application (DSS-5016), they are agreeing they understand these 23 rights and responsibilities, and that they and all household members will comply with them. Signing the DSS-5016 is a good time for a final review of these rules, item by item. Ask all adults in the home if they understand the specific right and agree to enforce the right for each child in

care. Spending time at the signing of the DSS-5016 can prevent misunderstanding later on.

- (b) Foster parents shall initially and at relicensure sign a Discipline Agreement that specifically acknowledges their agreement as specified in Subparagraphs (a)(9), (10), (11), (12), and (13) of this Rule, as well as discipline requirements outlined in the out-of-home family services agreement or person-centered plan. The foster parents and the supervising agency shall retain copies of these agreements.

Client rights of children are not negotiable. Foster parents are expected to know these rights and make sure they are protected for each child in care. Violation of these rights can result in immediate revocation of the foster home license. These specific rights are listed in the "Discipline Agreement" (this form is developed by the supervising agency) and require the signature of foster parents. These specific issues are:

- (a) (9) Provided training and discipline that is appropriate for the child's age, intelligence, emotional makeup, and past experience, (a)(10) is not subjected to cruel or abusive punishment,
- (a) (11) is not subjected to corporal punishment, and
- (a) (12) Is not deprived of a meal or contacts with family for punishment or placed in isolation time-out except when isolation time-out means the removal of a child to an unlocked room or area from which the child is not physically prevented from leaving.

The foster parent may use isolation time-out as a behavioral control measure when it is provided within hearing distance of a foster parent. The length of time alone shall be appropriate to the child's age and development.

Review the Discipline Agreement with each foster parent as well as any adult members of the household who will supervise or provide care for a child. Foster parents and any adult household member who provide supervision and care for a child are required to sign the agreement.

When licensing social workers spend time on client rights early in the application process, the rest of the process goes much easier. Many of the applicants' questions and issues are raised and resolved by discussing each of these 23 rights of children in care.

B. 10A NCAC 70E .1102 MEDICATION

Foster parents are responsible for the following regarding medication:

Many children in foster care need ongoing medical services and supervision. This usually means the child has been prescribed a regimen of medications by a licensed medical provider. Foster parents are the key in making sure the child receives needed medical care and must administer medications in the manner prescribed by the medical provider. It is important that foster parents understand and accept the rules regarding medication administration. These rules are strict and follow precise procedures. This

may be very different from a family approach to medication, where strict guidelines are not required. Foster parents will need training in how to administer medications.

The subsections of this rule read:

(1) General requirements:

(a) Retain the manufacturer's label with expiration dates visible on non-prescription drug containers not dispensed by a pharmacist;

(b) Administer prescription drugs to a child only on the written order of a person authorized by law to prescribe drugs;

(c) Allow prescription medications to be self-administered by children only when authorized in writing by the child's licensed medical provider;

(d) allow non-prescription medications to be administered to a child taking prescription medications only when authorized by the child's licensed medical provider; allow non-prescription medications to be administered to a child not taking prescription medication, with the authorization of the parents, guardian, legal custodian, or licensed medical provider;

(e) allow injections to be administered by unlicensed persons who have been trained by a registered nurse, pharmacist, or other person allowed by law to train unlicensed persons to administer injections;

(f) Record in a Medication Administration Record (MAR) provided by the supervising agency all drugs administered to each child. The MAR shall include the following: child's name; name, strength, and quantity of the drug; instructions for administering the drug; date and time the drug is administered, discontinued, or returned to the supervising agency or the person legally authorized to remove the child from foster care; name or initials of person administering or returning the drug; child requests for changes or clarifications concerning medications; and child's refusal of any drug; and

(g) Follow-up for child requests for changes or clarifications concerning medications with an appointment or consultation with a licensed medical provider.

Before any medication may be given to a child, it must be authorized by a licensed medical provider (physician, physician assistant, or nurse practitioner). In addition, before children may take their own medications without supervision, written permission is required from a licensed medical provider. If a child is taking a prescribed medication, a licensed medical provider must give written permission for the child to take over-the-counter medicine. Written permission from a parent, guardian, or custodian is sufficient for a foster parent to administer over-the-counter medications to a child not taking prescribed medications. Foster parents are required to be trained in how to administer medications and should receive medication education directly from a pharmacist, registered nurse, or licensed medical provider. Foster parents should be directed to

contact the pharmacist or physician for additional information or clarification regarding drug administration if necessary. Foster parents cannot delegate the administration of medications to anyone else.

Any medication given to a child must be recorded immediately on the Medication Administration Record (MAR). The MAR is used to document the date and time that the medication was administered, discontinued, or disposed of. The MAR also contains the following information:

- child's name;
- name, strength, and quantity of the drug;
- instructions for administering the drug;
- date and time the drug is administered, discontinued, or returned to the supervising agency or the person legally authorized to remove the child from foster care;
- name or initials of person administering or returning the drug;
- any medication errors (prescribed and over-the-counter medications) such as missed medications, too little or too much administered, etc.
- child requests for medication changes or clarifications (child's medical provider must be consulted); and
- child's refusal of any drug.

MAR forms are not provided by the Division of Social Services. Therefore, supervising agencies must develop their own MAR forms and insure they contain all the required information.

(2) Medication disposal:

(a) return prescription medications to the supervising agency or person legally authorized to remove the child from foster care; and

(b) return discontinued prescription medications to a pharmacy or the supervising agency for disposal, in accordance with 10A NCAC 70G .0510(c) which states: Upon discharge of a child from foster care, the foster parents or the supervising agency shall return prescription medications to the person or agency legally authorized to remove the child from foster care. Unwanted, out-dated, improperly labeled, damaged, adulterated or discontinued prescription medications shall be returned to a pharmacy for disposal.

Proper disposal of medications is important. Some medications are harmful to the environment. Some are sold on the black market. Some children in foster care intentionally accumulate unused medications so they can be sold on the black market. Each supervising agency must have written procedures for the disposal of unused medications. Make sure your foster parents know about this procedure, have a copy, and know how to follow the steps prescribed.

When a child is discharged from foster care, medications should go with the child. Failure to do this can be costly (medications are expensive) and, more seriously, it could

deprive a child of needed medication. It is appropriate to release unused medications to the person or agency legally authorized to remove the child from foster care. Foster parents should get a signed statement from the person or agency with the name of the child, name of medications, number of doses remaining, and the date and time the medication was released. This statement should be attached to the MAR.

Provide advice to foster parents that unused or discontinued medications are to be returned to the supervising agency or pharmacy. The foster parent shall make a notation on the MAR the date the medication was returned to the supervising agency or the pharmacy and the name of the pharmacy. If a pharmacy will not accept the medications, the foster parent or supervising agency shall receive information from the pharmacist regarding proper disposal of the medication. The foster parents or supervising agency shall record on the MAR how, when, and where the medications were disposed.

(3) Medication storage:

(a) store prescription and over-the-counter medications in a locked cabinet in a clean, well-lighted, well-ventilated room other than bathrooms, kitchen, or utility room between 59° F (15° C) and 86° F (30° C);

(b) store medications in a refrigerator, if required, between 36° F (2° C) and 46° F (8° C). If the refrigerator is used for food items, medications shall be kept in a separate, locked compartment or container within the refrigerator; and

(c) store prescription medications separately for each child.

Proper medication management means proper storage of medications. Medications are to be kept separate from toiletries, food, household items, etc. Medications are to be kept in a locked container and in a place accessible only to the foster parents. Many foster parents store medications in a closet in the foster parents' bedroom. Make sure the space where medications are stored does not get too cold in the winter or too hot in the summer. Some foster parents keep a thermometer in the space beside the medication storage container.

Medications requiring refrigeration must be kept in a separate locked container. Many foster parents have a small lock box they keep in one of the vegetable crispers in the refrigerator. Inside this box, each child's medications must be stored separately within the lock box and clearly marked. As with medications that do not require refrigeration, temperature monitoring for refrigerated medications is important. Suggest that foster parents keep a thermometer in the refrigerator by the medication storage container.

Some children may be able to self-administer their medications. However, these medications need to be maintained by the foster parent in a locked container.

(4) Psychotropic medication review:

(a) Arrange for any child receiving psychotropic medications to have his/her drug

regimen reviewed by the child's licensed medical provider at least every six months;

- (b) Report the findings of the drug regimen review to the supervising agency; and
- (c) Document the drug review in the MAR along with any prescribed changes.

Psychotropic medications are powerful drugs capable of altering mood, sensory perception, and physical awareness. The foster parents must follow the specific instructions of the medical provider who prescribed the medication. A licensed medical provider must review the medication regimen of children using psychotropic medications at least every six months. It is the responsibility of the foster parent to make sure this is done. The results of this review are filed with the supervising agency. Usually that means filing the results with the licensing social worker. It is up to the licensing social worker to make sure the review results are filed with the appropriate agency personnel.

The licensing social worker should help the foster parent adopt a vigilant and strict routine with such medications. Ask the foster parent when the review is scheduled. If there is confusion, check with the medical provider. Check with appropriate agency personnel to make sure the report has been received and reviewed by the agency. Check the MAR to make sure the medication is administered as prescribed.

- (5) Medication errors:
 - (a) report drug administration errors or adverse drug reactions to a licensed medical provider or pharmacist; and
 - (b) document the drug administered and the drug reaction in the MAR.

Foster parents must monitor the child after administering medicine. If the child has any unexpected reaction to the medication, the foster parent must contact the pharmacist or a medical provider immediately. Any medication given incorrectly is to be reported to a pharmacist or a medical provider.

Failing to give a scheduled dose is a medication error. Some medical providers may provide guidance on what to do if a medication is missed. For some medications, missing a dose is not a serious problem; for others, missing a dose may have serious consequences. A licensed medical provider will know when missing a dose of medicine is a serious problem and can provide direction on the steps the foster parent needs to take.

The licensing social worker should make sure the foster parent has a list of key contacts in case a medication is administered in error or if the child has an adverse reaction. Although the rules do not require informing the child's social worker, it is a good idea to do so. Partners keep each other informed and the child's social worker is a key team member for the child.

All medication errors and adverse reactions must be recorded on the Medication

Administration Report form (MAR). This is a key document and must be completed accurately and timely. The supervising agency should make a point to review the MAR regularly to insure this record provides the necessary information for medical personnel, service and treatment providers, and the Licensing Authority.

The Foster Home License Application (DSS-5016) lists these medication rules verbatim. Licensing social workers should use the time of final signature as an opportunity to reinforce these rules and the procedures they require. Foster parents are expected to practice professional level skills in medication management. Emphasize that the key is thorough, timely documentation. If in doubt, ask for help. Keep everyone informed about medication management issues.

C. 10A NCAC 70E .1103 PHYSICAL RESTRAINTS

Most supervising agencies do not permit foster parents to use physical restraints. Supervising agencies that choose to permit foster parents to use physical restraints must follow all of the rules in 10A NCAC 70E .1103 and 10A NCAC 70G .0512. In these supervising agencies, foster parents must be trained to comply with all these rules and receive annual written authorization to use restraints.

Even when fully authorized and trained, foster parents may only use restraints to prevent children from harming themselves or others. Under no circumstance may restraints be used as a form of discipline or punishment. The use of restraints is for emergency situations only. This rule details some forbidden forms of restraints. They range from mechanical restraints to locking a child in a room. This rule also details the restraint training foster parents are required to have, the qualifications of the trainer, and the foster parent's responsibilities before, during, and after using a restraint. This rule is very specific.

Many agencies provide deescalating training for foster parents, even though they do not permit foster parents to use physical restraints. The online course "Train the Trainer for Becoming a Therapeutic Foster Parent," which can be used to meet the ten-hour pre-service training requirement for therapeutic foster care, provides guidance related to managing behaviors. This training is also appropriate for family foster care. We encourage all supervising agencies to have their foster parent trainers take the course and provide this training to foster parents. This training can be accessed at: <https://www.ncswlearn.org>.

Rule, 10A NCAC 70E .1103 does not trump common sense. Foster parents are expected to use good judgment in caring for children. A three-year-old child playfully running away from a foster parent in a busy parking lot should be held if he does not stop when told to stop. It may even be appropriate to pick him up and put him in the car. It would be inappropriate to do the same thing to a nine-year-old boy. If two seven-year-old boys are fighting and harming each other, pulling the two children apart is the appropriate thing to do. Pulling apart two teen-age girls screaming at each other but not touching each other may not be appropriate. Physical restraints may not be used if a child is damaging property, such as throwing things against a wall, tearing pages from books, or slamming doors with force.

Foster parents who have used force with their own children may feel uncertain concerning their options. They may need reassurance that there are more effective ways to handle children who seem to be out of control. The licensing social worker can calm the foster parents by taking these concerns seriously and arranging for training or assistance in behavior management. This is a good time to reinforce the behavior management lessons covered in the pre-service classes.

Trained and authorized foster parents need to be judicious in the use of restraints. Supervising agencies must pay careful attention to foster parents who are quick to use restraints. This is usually a sign that foster parents need more supervision and training. Foster parents need to be reminded that restraints are used only as a last resort, never for the convenience of the foster parents, and only to prevent immediate harm to self or others.

The subsections of this rule read:

- (a) Foster parents who utilize physical restraint holds shall not engage in discipline or behavior management that includes:
 - (1) protective or mechanical restraints;
 - (2) drug used as a restraint, except as outlined in Paragraph (b) of this Rule;
 - (3) seclusion of a child in a locked room; or
 - (4) physical restraint holds except for a child who is at imminent risk of harm to himself/herself or others until the child is calm.

A mechanical restraint is any substance used to restrain a person. Rope, cloth, leather straps, blankets, handcuffs, clothes, duct tape, chains, plastic wrap, string, wire, or any other substance may not be used to restrain a child in foster care. This includes tying or taping items to the child as a form of changing behavior. The licensing social worker needs to impress upon the foster parent that there are no exceptions to this rule.

Drugs or medication may not be used to restrain a child or quell difficult behaviors. Medications may be used as part of a treatment plan to deal with a psychiatric condition and must be prescribed by a licensed medical provider. The supervising agency must help foster parents understand that medications are not used for the convenience of the foster parent. A foster parent caring for a very active child might mistakenly request a medication to help the child calm down so the parents can catch their breath. Such a usage is not allowed. The use of behavior controlling medications must be for aiding the child to meet therapeutic goals for the child's benefit.

A child in foster care may not be placed in a locked room or space. This rule applies even if the foster parents or other individuals are in the locked room. If a child is placed in a room with a door, the child must be able to leave the room if and when he wishes. Some children try to run away from a foster home. Many times foster parents wish to lock the doors so no one can leave. This is not permitted. If foster parents care for children who may run away, they may be asked to install alarms on their doors so they

will know the child has left the house. If a child leaves the residence without permission the foster parent should follow the child and encourage him to return to the home. If the child refuses to return to the home the foster parent should continue to follow the child and make sure he remains safe until someone in authority (police, social worker, and therapist) can arrive on the scene.

Foster parents may not hold a child on the floor, in a chair, in a bed, etc. A foster parent may not pull the child by the arm into the house or grab a child by the hair or by the ear. The only time a child may be physically restrained is if the child is at imminent risk of harm to himself/herself or others. Only foster parents trained and authorized by the supervising agency may administer physical restraints.

Some foster parents may think this means they may not touch a child. The licensing social worker should help the parent understand the difference between pleasant, desired touch and controlling, punishing touch. If a child is hurt and wants comfort, a foster parent may hug the child for comfort. If the child pushes away and does not want the hug, the child's right to decline the hug is to be respected. To continue to hug a child struggling to get away is not allowed. Discussing this rule is an excellent way to emphasize to new foster parents that most children placed in foster care have behaviors that may be difficult to manage.

- (b) Foster parents shall not administer drugs to a foster child for the purpose of punishment, foster parent convenience, substitution for adequate supervision or for the purpose of restraining the child. A drug used as a restraint means a medication used only to control behavior or to restrict a child's freedom of movement, and is not a standard to treat a psychiatric condition.

Some medications have a calming effect. Tranquilizers and some psychotropic medications place a person in a semi-conscious state. Sometimes foster parents mistakenly request such medications for the child for their own convenience. This use of medication is prohibited.

At times licensed medical providers may prescribe medication to help children focus their attention, cooperate, and concentrate. This is appropriate because it is for the benefit of the child. It becomes inappropriate when the foster parent requests medications for a child for their own convenience and benefit. If a foster parent asks for medications for their convenience, it often is a signal for help. Understanding this may help the agency identify the real reason for this inappropriate request and provide an opportunity to strengthen the placement.

- (c) Before a foster parent shall administer physical restraint holds, each foster parent shall complete training that includes at least 16 hours of initial training in behavior management, including techniques for de-escalating problem behavior, the appropriate use of physical restraint holds, monitoring of vital indicators, and debriefing children and foster parents involved in physical restraint holds. Foster parents authorized to use physical restraint holds shall annually complete at least eight hours of behavior management training including techniques for de-escalating problem behavior. This training shall count toward the training

requirements as set forth in 10A NCAC 70E .1117(6). Only foster parents trained in the use of physical restraint holds shall administer physical restraint holds.

Foster parents must be trained to use restraints. The training consists of 16 hours of special instruction. The training course covers the following areas:

- Techniques for deescalating problem behaviors;
- Appropriate use of physical restraint holds;
- Monitoring vital indicators; and
- Debriefing children and foster parents involved in the problem.

Once foster parents have completed the required 16 hours of instruction, they must complete an additional eight hours of training each year. If foster parents are hesitant to invest time and effort in this training, they should be encouraged to take children who may not need restraints.

An employee of the supervising agency or someone under contract with the agency usually provides this training. These trainers must meet the requirements outlined below. These trainers can be a valuable resource to the licensing social worker. Developing a relationship with these trainers opens up their expertise not only to foster parents who wish to use restraints, but also to all foster parents. De-escalation skills benefit all foster parents. Parents who identify and deal with problems before they require physical confrontation provide a more secure environment for children.

Self-defense instruction, martial arts training, or military/law enforcement experience does not meet this requirement.

- (d) Foster parents shall be trained by instructors who have met the following qualifications and training requirements:
- (1) instructors shall demonstrate competence by scoring 100 percent on testing in a training program aimed at preventing, reducing, and eliminating the need for restrictive interventions;
 - (2) instructors shall demonstrate competence by scoring 100% on testing in a training program teaching the use of physical restraint;
 - (3) instructors shall demonstrate competence by scoring a passing grade on testing in an instructor training program as determined by the North Carolina Division of Mental Health, Developmental Disabilities and Substance Abuse;
 - (4) the instructors' training shall be competency-based, and shall include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives, and measurable methods to determine passing or failing the course;
 - (5) the content of the instructor training shall be approved by the Division of Mental Health, Developmental Disabilities and Substance Abuse Services, and shall include, presentation of understanding the adult learner, methods of

teaching content of the course, evaluation of trainee performance and documentation procedures;

(6) instructors shall be retrained at least annually and demonstrate competence in the use of physical restraint to the North Carolina Interventions (NCI) Quality Assurance Committee;

(7) instructors shall be trained in cardio-pulmonary resuscitation (CPR);

(8) instructors shall have coached experience in teaching the use of restrictive interventions at least two times with a positive review by the coach, and trainers shall teach a program on the use of physical restraints at least once annually; and

(9) instructors shall complete a refresher instructor training at least every two years.

Instructors must be certified to conduct the training. Training in self-defense, martial arts, or military/law enforcement techniques does not meet this requirement. This rule articulates the training and qualifications of the trainers for classes in how to use physical restraints. The licensing social worker can use the material in this rule to show a foster parent the quality of training needed to be approved to use restraint holds.

(e) In administering physical restraints, the following shall apply:

(1) foster parents shall use only those physical restraint holds approved by the North Carolina Interventions (NCI) Quality Assurance Committee. Approved physical restraint holds can be found at the following web site: <http://www.ncdhhs.gov/mhddsas/providers/trainingandconferences/restraints.htm> (Reviewed Restrictive and Physical Interventions Curricula by Name), which is hereby incorporated by reference including subsequent amendments and editions;

(2) before employing a physical restraint hold, the foster parent shall take into consideration the child's medical condition and any medications the child may be taking;

(3) no child shall be restrained utilizing a protective or mechanical device;

(4) no child or group of children shall be allowed to participate in the physical restraint of another child;

(5) physical restraint holds shall:

(A) not be used for purposes of discipline or convenience;

(B) be used only when there is imminent risk of harm to the child or others and less restrictive approaches have failed;

(C) be administered in the least restrictive manner possible to protect the child or others from imminent risk of harm; and

(D) end when the child becomes calm.

It is the responsibility of the supervising agency to maintain a list of physical restraint holds that are approved by the North Carolina Division of Mental Health, Developmental Disabilities, and Substance Abuse Services. The supervising agency shall inform foster parents of these approved physical restraint holds. Foster parents trained and authorized to administer physical restraints may use only these holds. Two trained adults must be present to administer a restraint hold. Children may not help with physical restraints. No protective or mechanical devices may be used.

(6) The foster parent shall:

(A) ensure that any physical restraint hold utilized on a child is administered by a trained foster parent with a second trained foster parent or with a second trained adult in attendance. Concurrent with the administration of a physical restraint hold and for a minimum of 15 minutes subsequent to the termination of the hold, a foster parent shall monitor the child's breathing, ascertain the child is verbally responsive and motorically in control, and ensure the child remains conscious without any complaints of pain. The supervising agency may seek a waiver from the licensing authority for a foster parent to administer a physical restraint hold without a second trained adult in attendance, and completion of the waiver request form. The licensing authority shall grant the waiver if it receives written approval from the child's parent, guardian, or custodian that the administering of a physical restraint hold without a second trained person present is acceptable, written approval from the supervising agency that the foster parent is authorized to administer a physical restraint hold without a second trained person present, and documentation that there is approval by the child and a family team and documented in the person-centered plan or out-of-home family services agreement that it is acceptable for the foster parent to administer a physical restraint hold without a second trained person present;

(B) immediately terminate the physical restraint hold or adjust the position to ensure that the child's breathing and motor control are not restricted, if at any time during the administration of a physical restraint hold the child complains of being unable to breathe or loses motor control;

(C) immediately seek medical attention for the child, if at any time the child appears to be in distress; and

(D) conduct an interview with the foster child about the incident following the use of a physical restraint hold.

Physical restraints are administered to help the child to regain composure. Once a child ceases struggling, the hold has accomplished its purpose. Once a child starts talking and negotiating, the hold must stop. It is not a contest of wills to show who is right or wrong. It is not a way to show the child who is in charge. A trained foster parent may engage in an approved hold for no more than 15 minutes. Unless the rule is waived, a second trained adult must be in attendance. If the child appears to be in distress in any

way, the hold should stop. If the child expresses any signs of physical distress, the foster parent must seek medical care for the child immediately. If there is not a medical office open, the child should be taken to the emergency room. After the child is calm, the foster parent should conduct an interview or discussion with the child to help the child understand what he did that resulted in a hold being used. A trained foster parent should understand and support these limits. If the foster parent has any questions about these limits, contact the trainer and consider requiring the foster parent to repeat the training.

After applying a hold, the foster parent may need guidance and support from the licensing social worker. Applying a hold to a child is an emotional experience. The licensing social worker should visit the home and give the foster parent time to discuss the incident. The social worker for the child should be informed so she may visit the child. Often a joint visit by the child's social worker and the licensing social worker conveys the seriousness of applying a hold and demonstrates the agency's support of the child and foster parents.

The second person requirement is a safeguard against misuse of physical restraints. Waiving this rule requires careful consideration. The licensing authority may waive the rule if the following conditions are met:

- the child's parent, guardian, or custodian agrees;
- the supervising agency provides documentation the hold can be administered without a second trained person present, and
- the child and family team agrees and it is documented in the person-centered plan or out-of-home family services agreement.

To secure a waiver from this rule, send written documentation of these three agreements to the licensing authority on a waiver request form. The licensing social worker should be in communication with the Licensing Authority as she secures these forms and composes the waiver request.

(7) The supervising agency shall interview the foster parent administering the physical restraint hold about the incident following the use of a physical restraint hold by the supervising agency;

(8) The supervising agency shall document each incident of a child being subjected to a physical restraint hold on an incident report provided by the licensing authority. The incident report shall include:

- (A) the child's name, age, height, and weight;
- (B) the type of hold utilized;
- (C) the duration of the hold;
- (D) the trained foster parent administering the hold;

- (E) the trained foster parent or trained adult witnessing the hold;
- (F) the less restrictive alternatives that were attempted prior to utilizing physical restraint;
- (G) the child's behavior that necessitated the use of physical restraint; and
- (H) whether the child's condition necessitated medical attention.

A physical restraint hold is traumatic for the child and the foster parent. The agency must make sure the child and the foster parent are all right. The agency must determine that the hold was done correctly and used appropriately. This requires the licensing social worker and/or the child's social worker to make an onsite visit as soon as possible. In addition to gathering information for a formal report, a visit allows the social worker to determine that the child, the parent, and the witness have the opportunity to describe what happened and how each person feels about the experience. Once the social worker has assessed the needs of all involved, a report is made to the Licensing Authority.

Physical restraint holds are reported to the Licensing Authority within 72 hours of the hold; the report should be made using the physical restraint form developed by the Licensing Authority.

D. 10A NCAC 70E .1104 CRITERIA FOR THE FAMILY

Foster parents should know about normal child development. They should be physically capable of caring for children. They should also possess the skills necessary to be accurate in administering any medications as well as providing documentation that charts the child's progress. This section of the rules details how an applicant can meet these criteria. The twelve skills listed in this rule are basic skills in working with people. When applied to children in foster care, they create a home environment in which children can heal and thrive.

The licensing social worker should be able to recognize and reinforce these skills in a foster parent applicant. The Licensing Authority requires foster parents to demonstrate each of these skills. The licensing social worker writes a mutual home assessment describing how the applicant has displayed and demonstrated each skill. In addition, the licensing social worker describes the plan for enhancing the skills that have been identified as needing further development.

The language of the twelve skills may be difficult for some applicants to understand. The licensing social worker may have to translate this language so that applicants understand. Foster parent pre-service training covers these twelve skills extensively. Individual family discussions, consultations and home visits are required in order for the licensing social worker to gain insight concerning the applicants' understanding and demonstration of the twelve skills. Applicants should be able to articulate a basic understanding of each skill and be able to recognize areas where they may need help from the agency.

The subsection of this rule reads:

- (a) Foster parents shall be persons whose behaviors, circumstances, and health are conducive to the safety and well-being of children. Foster parents shall be selected on the basis of demonstrating strengths in the skill areas of Subparagraphs (1) through (12) of this Paragraph which permit them to undertake and perform the responsibilities of meeting the needs of children, in providing continuity of care, and in working with the supervising agency. Foster parents shall demonstrate skills in:

- (1) assessing individual and family strengths and needs and building on strengths and meeting needs;

This skill has two components. Identifying your own strengths and needs is the first. Identifying the strengths and needs of another person is the second. Giving a real life example of a strength or need shows that the applicant can assess strengths and needs. Always ask for real life examples. Can the applicant identify another person's skills?

Can the applicant accurately describe his or her own strengths? People who are comfortable with themselves usually have little problem listing strengths.

In discussions with applicants, listen for descriptions of strengths. Open the topic by sharing some of your strengths. Help foster parent applicants list their strengths. Ask the applicants to give examples of when they used certain strengths. As they identify and discuss strengths, inform them that they are practicing the skill of "assessing individual strengths."

Identifying needs is more difficult than listing strengths. We all like to feel competent and capable. To list a need requires admitting we do not have everything necessary. It takes strength to admit a need. Guide the foster parent into this skill by sharing needs that you may have. Once foster parents open up to you, help them understand they are using this skill.

- (2) using and developing effective communication;

Foster parents need to communicate with a variety of people. Social workers, school officials, teachers, therapists, and doctors are just a few of the professionals often involved with children in foster care. Foster parents need good listening skills to understand instructions about how to care for the children in their homes. They need good communication skills to ensure their messages about the child are received and understood as intended. Being aware of basic communication skills and demonstrating these skills assures the licensing social worker and the Licensing Authority that foster parents can use this skill.

Listening skills include non-verbal behaviors. The gestures we make, the way we sit, how fast or how loud we talk, how close we stand, how much eye contact we make, send strong messages. Effective communication assures that the message sent has been received. This is done by paraphrasing back the message and seeking

confirmation. An effective communicator responding to a physician may say, "So Doctor, you want Robbie to get more exercise, take his meds in the evening with food, and get at least eight hours of sleep. Did I get that correct?" A good communicator looks for congruity between verbal and non-verbal messages. If a person is saying he would like peas as he crosses his arms and turns his head from side to side, a good communicator will ask for clarity. The foster parent may do this by asking, "I hear you say 'yes,' but your actions are saying 'no.' Do you really want peas?"

To find out if a person is a good communicator, the licensing social worker should observe the applicant communicating with a variety of people. It is especially important to observe the applicant communicating with children, if possible. If the applicant has not had a lot of experience with children, inquire how they can demonstrate their ability to communicate with children. The explanation will reveal a lot about their communication skills.

(3) identifying the strengths and needs of children placed in the home;

Foster parents must be able to skillfully assess other people's strengths and needs. Without this skill they cannot help children placed in their home. Most of the time, the child placed in a foster home is a stranger to the foster parents. It is unreasonable to expect a child to describe his strengths and needs to the foster parents. The foster parents have to find this out by observing the child's behavior.

Many foster parents have learned this skill by raising their own children. For applicants who do not have children, inquire about their experiences with children. Ask what they have noticed about nieces and nephews at family gatherings. Suggest that they volunteer with church or social clubs.

Applicants need to have experience with children so they can develop the ability to identify strengths and needs of children at various ages. Once the foster parents have assessed the child's strengths and skills, they are ready to plan how to help the child by using their understanding of the child's strengths and needs.

(4) building on children's strengths and meeting the needs of children placed in the home;

Each child is unique. Each has strengths, each has needs. Once foster parents identify these strengths and needs, they can work more effectively with the child. We all enjoy using our strengths. We enjoy the sensation of competence and mastery. Providing a child with opportunities to use his strengths helps him develop his sense of self. Some children come into care believing they cannot do anything well. By engaging such children in activities that use strengths, a foster parent can help the child change his self-image.

We all have a need for security, belonging, and social approval. We need to learn to manage our feelings and to engage with others. Whatever the need, it should first be met at home. Some children come into care with deep unmet needs. The foster home provides a place to have needs met. It also is a place where a child can experiment with

different behaviors to get needs met. By providing opportunities to meet needs, foster parents help the child develop. This requires planning.

The ability to solve problems and to plan for others is an indication of mastery of this skill. Ask foster parents to think of a time when they identified a child's need. Then ask them what they did. This skill is an action skill; the previous skill (2) is the assessing skill. By describing how they solved problems for a child, or planned experiences for a child, the foster parents reveal the extent to which they have mastered this skill.

(5) developing partnerships with children placed in the home, parents or the guardians of the children placed in the home, the supervising agency and the community to develop and carry out plans for permanency;

Foster parents are part of the child welfare team. Like the licensing social worker, foster parents are expected to work with social workers, therapists, physicians, guardians ad litem, birth parents, teachers, and other school officials. They need good social skills to do this. Experience with children and child welfare is not the only way to gain this skill. Help foster parents describe times they were involved in community events. They may have organized activities at places of employment that required working with a wide range of groups. Organizing church events requires this skill. Foster parents are expected to interact successfully in the community.

Foster families are expected to attend child and family team meetings, court, and school meetings on behalf of the child. Ask applicants to describe in detail how they will attend such meetings. This is particularly important if the foster home is a long distance from schools, court or service agencies.

(6) helping children placed in the home develop skills to manage loss and skills to form attachments;

Children in care have suffered the trauma of loss. They have lost daily contact with people they love, such as birth parents, siblings, and extended family. Even if these relationships were abusive or neglectful, the child feels the loss deeply. Some children have lost the relationship with prior foster parents. After continually losing relationships some children learn not to attach to anyone; it just hurts too much. Children in foster care need a place where their losses are recognized and they are helped to grieve. Helping children with grief issues is an important role for foster parents. Foster parents can be taught to use their experience to become more and more expert at helping children with grief. Foster parents, in turn, need help grieving when the child leaves their home.

Foster parents need a firm understanding and appreciation for the stages of normal grieving. It is healthy to go through the stages of grief; problems occur when we get stuck in one of the stages. Recognizing and appreciating the stages of grief helps foster parents better care for children. One model of grieving has five stages: shock/denial; strong feelings (usually anger); bargaining; depression, and acceptance.

Foster parent applicants may not have had to cope with losses involving a child. Ask

them to share with you a time they suffered a significant loss. It may have been the loss of a parent or relative. It may have been the loss of a job. Once they share a loss, ask them to describe what helped them when they were in denial, struggling with strong feelings, bargaining, and depression. Ask them when they realized they had finally accepted the loss. Be wary of people who minimize loss. One unhealthy response to loss is to repress the feelings and to pretend it is resolved. If foster parents have serious unresolved grief issues, they are very likely to resurface when a child is experiencing the grief process in their home.

Help foster parents understand that by using their grief experiences, they can help children deal with their grief. Being able to grieve safely increases the likelihood that children will find the courage to bond with other people.

(7) helping children placed in the home manage their behaviors;

Socialization is the art of changing behavior. We do this to fit into the group. We do this to get what we need. We need security, sustenance and social contact. Parenting can be described as the way we teach our children how to change their behavior to get what they want. To be a foster parent means helping children recognize and change negative behaviors.

Some people will read this skill as how to discipline a child. It is much more than that. This skill speaks to how the parents will help the child fit into their home, feel safe and begin to thrive. It also speaks to how we teach children about feelings and how to express emotions appropriately.

Every family has rules. Foster parents should be able to identify their own rules and be comfortable telling them to others. How will foster parents inform a child of the rules? How will they correct the child's behavior when he does not follow a rule? How will the parent handle situations when the child expresses strong emotions?

Children coming into care may not have been taught about expressing emotions. Frequently they need help to even identify feelings. They may have been in an environment where they were punished for showing feelings. Foster parents are expected to respond to expressions of feelings and to teach a child to express feelings appropriately.

Explore with applicants how they feel about expressions of strong feelings, especially anger. What are the family rules about showing affection? What does a family member do when disappointed? As applicants share what they would do, ask for examples of when they have done this with children. Describe behaviors from the applicant's actual experience in your mutual home assessment.

For applicants who have not had experience working with children, explore with them situations where they have been successful in teaching others how to manage behaviors. If applicants have had supervisory work experience, ask them to share how they dealt with a worker who was not fitting into the team. If applicants have had leadership roles in community organizations, this experience may provide insight into

how applicants help others change their behaviors. It may take intense discussion for applicants to grasp that they have behavior shaping skills that can help children in care. The licensing social worker needs to take the time and effort to help applicants examine and share their abilities and experiences.

- (8) helping children placed in the home maintain and develop relationships that will keep them connected to their pasts.

Each child has a past with people important to him/her. These connections are important. The foster parent is the key to preserving these connections and to helping children forge new ones. Most families have ways of doing this for themselves. Some use life books. Others keep photo albums. Some preserve family letters. All of these items are evidence of being able to do this for a child in care.

There is more to this skill than producing life books. This skill requires the foster parent to reach out and communicate with people important to the child. Foster parents may need to talk with birth parents. They may need to ask for help identifying other family members. In addition to developing documents for children, foster parents give foster children the opportunity to do this for themselves.

Indications of mastery of this skill include the ways that applicants meet this need for their own family. How do they memorialize members of their family? How do they stay in contact with current friends and associates? How can these skills be applied to a child in their care? The answers to these questions will provide information for the licensing social worker to write a viable description of this skill in the mutual home assessment.

- (9) helping children placed in the home build on positive self-concept and positive family, cultural, and racial identity;

Each child comes from somewhere. Each has a cultural and racial identity. Understanding and valuing this identity helps create a positive self-concept. Foster parents help by encouraging children to practice the ways of their “people”.

All families have rituals. Understanding and helping children practice the rituals of their heritage is a valuable and helpful practice. Foster parents are expected to help the child do this.

Ask the applicants how they have helped people of a different heritage honor their traditions. Inquire about important celebrations in their family. Explore how they have honored their cultural and racial background. How the applicants answer these inquiries provides information that may be helpful in writing the mutual home assessment.

- (10) providing a safe and healthy environment for children placed in the home, which keeps them free from harm;

Many children entering care have been inadequately supervised. They may be used to exploring and trying new things. Foster parents need to be alert to dangerous

temptations for children brought into their home. Foster parents who have raised their own children usually understand this skill very quickly.

Applicants who have not parented before may need help with this. Ask foster parents to describe their kitchen. Ask where they keep knives, power appliances, and food cutting utensils. Ask what family rules apply to the use of such items. By asking the applicants to describe each room of the house in terms of child safety, the licensing social worker can get a good sense of how well the applicants have mastered this skill. Secondhand smoke is also a health issue. Foster parents should be willing to protect children from this hazard.

(11) assessing the ways in which providing family foster care or therapeutic foster care affects the family; and

Caring for children in foster care changes the foster family. Before receiving a child, a foster family needs to assess how they will change when they take in a stranger. Most families have gone through major changes (e.g., having a baby, moving to a different part of the country, changing routines or habits due to school or job demands) and so they already have this skill. Assessing how a family has dealt with any major change event provides information about how providing foster care will affect the family.

(12) making an informed decision about whether to provide family foster care or therapeutic foster care.

This skill is about how the family makes decisions. An informed decision is better than one that is uninformed. Unfortunately, some families are comfortable making uninformed decisions. Some families make decisions impetuously. Others make decisions in secret. Some families just let events make the decision for them. Uninformed decision-making usually results in problems and unpleasant consequences. Although this “fixing things later” approach can be exciting and even manageable for some families, it is disastrous for a child in foster care. For the sake of the child an informed decision is best. Supervising agencies must provide prospective foster families with sufficient information about the challenges and expectations of foster parents. Prospective foster families cannot make informed decisions if the information provided by the supervising agency is incomplete.

A family skilled in making informed decisions can describe their process step-by-step. The process includes the opinions and feelings of each member of the family. The decision maker(s) use their assessment skills to determine the strengths and needs of the family and of each family member. An informed decision making process anticipates possible difficulties and proposes ways to handle them. Finally, the process is on-going, continually seeking more information with which to evaluate the decision. An informed decision strives to reduce surprises and problems in the long run.

Most families have made major decisions. Ask the applicants to describe some of the major events in their lives. Ask them to describe their thinking in making the decision. Ask them what they learned from the experience. As they discuss previous decisions, they will provide examples that will indicate whether their decision making process is

systematic and informed.

(b) Age. A license may only be issued to persons 21 years of age and older.

This requirement can be verified by any legal document that states the birth date of the applicants. If in doubt, request to see a certified birth certificate. Under rare circumstances, this rule may be waived for the benefit of a child in care. This occurs most often with relative placements. When requesting an age range that the family can foster remember that in addition to providing a safe and nurturing home for a foster child, a foster family is also a model for the child of what a family is and how a parent /child relationship should function. A young foster parent caring for an older child often will have difficulty with the "parental" role. The minimum age difference requested should be ten years. Contact the licensing authority if more guidance is needed with this requirement.

(c) Health. The foster family shall be in good physical and mental health as evidenced by:

Foster parenting is hard work. Foster parents need to be in good health. Foster parents need to be mobile, have physical stamina and possess good range of motion. They also need to be in good mental health so they can cope and care for children in all types of circumstances. The purpose of the following rules is to assure that foster parents have good physical and mental health sufficient to care for children. Medical History Forms (DSS-5017) and Medical Evaluations (DSS-5156) must be completed on all foster parent applicants and all household members. The licensing social worker is required to discuss any medical issues that have been identified from the medical history and the medical evaluation on the DSS-5016. The licensing social worker is also required to explain how these medical issues affect the family's ability to provide foster care services. The licensing social worker should ask the medical provider for an explanation of anything written on the DSS-5156 that they do not understand.

(1) a medical examination completed by a licensed medical provider on each member of the foster home within the last 12 months prior to the initial licensing application date, and biennially thereafter;

This requirement is met and documented with a completed and signed Medical Evaluation (DSS-5156). The form has a place at the top to list the name of the supervising agency. The date the medical provider signs the form at the bottom is important. It must be within 12 months of the application form being submitted to the Licensing Authority. Many families have annual checkups already scheduled and may wish to use that appointment to meet this requirement. Give them ample time to change the dates of these annual exams to save the cost of an extra visit to get this form completed. When a family's health insurance covers only one medical check up a year, it will save the family substantially if they do not have a second visit within a 12-month period.

The Medical Evaluation (DSS-5156) has spaces for medical provider comments on behavioral health issues/mental health diagnoses. This is the place for the physician to

enter any concerns about alcohol or substance abuse by any member of the family. The form also asks for the medical provider's professional opinion on the suitability of the family to provide foster care. The medical provider may benefit from the information provided by the family on the Medical History Form (DSS-5017). It is recommended that the family complete this form and take it with them to the physician's visit.

It is very important that the Medical Evaluation (DSS-5156) is completed by a medical provider familiar with the family member. It is not acceptable to request that a medical provider who has no knowledge of the medical history of the family member complete the form. The Licensing Authority will not accept Medical Evaluations that state the form has been completed based on the statements of the foster parents or family member, rather than the physician's knowledge of the family.

(2) documentation that each adult member of the household has had a TB skin test or chest x-ray prior to initial licensure unless contraindicated by a licensed medical provider. The foster parents' children are required to be tested only if one or more of the parents test positive for TB;

A TB test is required to complete the medical examination. There is space on the Medical Evaluation (DSS-5156) to record the results. If the family's physician does not wish to do the test, it may be done at a County Public Health Department. Each adult member must be tested and be negative for TB. If any adult in the household tests positive on the skin test, all children must be tested also. If someone tests positive on the skin test, a chest x-ray is required to verify that person does not have tuberculosis.

Occasionally an adult will test positive on a TB skin test and has an x-ray already on file. In these cases, a second x-ray is required unless a licensed medical provider states that an additional x-ray would be harmful to the person's health. Such a declaration needs to be in writing and included with the medical forms. The chest x-ray does not have to be repeated when the family is relicensed.

(3) a medical history form completed on each member of the household at the time of the initial licensing application and on any person who subsequently becomes a member of the household;

The Medical History Form (DSS-5017) must be completed for all family members. The medical histories need to be thorough and accurate. Please note that foster home licenses can be revoked if family members do not disclose health issues. If a household member checks yes to any of the items on the form, an explanation needs to be made in the space provided on the form. Information recorded by the medical provider on the Medical Evaluation (DSS-5156) also needs to be included on the Medical History Form (DSS-5017).

The Medical History Form (DSS-5017) is a good guide for a discussion about health. If a licensing social worker has any concerns or questions about health, they should be addressed before licensing. It is unfortunate for the child and for the family to discover months into a placement that the rigors of fostering are too much for a family member. In such a discussion, it is recommended that the licensing social worker use leading

questions. A leading question is one that presumes a condition exists. Instead of asking, “do you drink cocktails and wine at dinner” the licensing social worker may ask, “How often do you have cocktails or wine with a meal”. If there is a concern with arthritis and mobility issues the licensing social worker may ask, “When your joints hurt while walking, do you ever use a walking stick or a cane”. The information on the Medical History Form (DSS-5017) is important.

(4) no indication of alcohol abuse, drug abuse, or illegal drug use by a member of the foster family;

The foster home licensing social worker can fulfill this rule by conducting a thorough review of the family history. The licensing social worker must inquire about alcohol and drug use (legal and illegal). Ask the applicants and family members directly about their alcohol consumption and drug use. Explore all charges and convictions for DWI. The licensing social worker will need to ask the applicants and family members if they have ever received treatment related to substance abuse. Review the DSS-5017 and DSS-5156 to determine if the family members or medical providers indicated any substance abuse issues. The findings are documented on the Foster Home License Application (DSS-5016).

(5) no indication that a member of the foster family is a perpetrator of domestic violence;

The foster home licensing social worker can fulfill this rule by conducting a thorough family history. The licensing social worker will need to ask the applicants and family members directly if they have ever been involved in domestic violence incidents. Explore all charges and convictions related to domestic violence. If a member of the foster family is a perpetrator of domestic violence, licensure will be denied unless there is a five year have period of time since the last incident and there is compelling evidence that indicates that treatment and rehabilitation have been effective. The findings are then documented on the Foster Home License Application (DSS-5016). A two level staffing decision and a written recommendation from the agency’s executive director must accompany the request for a license if the applicants or household members have been perpetrators of domestic violence.

(6) no indication that a member of the foster family has abused, neglected, or exploited a disabled adult;

The best way to fulfill this rule is by conducting a thorough social history of the adults in the family. The licensing social worker may inquire about how an elderly or disabled person was cared for by the applicants or other household members. A good social history includes a listing of jobs and employment. If any family member worked as a caregiver for adults, gentle probing and inquiry about quality of care can provide sufficient information to determine that there is no indication of abuse, neglect or exploitation of an elderly or disabled person. If a member of the foster family has abused, neglected or exploited a disabled adult licensure will be denied unless there is a five year period of time since the last incident and there is compelling evidence that indicates that treatment and rehabilitation have been effective. The findings are

documented on the Foster Home License Application (DSS-5016). A two level staffing decision and a written recommendation from the agency's executive director must accompany the request for a license if the applicants or household members have abused, neglected or exploited a disabled adult.

(7) no indication that a member of the foster family has been placed on the North Carolina Sex Offender and Public Protection Registry pursuant to Article 27A; Part 2 of G.S. § 14;

The foster home licensing social worker is required to check the sex offender website (<http://sexoffender.ncdoj.gov/>). This site brings up a message from the attorney general. Clicking on the link 'search the registry' on the left side of the page brings up the page for entering the applicant's name in the 'Offender Search' box. Enter the first and last name. Hit the 'enter' key and the results are displayed. Enter these results on the Foster Home License Application (DSS-5016). If a member of the foster family is on the North Carolina Sex Offender and Public Protection Registry licensure will be denied.

(8) no indication that a member of the foster family has been placed on the Health Care Personnel Registry pursuant to G.S. § 131E-256;

The foster home licensing social worker is required to check the Health Care Personnel Registry for each adult member of the family. This is done by accessing the website (<http://www.ncnar.org/nchcpr.html>). On the left side of the Health Registry home page, select "Verify Registry Listings" and then select "Confirmation Numbers" in the list at the center of the page. This brings up a place to enter the social security number(s) to be checked. There is capacity to enter up to twelve numbers. Once all numbers are entered, press the *Enter* key. If any of the social security numbers belong to a person on the registry, that person's information will be displayed. Read the entry to make sure there is no indication of abusing or neglecting someone in his or her care. Enter this information on the Foster Home License Application (DSS-5016).

If a member of the foster family has been placed on the Health Care Personnel Registry licensure will be denied unless there is a five year period of time since the last incident and there is compelling evidence that indicates that treatment and rehabilitation have been effective. A two level staffing decision and a written recommendation from the agency's executive director must accompany the request for a license if the applicants or household members have been placed on the Health Care Personnel Registry.

(9) no indication that a member of the foster family has been found to have abused or neglected a child or has been a respondent in a juvenile court preceding that resulted in the removal of a child or has had child protective services involvement that resulted in the removal of a child.

The foster home licensing social worker can comply with this rule by conducting a thorough family history interview. The licensing social worker must inquire about all children the applicants or household members have parented or if they have ever been employed in a setting serving children (residential child-care, daycare etc.). The licensing social worker will need to ask the applicants directly if they have ever had any

involvement with child protective services or have been part of juvenile court proceedings involving issues related to abuse or neglect of children. The findings are documented on the Foster Home License Application (DSS-5016).

If there are incidents where a member of a foster family has abused or neglected a child or has been a respondent in a juvenile court proceeding that resulted in the removal of a child or has had child protective services involvement that resulted in the removal of a child the foster home licensing worker needs to discuss this with the Licensing Authority.

- (d) Education. Foster parent applicants shall have graduated from high school or received a GED (Graduate Equivalency Diploma) or shall have an ability to read and write as evidenced by their ability to administer medications as prescribed by a licensed medical provider, maintain medication administration logs and maintain progress notes.

Foster parents must be able to read and write. They have to record medications as required for the Medication Administration Record (MAR). They must write notes on a child's progress. They represent the child with schools and community agencies and must understand written information.

An applicant who has earned a high school diploma or its equivalent (GED) is presumed to be able to read and write sufficiently to do these tasks. The licensing social worker verifies this by viewing the diploma or the GED certificate. Applicants who do not have a diploma or GED must demonstrate that they can read and write.

The licensing social worker easily can determine whether an applicant has these necessary minimum literary skills. Make it a standard part of the required home visits to have each responsible adult demonstrate how to make entries on a MAR. Give each person written instructions on medication administration from a pharmacist. Ask that person to tell you how to administer a medication. Ask each person to read and explain a typical letter from a school system informing the parent of appeal rights of a school decision. By incorporating these simple tasks into a standard interview at a required home visit, the licensing social worker can gather evidence that the applicants have these required minimum skills of literacy.

If the foster parent applicant does not have a high school diploma or GED, record fully in the agency's record how you know he or she can read and write. Be specific and detailed so there is a clear understanding the applicant can manage a MAR, make case notes and read letters and documents from professionals.

- (e) Required Applicants. Foster parent applicants who are married are presumed to be co-parents in the same household and both shall complete all licensing requirements. Adults 21 years of age or older, living in currently licensed or newly licensed foster homes who have responsibility for the care, supervision, or discipline of the foster child shall complete all licensing requirements. The supervising agency shall assess each adult's responsibility for the care, supervision, or discipline of the foster child.

The licensing social worker must carefully assess relationships in the family and the role

of any household member who is 21 years of age or older, related to parenting foster children. Married couples and unmarried couples are considered co-parents and must meet all licensing requirements. Boyfriends and girlfriends of single applicants must also be a part of the assessment process. Live-in boyfriends and girlfriends are considered foster parent applicants and must meet all licensing requirements. Boyfriends and girlfriends of applicants who visit the home of the applicant and have contact with foster children are considered other household members and must meet the licensing requirement for other household members. This includes all criminal history and background checks (local court record, NC Department of Corrections Offender Information, NC Sex Offender and Public Protection Registry, Health Care Personnel Registry), fingerprint checks, RIL checks, and medical requirements (DSS-5156 and DSS-5017). These individuals shall sign statements that certify: (1) they are not perpetrators of domestic violence; (2) they have not abused, neglected or exploited a disabled adult; (3) they have not abused or neglected a child or have been a respondent in a juvenile court proceeding that resulted in the removal of a child or have had child protective services involvement that resulted in the removal of a child. These individuals shall also sign a discipline agreement indicating they will not use corporal punishment as a means of disciplining foster children. These signed statements are maintained in the supervising agency's foster home licensing record.

Relatives, friends or other individuals who are 21 years of age or older, living in the home full time, must be thoroughly assessed to determine if they are providing care, supervision and discipline of foster children on an ongoing basis. If they are providing care, supervision and discipline on an ongoing basis they must meet all licensing requirements. If they occasionally assist foster parents with the care, supervision and discipline of foster children they should be considered as other household members. Adults who are considered other household members must meet all criminal history and background checks (local court record, NC Department of Corrections Offender Information, NC Sex Offender and Public Protection Registry, Health Care Personnel Registry), fingerprint checks, RIL checks, and medical requirements (DSS-5156 and DSS-5017). These individuals shall sign statements that certify: (1) they are not perpetrators of domestic violence; (2) they have not abused, neglected or exploited a disabled adult; (3) they have not abused or neglected a child or have been a respondent in a juvenile court proceeding that resulted in the removal of a child or have had child protective services involvement that resulted in the removal of a child. These individuals must also sign a discipline agreement indicating they will not use corporal punishment as a means of disciplining foster children. These signed statements are maintained in the supervising agency's foster home licensing record.

When a spouse is out of the home for extended periods of time, such as a member of the armed services who is deployed, the licensing social worker may request (of the Licensing Authority) that consideration be given to listing this spouse as a household member rather than a foster parent until he/she returns. When such approval is granted the spouse must immediately begin the process to license when he/she returns to the home. If a household member is living in the foster home because they need care themselves, this should be explained in the cover memo.

The agency/foster parent agreement addresses the requirement of notifying the

supervising agency when someone moves into or out of the home. The supervising agency in turn should notify the Licensing Authority by means of submitting a Foster Home Change Request Application (DSS-5159) indicating this. When the family has someone who is a frequent guest in the home they should discuss this occurrence with the supervising agency. The licensing social worker should discuss in pre-service training and throughout the process that single foster parents should make the supervising agency aware of people who are in frequent contact with foster children. Background checks should be done on dating partners who are in the home and in contact with foster children on a regular basis whether or not they spend the night in the home. Licensing social workers should have open and honest discussions with applicants and single foster parents who may want to date different people and help them to assess whether the timing is right for them to foster.

The supervising agency must include anyone 18 years of age or older in the home on the DSS-5016 and provide the following documents on them: fingerprint clearance letters, local background checks (local court record, NC Department of Corrections Offender Information, NC Sex Offender and Public Protection Registry, Health Care Personnel Registry), RIL checks (DSS-5268), physicals (DSS-5156) medical histories (DSS-5017). The supervising agency must add their names to the DSS-5015 as a household member. These individuals shall sign statements that certify: (1) they are not perpetrators of domestic violence; (2) they have not abused, neglected or exploited a disabled adult; (3) they have not abused or neglected a child or have been a respondent in a juvenile court proceeding that resulted in the removal of a child or have had child protective services involvement that resulted in the removal of a child. These signed statements are maintained in the supervising agency's foster home licensing record.

Foster parents must receive approval from their supervising agency before moving anyone into their home. Foster parents need to understand that moving individuals into their home without the approval of their supervising agency can result in the revocation of their foster home license. Supervising agencies may give approval for children to move into the home if the following conditions are met: (1) there is adequate space for the additional children; (2) the additional children will not put the foster home over capacity; (3) a 5017 is completed on the children; (4) a 5156 is completed on the children; (5) an assessment is made that the foster parents have the ability and stamina to care for additional children. Supervising agencies may give approval for adults to move into the home if the following conditions are met: (1) there is adequate space for these individuals without compromising the space of foster children; (2) all the requirements for a household member have been completed (see next paragraph for these requirements).

If someone 18 years of age or older is given approval to move into the home or if someone in the home turns 18 they must be added to the DSS-5015 and a change request (DSS-5159) must be submitted on them. This change request must be accompanied by the same documents mentioned for an initial application {fingerprint clearance letters, local background checks (local court record, NC Department of Corrections Offender Information, NC Sex Offender and Public Protection Registry, Health Care Personnel Registry), RIL checks (DSS-5268), physicals (DSS-5156), medical histories (DSS-5017)}. These individuals shall sign statements that certify:

(1) they are not perpetrators of domestic violence; (2) they have not abused, neglected or exploited a disabled adult; (3) they have not abused or neglected a child or have been a respondent in a juvenile court proceeding that resulted in the removal of a child or have had child protective services involvement that resulted in the removal of a child. These signed statements are maintained in the supervising agency's foster home licensing record.

Foster parents are responsible for the care, supervision, discipline and safety of foster children placed in their homes. Foster parents must have the ability to make judgments and critical decisions concerning the appropriateness and safety of other individuals who come into contact with foster children. This includes relatives, friends, boyfriends, girlfriends, neighbors, babysitters, visitors, etc. Supervising agencies are responsible for selecting foster parents who are capable of making these judgments and critical decisions.

E. 10A NCAC 70E .1105 CONFLICT OF INTEREST

Rules are only as effective as the integrity of the people implementing them. Fair, equal, and accurate administration of rules increases compliance and support of rules. Local administration of Foster Home Licensing rules must be beyond suspicion and beyond appearance of conflict of interest.

Avoiding conflicts of interest protects the foster parent as well as supervising agency staff. Making licensing decisions on the families of agency board members or county commissioners can be tense and uncomfortable. As careful as a licensing social worker may be, there always will be suspicions of preferential treatment.

The following rules strictly define conflict of interest situations an agency must avoid. If any of the listed members wish to be foster parents, they will need to pursue this goal with another supervising agency.

- (a) County departments of social services and private child-placing agencies shall not supervise foster homes of members of their board of directors, governance structure, social services board, and county commission.

Members of boards of directors, social services boards, and county boards of commissioners have power and authority over the head of the supervising agency. These boards also control approval of the budget. If any member of any of these boards wishes to be licensed as a foster home, he or she should be referred to another department of social services or another licensed child-placing agency approved to supervise foster homes. Once the referral is made, the licensing social worker should have no more involvement in the matter.

- (b) County departments of social services and private child-placing agencies shall not supervise foster homes of agency employees and relatives of agency employees. Relatives include birth and adoptive parents, blood and half blood relative and adoptive relative including brother, sister grandparent, great-grandparent, great-great grandparent, uncle, aunt, great-uncle, great-aunt, great-

great uncle, great-great aunt, nephew, niece, first cousin, stepparent, stepbrother, stepsister and the spouse of each of these relatives.

Supervising agency employees may not be foster parents for their agency. This prohibition extends to employee's family and extended family members. Agency employees and their family members who wish to be licensed as foster parents should be referred to another county department of social services or another licensed child-placing agency approved to supervise foster homes. Once the referral is made, the licensing social worker should have no more involvement in the matter.

(c) Private child-placing agencies shall not supervise foster homes of their agency owners.

Owners of private child-placing agencies may not be licensed as foster parents by their own agency. Agency owners who wish to become foster parents should be referred to a county department of social services or another licensed child-placing agency approved to supervise foster homes. Once the referral is made, the licensing social worker should have no more involvement in the matter.

A licensing social worker may anticipate conflicts of interest before they occur. If the agency or the owner does not have a written policy on how to handle applicants who have a conflict of interest with the agency, it is good practice for the licensing social worker to recommend that such a policy be written and adopted. Such a policy helps the licensing social worker and the agency as a whole by reducing confusion and delays when conflicting situations occur.

F. 10A NCAC 70E .1106 DAYCARE CENTER OPERATIONS

Foster parents may wish to provide child day care services in addition to foster care. This is allowed, within limits. The purpose of foster care is to provide a safe and nurturing environment for a child in care. Providing child day care must not conflict with this purpose.

In-home day care is an arrangement in which the day care provider uses her home to care for children. In-home daycare is permitted in family foster homes. However the capacity of the in-home daycare (number specified on the in-home daycare license) must be counted in the total capacity for the foster home. Therapeutic foster parents are not allowed to provide in-home daycare.

Some homes have attached rooms that are used exclusively for child day care and are separate from the living quarters of the home. Under certain conditions, this type of child care operation is allowed. Some day care centers operate in a free standing building separate from the foster parent's house. Within certain limits, foster parents may operate free standing day care centers.

The overall principle is that day care operations may not impinge on children in foster care. The following rules apply to all types of child day care.

The subsections of this rule read:

- (1) the foster home living quarters shall not be part of the day care operation;

No part of the foster home space may be used for child day care operations. Children served by the day care center may not have access to the spaces set aside for the family and the child in foster care. This means that the day care must be able to operate independently of the foster home. The day care center must have its own toilet facilities, water, cooking appliances, clean up equipment, refrigeration, and communications ability. The playground must be separate from the outside areas of the home used by the family. If there is a door in the day care area accessing the foster family living area, it must be secure so that no day care client or staff may inadvertently leave the day care area and go into the family living area. It is recommended that such a door be locked.

Foster parents who wish to operate a day care in a space attached to their home may need guidance in understanding the degree of separation intended by this rule. Ask the applicants to imagine that their living space suddenly disappeared. Could the day care operation continue uninterrupted? If not, then the day care operation does not meet the requirement of this rule.

- (2) there shall be a separate entrance to the day care operation; and

The day care operation can be accessed only from the outside of the foster home. This rule assures that no part of the foster home living quarters is used for child day care purposes. This rule also encourages foster parents to be aware that the day care is a separate operation. By having a separate entrance, the delineation between the day care realm and the foster home realm are clearly marked.

- (3) staff specified in day care center rules shall be available to provide care for the day care children.

Foster parents who work providing day care must be very clear when they are working in the day care operation and when they are at home available to children in foster care. The foster parent may not fulfill both roles simultaneously. If the foster parent leaves the day care operation, the foster parent is considered unavailable to the children in day care. If the foster parent is on duty in the day care center, then that foster parent is unavailable to the child in foster care. When the foster parent is working in the day care, some other qualified member of the family must be in the home to supervise the child in foster care.

To help foster parents understand what this rule requires, a licensing social worker might ask the foster parent working in a day care operation attached to the home or in a separate center on the property to imagine that the foster home is a 15-minute drive from the day care center.

When a foster parent also operates a day care, it is recommended that the foster parent keep detailed time records listing when acting as a day care worker and when acting as a foster parent. During times when the foster parent is a day care worker, it is important

that someone else supervise the children in the home.

G. 10A NCAC 70E .1107 RELATIONSHIP TO THE SUPERVISING AGENCY

Successful foster families develop and maintain a close working relationship with the supervising agency. Children placed in such homes are more likely to experience successful placements and successful lives. The way licensing social workers handle the licensing process sets the tone for the relationship. The following principles of partnership are good guides for the licensing social worker to follow as they develop a productive relationship with foster families:

1. Everyone desires respect
2. Everyone wants to be heard
3. Everyone has strengths
4. Judgments can wait
5. Partners share power
6. Partnership is a process

Foster parents deserve respect. An effective way to show respect is to listen. Instead of beginning a session with a foster family with a long list of items to cover, the effective licensing social worker slows down, asks open-ended questions, and encourages family members to talk. Giving time and attention shows respect.

Respect also acknowledges strengths. Licensing social workers gain cooperation from foster families by recognizing what has been done well and what the family has accomplished with the child. Likewise, recognizing families for the effort they have made to become licensed increases their willingness to actively contribute to the licensing and relicensing processes.

Partners do not judge each other. Partners share concerns and ask each other for help. Keeping an open mind and identifying strengths is more motivating than listing failures and things undone.

Sharing power with partners starts with sharing information. Partners trust each other. The licensing social worker shares power by sharing the difficulties as well as the successes of fostering. Partners do not try to protect each other from harsh realities, but share information so each can be prepared. The training of potential foster parents should include honest and candid discussions about behaviors that they may encounter with children in care. This conveys respect for the foster parents and their ability to make informed decisions.

Building a partnership takes time and requires time, attention, and faith. Yet it is well worth the effort. Modeling true partnership with foster parents gives them a clear example to follow as they work with other providers and the families of children in care.

This rule specifies certain areas where partnership is imperative.

(a) Foster parents shall agree to work with the supervising agency in the following ways:

(1) work with the child and the child's parent(s) or guardian(s) in the placement process, reunification process, adoption process, or any change of placement process;

Children should not grow up in foster care. The goal for every child in care is permanency, either through reunification with his birth family or through adoption. Foster parents are expected to work with a wide range of people in pursuit of these goals, including Departments of Social Services social workers, mental health professionals, medical providers, and others. In many cases, the foster parents will work with guardians ad litem (GAL). These trained agents of the court check up on children and make recommendations to the court on their behalf. Encourage foster parents to get to know their children's GALs and to cooperate with them.

Foster families are part of the professional team serving children in foster care and their families. They are expected to help implement the plan of care for the child, even if they have mixed feelings about the goal.

For many children in care, the Juvenile Court oversees the placement and approves the plan of care. The court reviews the plan on a periodic basis. Foster parents have a right to be notified of court proceedings and should be encouraged to attend. Many foster families have a hard time when the court orders children to return to their birth families. At these times, foster families may benefit from a visit from their licensing social worker. Feelings may be raw and the family may need a friendly person to listen and empathize.

(2) consult with social workers, mental health personnel, licensed medical providers, and other persons authorized by the child's parent(s), guardian(s) or custodian who are involved with the child;

Successful foster parents use a variety of professionals as consultants. As a member of a professional team trying to reunite the child with his family, the successful foster parent seeks out advice and guidance. As a team member, the foster parents work to keep all members informed and up to date about the child's progress.

(3) maintain confidentiality regarding children and their parent(s) or guardian(s);

Although many parents enjoy sharing information about their children, foster parents may share information about children in foster care only with people involved in the child's plan of care. Foster parents need help learning the limits and range of this restriction.

Families often find it helpful to develop scripts for use in conversation. For example, if a friend of the foster family asks whether the child was abused or neglected an appropriate scripted reply may be to say, "Many children in care have been abused

or neglected. Suffice it to say that this child has had some difficult experiences. Of course, I am not at liberty to share details. I know you understand.”

Some foster parents may be so conscientious that they will not tell anyone anything about the child. Foster parents may need guidance on what to share with school, medical, and with mental health personnel. Make sure your foster families feel free to seek guidance on this issue.

- (4) keep records regarding the child’s illnesses, behaviors, social needs, educational needs, and family visits and contacts; and report to the supervising agency any changes as required by 10A NCAC 70E .0902 (Agency Foster Parents’ Agreement)

Maintaining accurate records enhances communication and cooperation among team members. Effective foster parents keep good records. In addition to illnesses, behaviors, needs and family contacts, foster parents should be encouraged to record strengths and accomplishments. The licensing social worker can aid in this task by providing a variety of examples and materials on record keeping. From simple check sheets to sophisticated automated computer logs, any aid given to the foster parent helps. Take time to help the foster family set up a record keeping system. Help them ensure record confidentiality. Show them how to record when information is shared with other team members. Record keeping is a great way to show the child’s progress and foster parent efforts. When visiting in the home, licensing social workers should review the record keeping. This is a quick and effective way to reinforce foster parent record keeping efforts.

- (5) report to the supervising agency any changes as required by 10A NCAC 70E. 0902

Foster parents are required to report any changes in the household situation such as address, employment, and household composition. Changes in family status such as a significant change in financial resources or loss of employment must be reported. The family must keep the supervising agency informed of any major family events such as a marriage, death or pregnancy of a family member. The family must inform the supervising agency if a household member is charged with or convicted of a crime while they are licensed. They must inform the agency if someone in the family suffers a serious physical illness or a mental illness, including the deterioration from a known physical or mental health condition. Foster parents must report this information to their supervising agency within 72 hours of the occurrence. The supervising agency must report this information to the Licensing Authority on the Foster Home Change Request Application (DSS-5159) within five business days.

The foster parents must inform the agency any time a significant event occurs involving the child in their care. The agency needs to know if the child suffers any accidents, illnesses, major health crises, or trips to the hospital or medical providers. In addition, encourage foster parents to keep the agency informed about any of the child’s major accomplishments. By encouraging the family to report accomplishments, you provide evidence of strengths upon which to build the therapeutic relationship.

Help the foster family set up procedures for reporting. The easier the reporting process, the more likely it is to be used. Inform the family of agency protocols about leaving confidential messages. Encrypt e-mails to guard against accidental breaches of confidentiality. Establish strict safeguards before using text messaging and tweeting. By making reporting easy and routine, the foster family is acknowledged as a vital member of the agency treatment process.

- (b) In addition to Subparagraphs (a)(1) through (5) of this Rule, foster parents who provide therapeutic foster care services shall:
- (1) be trained as set out in 10A NCAC 70E .1117; and
 - (2) allow weekly supervision and support from a qualified professional as defined in 10A NCAC 27G .0104 and 10A NCAC 27G .0203.

The major difference between a family foster home and a therapeutic foster home is the needs of the children placed in the home. Children who need therapeutic care have severe emotional and psychological needs that require intensive supervision and intervention by the foster parents. Often this level of care requires someone to be with the child all the time.

Therapeutic foster parents must meet all the requirements to be licensed as a family foster home. In addition, they must complete ten hours of training in behavioral mental health treatment services before they may be licensed. These requirements are outlined in 10A NCAC 70E .1117.

Therapeutic foster parents must agree to a minimum of 60 minutes of weekly supervision and support by a qualified professional for each foster child placed in their home. During these visits the qualified professional meets with each foster parent and reviews the progress of the child's treatment, reviews the foster parent's performance, and provides support, guidance, and training to the foster parents. At a minimum sixty percent (60%) of the weekly supervision sessions for each therapeutic foster child placed in the foster home shall be face-to-face contacts with each foster parent. At a minimum the required supervision sessions shall take place twice per month in the foster home.

Some family foster parents ask why they are not licensed at the therapeutic level. Such inquiries often come after a crisis with a child or after a period of difficulty. Licensing social workers can respond to this question by reviewing these additional requirements; if appropriate, point out that the child currently in the family foster care parents' home does not require intensive, therapeutic care on an ongoing basis. In addition, review capacity rules with the family, pointing out that while family foster homes may provide care for up to five children if there are no other children in the home, therapeutic foster homes may provide care for only two children who require intensive therapeutic care. It is a good idea to address the distinction between family and therapeutic foster care during pre-service training.

H. 10A NCAC 70E .1108 FIRE AND BUILDING SAFETY

For a foster family, the local fire inspector is the authority on home and child safety. Foster families are expected to maintain the house and its attached buildings in the

same safe condition as when the house was built. If the licensing social worker has any doubt about the safety of an item or condition of the home, he or she should consult the building codes in force when the house was built. Local county building inspectors are a good resource for such inquiries.

If a local fire inspector checks no to any questions on the Fire Inspection Report (DSS-1515) the Licensing Authority will not license the home until the fire inspector documents that the situation has been corrected. Even when items are marked yes, any suggestions for corrections made by the fire inspector must be addressed in order for the Licensing Authority to approve the license.

An effective licensing social worker establishes a good working relationship with the local fire inspectors. They inspect foster homes as a courtesy; it is an extra duty over and above their regular fire fighting duties. Help the foster parent prepare for the visit. Make sure the foster parent is home for the inspection. It is also a good idea for the licensing social worker to be present during the inspection. Some fire inspectors train licensing social workers to prepare the home for the official visit. At a minimum, licensing social workers need to be proficient in the eight areas of the Fire Inspection Report (DSS-1515).

The subsections of this rule read:

- (a) *Each foster home shall be in compliance with all applicable portions of the NC Residential Code in effect at the time the foster home was constructed or last renovated. Information regarding the purchase of all applicable volumes of The North Carolina State Residential Code and referenced standards and codes, can be accessed by reviewing the following web site: (<http://www.ncdoi.com> - select "Code Services", and the select "Code Book Sales") or calling the Code Section within the Department of Insurance at 919-661-5880.*

This rule requires the home to meet building codes at the time of construction. If the licensing social worker notices something out of order, refer to the building code in force when the home was built. Seek help from the local county building inspectors' office or review the website above or contact the Department of Insurance at 919-661-5880.

- (b) All homes shall be protected from all fire hazards including the following:
(1) all hallways, doorways, entrances, ramps, steps, and corridors shall be kept clear and unobstructed at all times;

This usually means that there is at least 36 inches of clear corridor space. It is best that all hallways, doorways, entrances, ramps, stairs, and corridors are kept clear. This may be a problem with houses that have a small room at the back door of the house. These 'mud rooms' tend to get cluttered over time. Walk through the house to make sure all walkways are clear.

- (2) an evacuation plan shall be developed, and all persons in the home shall be knowledgeable of the plan;

This plan describes what to do in case of fire or emergency evacuation. It should cover each room of the house. Ideally, there will be at least two ways to exit the house from every room. If windows are used, the plan should describe how to open and get out of the window. The plan should describe how to use special fire ladders or steps if necessary. As the licensing social worker helps the family develop this plan, it is helpful to review or develop rules of the house. Since each room must be included in the plan, ask the family what rules apply to the rooms. The evacuation plan should include a diagram that shows how to exit the house; this diagram must be posted where each family member can see it.

(3) a mounted "ABC" fire extinguisher with a rating not less than 1-A shall be installed and readily available in the residence;

Every house should have a fire extinguisher available for emergencies. Make a list of stores in the area that carry fire extinguishers. Set a date with the family to inspect the installation of the extinguisher; this inspection is a good time to review the evacuation plan to ensure everyone knows when and how to use the extinguisher and when and how to vacate the house.

(4) homes built prior to July 1975 shall have a battery or electric smoke alarm installed outside every sleeping area. Homes built between July 1975 and June 30, 1999, shall have electric smoke alarms placed outside sleeping areas as required by the NC Residential Code in effect at construction time. Homes built after June 30, 1999 shall have smoke alarms in every sleeping room, outside bedrooms and other areas, interconnected as required in the NC Residential Code;

No home can be licensed unless it has operating smoke alarms near or in the bedrooms. If the home has battery-powered alarms, ask when the family checks the batteries. If they wait until the alarm beeps due to low battery, ask to see where the spares are stored.

(5) a Carbon Monoxide (CO) detector shall be installed in homes that use fuel oil products, coal, wood or gas to heat, cool, cook, operate a hot water heater or gas logs;

Only all-electric homes do not need a carbon monoxide detector. Make sure the family understands that CO has no smell and is invisible. Press the appropriate button on the carbon monoxide detector to ensure it is functioning properly.

(6) all homes shall have telephone service;

With children in foster care, it is imperative to be able to call for assistance at all times. A telephone is a necessity for a foster family, not merely a convenience. The safest, most reliable phone is a landline phone. Such phones work when the electric power goes out. If the family uses an internet or computer-based phone, inquire about backup batteries. If the family uses cell phones for emergency communication, ask the family to show you the charger and to explain where they

will charge the phone if the power is out. Cell phones usually are in the possession of one person and go with that person when they leave the home. A working phone must be available and accessible (everyone knows where it is) to everyone in the home. The phone should be in a place where it can be located easily in an emergency.

(7) no egress door shall have a double keyed dead bolt; and

For fire safety reasons, all doors designated, as an exit to the outside must be able to be opened without using a key. This rule does not prohibit deadbolts; deadbolts are great security and recommended. However, if the family has a deadbolt on a designated exit door with a key lock on the inside, it must be changed to a thumb latch. The door must be able to be opened from the inside without the key.

(8) extension cords shall not be used as a substitute for permanent wiring. Extension cords shall be used only for portable appliances and shall be listed by Underwriters Laboratory (UL).

Electricity can cause a fire. Trying to draw too much current through a small wire causes the wire to heat up and catch things on fire. Extension cords are not designed to carry a lot of current. Using extension cords for permanent wiring is hazardous. If extension cords are being used, ask the family where the appliance is stored when not in use. Coffee pots, space heaters, and other appliances that produce heat pull a lot of current. These items should never be used with extension cords. Sometimes electronic devices such as computers, printers, monitors, and televisions are plugged into the same wall outlet. This can overload the wiring in the wall and cause a fire. A safer alternative is a power strip with a built-in fuse or circuit breaker. When in doubt about the safety of wiring, ask the fire marshal.

Additionally this rule states:

Before a home is licensed, it shall be inspected and receive a passing rating on the fire and building safety inspection report completed by the local fire inspector. Before a home is relicensed, it shall have a current fire and building safety inspection report with a passing rating completed by the local fire inspector.

A local fire inspector must inspect a foster home prior to initial licensing and at relicensure. The licensing social worker is responsible for fire and safety oversight; visiting the home at least twice per year. One important activity to perform during these visits is a safety inspection to ensure these eight requirements are being met.

I. 10A NCAC 70E .1109 HEALTH REGULATIONS

This rule pertains to basic home sanitation. It requires specific visits, conversations, and documents on this subject. These visits and conversations must occur before sending off the packet of materials recommending that the home be licensed. Unless the licensing social worker is satisfied that there is clean running water and sanitary toilet and bathing facilities inside the house, the home should not be recommended for

licensure.

To comply with this rule, the foster home licensing social worker must observe the home. The worker should see the water running from the tap. If the worker has doubts about drinking the water coming from the tap, the home should not be recommended for licensing. The worker should flush the toilet to verify that it functions properly. The worker should see the bathing area, turn on the water, and ensure the drain works.

Licensing social workers should document their observations about the basic sanitation of the foster home using the Foster Home Environmental Conditions Report (DSS-5150). Item 11 on the form provides a place to document that these conversations and observations have taken place. Further documentation, if applicable, should be added on the back of the form. It is recommended that the worker document exactly how the foster parent was asked about water quality, health hazards, and testing. The Licensing Authority relies solely on the professional observation and judgment of the licensing social worker to assure that children in foster care have safe water and sanitary toilet and bathing facilities.

This rule reads as follows:

The supervising agency shall have a discussion regarding water quality and sanitation with the applicants. The supervising agency shall document the date the discussion was held and include a statement that the family is not aware of any health hazards caused by the family's water and sanitation facilities. The supervising agency shall ask the family about water testing that has been done and any immediate or past problems concerning water quality and sanitation. As part of the on-site visit, the supervising agency shall observe that the home has running water. As part of the on-site visit, the supervising agency shall observe that the home has a sanitary toilet and bathing facility. Licensure of a foster home shall not be recommended if the supervising agency has any reason to believe the water supply is not safe or the toilet and bathing facilities are not sanitary.

It is important to ask the foster parents about the quality of their water supply and sanitation facilities. Even homes in prosperous suburban neighborhoods have water and sewer problems. Ask specifically if the applicants have ever had any concerns about health hazards caused by water and sanitation facilities. Ask the applicants if they drink the tap water. Ask for a glass of water. If you have any hesitation about drinking it, the home is not acceptable for children in care. Ask the family if they have ever had their water tested. If they have, ask for their reasons. Ask about the findings of the testing. Consider checking with the county health department about water concerns in the neighborhood.

Personally view the bathing and toilet areas. This should already have been checked by the building inspector to make sure the space is properly vented. Flush the toilet. Turn on the water in the washbasin. Turn on the water in the bathing area. The water should drain faster than the water comes out of the tap. If the water builds up in the basin, the

drains need to be cleaned.

Be specific in documenting this item. Document the date of the conversation on the DSS-5150; write the questions asked and the answers received on the back of the form. As the person responsible for assuring that the children in care have safe water and sanitary toilet and bathing facilities, the licensing social worker must sign this document.

J. 10A NCAC 70E .1110 ENVIRONMENTAL REGULATIONS

The primary goal of environmental regulations is to ensure the environment is as safe as possible for children. These are minimum standards that must be complied with strictly at all times. Ensure the family understands that these regulations are ongoing and they are expected to maintain the home at this level. Compliance with this rule is recorded on the Environmental Conditions Report (DSS-5150). The licensing social worker signs this form as evidence that each item has been checked and addressed. The applicants also sign this form, verifying that they understand and agree to comply with each item. It also is a good time to recheck items listed on the Fire Inspection Report (DSS-1515). Use the time to review what the applicants can expect when an unfamiliar child comes to live in their home.

The subsections of this rule read:

(a) The home and yard shall be maintained and repaired so that they are not hazardous to the children in care.

The licensing social worker should go through the entire house with an eye for what may injure a child. In the kitchen, open cabinets and drawers. Note how sharp items such as knives and slicers are stored. Determine if cleaning materials are stored in a safe and secure place. Ask about pest control. How does the family keep the kitchen free of ants and mice?

Inspect the living area for potential hazards, including decorations. Ask whether it is permissible to touch and handle items on display. If not, ask how they will inform children of the rules. Is there a desk or family office? Are there letter openers, supplies, and other office items visible? May a child use these without permission? Inspect each bedroom for tempting, potentially dangerous items. Check each bathroom to make sure all sharp items are secure. Ensure dangerous chemicals are secure.

When the review of the house is completed, share the results with the applicants. Describe what the family has done to make their home safe for children. Discuss what needs to be changed. Answer questions about the inside of the house before proceeding to the outside spaces.

Begin the inspection of the yard by asking the applicants to identify possible dangers to a child in the yard. If they fail to see what you believe is a danger, ask the parents what they think about the situation that concerns you. For example, there may be gardening tools stored by the house. Ask the parents if they think access to rakes, shovels, and pruning shears are safe for children under six years of age.

If children are to play outside for a period of time consistent with their age, the yard must be safe from danger. Some of the obvious dangers, such as rusty items left in the yard, broken swing sets, and swimming pools require correcting. Any access to water must be restricted. Rule .1112 provides detailed instruction.

(b) The house shall be kept free of uncontrolled rodents and insects.

Ask the family how it keeps the house free of insects and rodents. In North Carolina, a structure that is left without protection quickly becomes infested. If the home does not have an exterminator service, ask the family to describe what they do to keep insects and rodents out of the house.

(c) Windows and doors used for ventilation shall be screened.

Check all windows and doors that open to the outside to make sure the screens are secure and in good repair. This is an important measure to keep out insects. On the second floor, screens reduce the danger of accidentally falling out. If the windows do not open, they do not have to have screens on them.

(d) The kitchen shall be equipped with an operable stove and refrigerator, running water and eating, cooking, and drinking utensils to accommodate the household members. The eating, cooking, and drinking utensils shall be cleaned and stored after each use.

Check the kitchen to make sure it is adequate to prepare food and clean utensils used for preparation, cooking, eating, and drinking. Licensing social workers should do this while they check the kitchen for safety. Turn on the stove. Check the oven. Turn on the water in the sink. Open the dishwasher. Inspect the refrigerator. All these appliances must be clean and in working order. Check the cupboards and the drawers. Make sure plates, cups, glasses, and utensils are clean and properly stored. If you would not eat a meal using the utensils, the kitchen does not meet this requirement.

(e) Household equipment and furniture shall be in good repair.

Check all furniture and equipment to make sure they are in good repair. Look for broken furniture that may have sharp edges. Look for torn cushions and appliances with broken wiring. Use the home tour to look for such items. If items are not in good repair, ask the family to discard them.

(f) Flammable and poisonous substances, medications, and cleaning materials shall be stored out of the reach of children placed for foster care.

This rule covers any material that may be dangerous to a child. Read the label. If it advises keeping out of reach of children, it is covered by this rule. This includes medications used by any member of the family. If family members wish to maintain their own medications, the medications must be secure from children in foster care.

The best way to meet this rule is for all such substances to be under lock and key. Encourage the applicants to consider using medication procedures as a guide on how to manage this rule.

(g) Explosive materials, ammunition, and firearms shall each be stored separately, in locked places.

Any explosive material, such as gunpowder, dynamite, or any item listed on the US Department of Treasury Bureau of Alcohol, Tobacco, and Firearms' "Commerce In Explosives List" must be kept in a locked place. Although foster families may keep legal explosives, it is advised that they not keep such substances in the home. Advise applicants to conduct any activity involving such items off premises.

Firearms must be kept securely locked. If the owner wishes to enhance the security of the firearm by using a trigger lock, this is commendable. The minimum requirement is that the firearm, with or without a trigger guard, be locked up. Ammunition for the firearm must be locked up and stored separately from the firearm. If a gun cabinet is used to store both firearm and ammunition, the cabinet must have separate locked areas for the firearm and the ammunition. It is recommended that foster families not keep firearms in the home.

(h) Documentation that household pets have been vaccinated for rabies shall be maintained by the foster parents.

All household pets must be vaccinated against rabies as recommended by a licensed veterinarian. North Carolina law requires dogs and cats to be vaccinated. Farm animals that the child may come into contact with should be vaccinated against rabies if they are susceptible to rabies; a veterinarian can provide a list of animals that can contract rabies. It is recommended that any exotic pet be inspected by a licensed veterinarian and certified not to be hazardous to children. It is recommended that dogs be declared safe around children by a licensed veterinarian or recognized canine trainer.

When the safety of pets is assessed the licensing social worker should work closely with the foster family to safeguard foster children and to help the family assess the risk themselves. The licensing social worker should discuss with the family that the history of the child in relation to animals will probably be unknown and close supervision will be needed. Foster children may be afraid of animals and may have had no training in how to treat an animal so that their addition to the home may affect the usual behavior of the pet. The licensing social worker should consider as a part of the assessment how many pets the family has, how large they are and what their potential for causing harm may be. Small dogs may be just as vicious as large dogs but will have less potential for serious harm. The risk of harm goes up with the number of animals. The family should have a plan acceptable to the licensing social worker and the agency for the introduction of the pet to a child and the continued supervision of their interaction.

(l) Each home shall have heating, air-cooling, or ventilating capability to maintain a range between 65° F (18.3° C) and 85° F (29.4° C).

Each individual foster home should determine its method of heating and cooling. The Licensing Authority does not prescribe any type of heating or cooling for a foster home. The licensing social worker should have a clear understanding of how the home is heated and cooled. The method should be consistent with the climate. In the western part of the state, no cooling may be needed for the summers are not overly hot. In the eastern part of the state, space heaters may be all that is needed to warm a home in the winter. The key to this rule is, regardless of methods used, the home is to be kept at the comfort range of at least 65° Fahrenheit and no more than 85° Fahrenheit.

(j) Rooms including toilets, baths, and kitchens without operable windows, shall have mechanical ventilation to the outside.

Most homes built since 1980 have a ventilation fan in the bathrooms and kitchens as required by building codes. In some situations, these rooms do not have natural ventilation from a window. When toilets, bathrooms, and kitchens do not have natural ventilation, mechanical ventilation is required. This is because unvented kitchens and bathrooms build up residue when not ventilated. Such residue breeds molds and unhealthy bacteria. Check to make sure the ventilation fan operates in these spaces.

These requirements are ongoing and should be checked regularly. Any failure to comply with this rule must be corrected immediately. Environmental safety is a basic tenet of foster care.

K. 10A NCAC 70E .1111 ROOM ARRANGEMENTS

Children require space, they need space to sleep, relax, eat and be with other family members. They need space of their own where they know their belongings and privacy will be safe. Foster parent applicants provide additional living space in their home for children in care. This space is in addition to the space used when they do not have children in care. This space is in five distinct areas: family space, cooking space, dining space, sleeping space, and personal space. Each child in care needs space in each of these five areas.

Taking in a child in care is not like an extended sleepover or having a guest stay a few nights at holiday time. Taking in a child requires ongoing space for as long as the child is present.

These rules set out the minimum space expectations.

(a) Each home shall have a family room to meet the needs of the family including children placed for foster care.

A foster home needs a place where all family members can gather and relax together. Many children who come into care have not seen healthy family interactions. The family area provides space for this to occur. The space should include children in foster care easily and without any additional changes in the space.

(b) The kitchen shall be large enough for preparation of food and cleaning of dishes. Each home shall have a dining area to meet the needs of the family including

children placed for foster care.

The kitchen should be an inviting place and large enough to accommodate several people. The kitchen must have operating appliances for the cooking of meals and cleaning up. A sink with hot and cold running water and counter spaces for food preparation should be easily accessible. Additional space for sitting down and eating a meal encourages family interaction. If kitchen and dining spaces are in one room, the room needs to be large enough so that these activities can go on simultaneously without one interrupting the other.

- (c) Bedrooms shall be identified on a floor plan as bedrooms and shall not serve dual functions.

Each member of the family must have a designated sleeping place. This place is exclusively for sleeping. Neither the family room nor the dining area may be used for sleeping spaces. Rooms designated for sleeping must be as such labeled on a floor plan. Bedrooms cannot serve dual functions such as a room designated as a bedroom cannot serve as a walk through room in order to access another bedroom or another room in the home.

- (d) Children shall not be permitted to sleep in an unfinished basement or in an unfinished attic.

Unfinished spaces may not be used as sleeping quarters. If the space does not look finished, ask the local building inspector to make a visit and determine whether the space meets code for human use.

- (e) Each child shall have his/her own bed. Each bed shall be provided with a supported mattress, two sheets, blanket, bedspread, and be of size to accommodate the child. No day bed, convertible sofa, or other bedding of a temporary nature shall be used for the exclusive sleeping area of the child except for temporary care for up to two weeks.

Every child deserves a bed. Children may not share beds. It is their intimate space. The bed needs to be a secure and safe place for the child. The mattress must be supported off the floor. If the mattress has box springs, the box springs must be off the floor. If slats on a bed frame support the bed, there must be enough slats to allow the mattress to lie flat without any low areas. The bed must have two sheets, a blanket or quilt, and bedspread. Pillows should be clean and covered in pillowcases. Some teenagers do not want anyone bothering their room or their beds. In spite of such objections, the bed clothes need to be changed as needed to be kept clean.

A child may not sleep on a temporary bed for more than two weeks and only in an emergency situation. Temporary beds are beds that can serve dual functions. If the bed converts to a sofa, a reclining area during the day, or to any other furniture, it is considered temporary. Futons are temporary bedding.

This rule continues to state:

The sleeping room shall not be shared by children of the opposite sex except by children age five and under. The sleeping arrangements shall provide space within the bedroom for the bed and the child's personal possessions. When children share a bedroom, a child under 6 shall not share a room with a child over 12, except when siblings are placed together. No more than four children shall share a room.

Bedrooms may be shared by a maximum of four children. Bedrooms may be shared only with other children of the same gender. Exceptions to this rule are only made for children under the age of five.

Children under age six must not be placed with children over age twelve. As much as possible, children who share a room should be the same age. Sibling groups are an exception to this rule. Regardless of the number of children sharing a bedroom, each child shall have his or her own space within the room. This space must be protected and respected.

Sharing sleeping space provides children with the opportunity to develop many important skills. Through this experience the child may learn about boundaries, cooperation, respecting private property, and expressing anger appropriately. If children must share rooms, foster parents should create a plan for helping the children develop and practice these skills. Licensing social workers should be sure foster parents understand that it will require a lot of their energy and attention if children are to share sleeping rooms.

(f) Separate and accessible drawer space and closet space for personal belongings and clothing shall be available for each child.

Each child needs a place for personal belongings. This should be behind a door (i.e., in a closet) or in a drawer. Many children coming into care are very protective of their personal belongings. Many have lived in places where their belongings were not protected and respected. Children learn to respect private property by having their own private property respected. Make sure each child has a safe place to keep personal belongings, which is not open for anyone else to view.

(g) The home shall have indoor, operable sanitary toilet, hand-washing, and bathing facilities. Homes shall be designed in a manner that will provide children privacy while bathing, dressing, and using toilet facilities.

Make sure each child has a safe place to keep clean. The bathroom should be an enclosed space, with four walls and a door. The toilet should be kept clean and in good working order. It should flush easily. It should be easily accessible for all ages: except very young children not yet potty trained. The toilet should not leak on the floor. A sink with hot and cold running water accessible to the child should be provided. Make sure there is soap for hand washing and towels for drying hands. Many children come into care from places where they did not have these minimum provisions. Many children will need to be taught basic hygiene skills.

Bathing should be a pleasant, secure experience for a child. Whether in a shower or bath tub, the child needs to feel safe and secure. Privacy is very important. Children

should be assured that they will not be interrupted or intruded upon. If access to the bathroom is from a sleeping space, the person using the sleeping space must have private personal space. The walkway to the bathroom should not intrude upon the privacy of the occupants. Ideally, access to the bathroom is from a common space, such as a hall.

Being conscientious and considerate of bathroom needs and usage is very important to children. Make sure that such access is available and open at all times.

L. 10A NCAC 70E .1112 EXTERIOR SETTING AND SAFETY

The exterior spaces around the foster home, including any yard spaces shall be clear of any dangerous objects or hazardous items including access to water, such as swimming pools, beaches, rivers, lakes, or streams. Access to such hazards shall be avoided by either a fence at least 48 inches high with a locked gate around the hazard, or by a fence at least 48 inches high with a locked gate around the yard and exterior space of the home while still providing play space for children. Access to water in above ground swimming pools shall be prevented by locking and securing the ladder in place or storing the ladder in a place inaccessible to the children. The supervising agency shall observe and document that the foster parents have taken measures to protect foster children from having unsupervised access to swimming pools, beaches, rivers, lakes, streams, other water sources, or other hazards.

History Note: Authority G.S. 131D-10.1; 131D-10.3; 131D-10.5; 143B-153; Eff. September 1, 2007.

Rule 10A NCAC 70E .1112 sets out how to restrict a child's access to water and other exterior hazards. Every object in or around the foster home's yard must be evaluated for its risk of danger to children. Supervising agencies must inform applicants on or before the first visit to the home about this rule. Each body of water is considered a potential hazard. Foster parents need to know they may need to make modifications to their yard if their property contains water or other hazards.

The Supervising Agency licensing social worker must assess the presence of any potential water hazard and the family's ability to keep any child placed in their home safe and mitigate risk to any child. As part of the initial licensure process, and every relicensing process thereafter, the supervising agency must complete the Water Hazard Safety Assessment form (DSS-5018) with every family. The completed Water Hazard Safety Assessment form will be submitted to the licensing authority as an attachment to the Initial application and Relicense application. The licensing authority will review the Water Hazard Safety Assessment form to ensure that it is complete and that the content is acceptable.

The Supervising Agency licensing worker is responsible for assessing hazards in and around the foster home. The licensing social worker is responsible for making this assessment; this responsibility may not be delegated. Working with the foster family, the licensing social worker shall observe the home and surrounding environment.

Using the Water Hazard Safety Assessment form, the licensing worker will document

Change # 04-2018

Foster Home Licensing

October 1, 2018

safety measures in place to protect foster children from having unsupervised access to swimming pools, beaches, rivers, lakes, streams, other water sources, or other hazards. If a potential water hazard has been identified, the licensing worker will document the family's water safety plan which is part of the Water Hazard Safety Assessment form. The water safety plan will be maintained in the foster home in a place where it is accessible to all caregivers at all times.

In-ground swimming pools on the property of the foster home must be enclosed by a fence at least 48 inches high with a locked gate. A fence at least 48 inches high with a locked gate around the yard while providing play space for children, may be used to prevent access to the swimming pool. Access to water in above ground swimming pools shall be prevented by locking and securing the ladder in place or storing the ladder in a place inaccessible to the children. If a foster family installs a temporary or seasonal swimming pool that will remain in place for more than 24 hours it must either be enclosed by a fence at least 48" high, or access must be prevented by a removable ladder or a ladder that locks in place.

A foster child must be protected from access to potential water hazards such as ponds, beaches, rivers, lakes, streams, etc. that are on the property, or directly connected to the foster home and can be seen from the foster home at any time of year. The potential water hazard must be enclosed by a fence at least 48 inches high with a locked gate, or by a fence at least 48 inches high with a locked gate around the yard while providing play space for children.

If a fence surrounds a pool or other water hazard, the pool or the hazard may not be accessed directly from the house. If the fence joins the house, then an additional gateway must separate the pool area from the house. It is a fire code violation to block a designated egress door to limit access to a pool. The egress door must be accessible for immediate exit and the pool must be protected behind a fence.

If the potential water hazard is not directly connected to the property, using the Water Hazard Safety Assessment form, the licensing worker must carefully assess the risk to foster children based on the distance from the foster home to the water hazard, and the applicants' experience in supervising children who may have access to the water hazard. The water safety plan will document safety measures that will be put in place based on the age and maturity of foster children who will be placed in the home.

Supervising agencies shall advise Child Placing agencies, or individuals that are considering placing a child in the home, of any known potential water hazards and provide the completed Water Hazard Safety Assessment form upon request of the child placing agency. When a foster child is placed in a home where there is a known potential water safety hazard the licensing social worker will provide the foster parent(s) with the Individual Water Hazard Safety Plan form (DSS-5018a). The foster parent shall complete the Individual Water Hazard Safety Plan form within three calendar days of the placement and updated when changes occur thereafter, provide the completed form to the child's foster care social worker at the first visit, and supervise the foster child's access to potential safety hazards in accordance with the Individual Water Hazard Safety Plan.

Whenever a child is placed in a foster home where a potential water hazard exists, the

child's Social Worker will review the completed Individual Water Hazard Safety Plan with the foster family within 7 calendar days after the day of placement in the home. Modifications may be made at that time based on the individual needs of the child. The Individual Water Hazard Safety Plan will be maintained in the foster home in a place where it is accessible to all caregivers at all times.

M. [10A NCAC 70E .1113](#) LICENSING COMPLIANCE VISITS

Quarterly Visits. Licensing social workers of supervising agencies shall visit with the foster parents on at least a quarterly basis for the specific purpose of assessing licensing requirements. These visits shall be face-to-face. Two of the quarterly visits each year shall take place in the foster home. It is highly recommended that all quarterly visits occur in the foster home. However, two visits can occur at a location that is convenient to both the licensing worker and foster parents. These visits should occur in locations that are conducive to privacy, confidentiality, etc.

Foster parents shall be assessed equally at initial licensure, quarterly and at relicensure to ensure compliance with licensing rules and policy. Therefore, the foster mother and foster father, as well as anyone designated on the foster home license as a foster parent, shall participate in the quarterly licensing compliance visits. If it is not convenient for all the foster parents to meet with the licensing worker at the same time then the licensing worker shall schedule separate meetings with them. An exception to this policy can be made if one foster parent is deployed overseas. This exception must be documented in the foster home record.

These face-to-face quarterly visits serve several important purposes. At least once a quarter, foster parents need the opportunity to talk with their licensing social worker about concerns and progress in caring for the foster children placed in their homes. At least once a quarter, foster parents deserve to hear what they are doing well and what needs to be improved. This is an opportunity for the licensing social worker to assess strengths and needs of each foster parent and compliance with licensing requirements. During these visits, the licensing social worker should make sure that sleeping space, fire safety and environmental standards continue to be met. These visits are excellent opportunities to determine if there are any new household members.

Quarterly visits need to occur even if there are no foster children in the home. The licensing social worker still needs to assess the foster home's continued compliance with licensing regulations. If the foster family has not accepted any foster children, discussions need to be held to determine their continued interest in providing foster care services.

The requirement to visit with foster parents on a quarterly basis is a minimum expectation. If foster parents need additional attention, the licensing social worker is expected to make additional visits. It is recommended that the licensing social worker visit newly licensed foster parents as often as needed in order for them to feel confident about their skills and abilities to provide foster care services.

The licensing social worker is required to document these visits, including the dates they

occur, the names of participants and notes about the content of the visits. Foster parents shall also be given an opportunity to document any of their concerns or needs. Supervising agencies are required to use a Quarterly Licensing Visit Documentation form to assess continued compliance with licensing standards. An example of this form is provided by the Division of Social Services (RLS 26). Supervising agencies can develop their own form but all of the elements outlined on the Division's form must be included on the supervising agency's form. Please note that both foster parents are required to sign the Quarterly Licensing Visit Documentation form.

Quarterly visits can be completed by someone other than the licensing social worker as long as these individuals meet the criteria for a Social Worker II as established by the North Carolina Office of State Human Resources (<http://www.oshr.nc.gov/Guide/CompWebSite/Class%20Specs/04012.pdf>).

Individuals conducting quarterly licensing visits must understand that the purpose of the visits is to assess compliance with foster home licensing requirements. Foster parents must understand that the visits are meant to discuss licensing requirements. Quarterly visits must be separate and apart from any child specific visits or supervision visits. If done on the same day as a supervision visit, one could have 60 minutes of supervision, and then, once the supervision visit is completed, conduct the quarterly visit, covering all required topics with the foster parent. If someone other than the licensing worker conducts the quarterly licensing visit, the agency must have procedures in place to ensure the licensing worker will receive the Quarterly Licensing Visit Documentation form, as well as, any other information from the quarterly visits in a timely manner.

It is important for agencies to understand that any staff member (social workers, case managers, qualified professionals, supervisory staff, etc.) who visits the foster home or visits with foster children in the home has a responsibility to continually assess safety and risk factors. DSS Form 5295 (Monthly Foster Care Contact Record) (<http://info.dhhs.state.nc.us/olm/forms/dss/dss-5295-ia.pdf>) provides guidance related to foster care visits.

N. 10A NCAC 70E .1114 CRIMINAL HISTORIES

Individuals convicted of certain crimes are prohibited from providing foster care. These crimes include abusing children, spousal abuse, crimes against children, and crimes of serious violence. To ensure each person granted a license has not been convicted of such crimes, every applicant's criminal history must be assessed. If any person in the applicant's home who is 18 years of age or older refuses to allow such a background check, the home is not eligible to be licensed. Criminal background checks must be performed in three areas: local, state, and federal. Applicants and adult household members must reveal all criminal charges and convictions as well as any pending convictions to the supervising agency at the time of their initial licensure. Failure to do this may result in the revocation of their license if these charges and convictions are discovered after the foster home has been licensed.

Local criminal background checks are done using records of the Superior Court with jurisdiction of the foster home. Typically, these records are kept at the county court house. This check is usually performed by supervising agency staff, although some supervising agencies contract with private companies to do this check. Supervising

agencies can use private companies to conduct criminal background checks as long as the company is listed on the website of the NC Administrative Office of the Courts <http://www.nccourts.org/citizens/gotocourt/documents/cbccompanies.pdf>.

In order to use a private company to conduct a criminal background check the agency must submit a waiver request to their licensing consultant. Private agencies must submit a waiver request to the licensing consultant assigned to their agency. County departments of social services will need to submit a waiver request to the licensing consultants at the Black Mountain office.

The results of the local check should be recorded on the Foster Home License Application (DSS-5016). This check must be performed prior to initial licensing and at every relicensure. Foster parents must inform the supervising agency of any criminal charges and convictions of adult household members within 72 hours of a charge or conviction. Supervising agencies must report this to the Licensing Authority within five business days of receipt of the information on the Foster Home Change Request Application (DSS-5159).

State level criminal background checks are done by checking internet databases for any criminal conviction or substantiated report of harming persons in care. These checks must be performed prior to initial licensing and at every relicensure. To conduct this check, the supervising agency checks the following sites and records the results on the Foster Home License Application (DSS-5016):

- NC Department of Public Safety Offenders:
<http://www.doc.state.nc.us/offenders>
- NC Sex Offender and Public Registry:
<http://sexoffender.ncdoj.gov>
- NC Health Care Personnel Registry:
<http://www.ncnar.org/nchcpr.html>

(a) An applicant shall not be licensed if the applicant, or any member of the applicant's household 18 years of age or older, refuses to consent to a criminal history check required by G.S. § 131D, Article 1A.

Federal criminal records checks are done using fingerprints. Each person who is 18 years of age or older in the applicant family must be fingerprinted and the fingerprints must be processed through the North Carolina Division of Child Development and Early Education.

Inform applicants that these extensive searches will be conducted. Applicants need to understand that it is imperative that they reveal any findings before the supervising agency conducts these searches. If findings are revealed that were not disclosed by applicants, a thorough explanation must be provided to the Licensing Authority.

(b) An applicant or any member of the applicant's household is not eligible for

licensure if the applicant or any member of the applicant's household has been convicted of a felony involving:

- (1) child abuse or neglect;
- (2) spouse abuse;
- (3) a crime against a child or children (including child pornography); or
- (4) a crime involving violence, including rape, sexual assault, or homicide but not including other physical assault or battery.

Individuals who have abused or neglected children, abused a spouse, committed a crime against a child, or committed a serious violent crime cannot be licensed as foster parents. This rule applies regardless of when the conviction occurred. Inform applicants of this rule early in the application process. Help foster parents understand that if the criminal history check uncovers evidence of such crimes, the felon and everyone who shares the felon's household are excluded from licensure. Adult children, relatives, or friends with such criminal records may not become members of a licensed foster home.

(c) An applicant or any member of the applicant's household is not eligible for licensure if the applicant or any member of the applicant's household has within the last five years been convicted of a felony involving:

- (1) physical assault;
- (2) battery; or
- (3) a drug-related offense.

These convictions do not rule out applicants from being a foster parent if the offenses took place more than five years (60 months) ago. However, it does not mean they will automatically be accepted as foster parents. Persons with criminal records of this kind who have become responsible adults may be considered for licensure. The supervising agency should assess the applicants and household members past criminal activity carefully along with their current attitudes toward this and evidence of their maturing beyond this type of behavior. This requires at least a two-level staffing decision and a written recommendation from the agency's executive director must accompany the request for a license.

(d) An applicant or any members of the applicant's household with criminal convictions except those specified in Paragraph (b) of this Rule may be considered for licensure based on the following factors:

- (1) nature of the crime;

- (2) length of time since the conviction;
- (3) circumstances surrounding the commission of the offense or offenses;
- (4) number and type of prior offenses;
- (5) evidence of rehabilitation;
- (6) age of the individual at the time of the commission of the offense or offenses;
and
- (7) letter of support for licensure from the executive director of the agency.

If the supervising agency wishes to recommend licensure or relicensure in spite of the applicant's criminal record, the licensing social worker should meet with the applicants to discuss the matter. This requires at least a two-level staffing decision and a written recommendation from the agency's executive director must accompany the request for a license.

The letter must state the details of the criminal record, why the agency recommends licensure in spite of the criminal record, and why the person's past criminal behavior does not adversely affect his/her ability to care for children in foster care. Once it is received by the Licensing Authority, this letter is in the public domain, so the executive director should write this letter as if it will be printed in the local newspaper.

Supervising agencies shall also inquire if any juvenile members of the household have any charges and conviction that were processed in Juvenile Court. Juvenile Court records are sealed; however, it is the responsibility of the foster parent to discuss these charges and convictions with the supervising agency. It is the responsibility of the supervising agency to assess these charges and convictions and make a recommendation to the Licensing Authority regarding the impact of these charges and convictions as they relate to the safety of foster children. The supervising agency shall discuss this issue in Skill 10 of the Mutual Home Assessment. Foster parents must report any charges and juvenile convictions to their supervising agency within 72 hours of their occurrence. The supervising agency must report this information to the Licensing Authority on the Foster Home Change Request Application (DSS-5159) within 5 business days.

Following are some of the things that might be considered by an agency and included in a letter recommending licensure:

- The nature, magnitude, frequency, and duration of the crime. Be sure to note whether the crime is non-violent in nature;
- The age of the foster parent applicant when the crime occurred and how much time has lapsed since the crime occurred;

- Evidence of rehabilitation shown through behavior since the incident(s) and the increased self-awareness or greater understanding of the effects of criminal behavior;
- Evidence of a change in habits and attitude and of successful treatment when appropriate as in the case of a history of substance abuse;
- The honesty and candor of the applicant in sharing their past criminal activity

Although supervising agencies can make a recommendation on licensure, the Licensing Authority makes the final decision whether to approve the license. In the case of applicants with criminal records, the Licensing Authority will consider each request on its merits. Safety for children in foster care will always be the top priority. Children, birth families, and the community all need to feel confident that North Carolina is diligently protecting children in its care.

O. 10A NCAC 70E .1115 RESPONSIBLE INDIVIDUALS LIST

- (a) An applicant is not eligible for licensure if the applicant has within the last five years been substantiated for abuse or serious neglect and is placed on the Responsible Individuals List as defined in North Carolina General Statute 7B-311.

The responsible individuals list (RIL) is a list of individuals determined to be responsible for the abuse and/or serious neglect of a juvenile. Information from this list may be released to designated authorized users such as: child caring institutions, child-placing agencies, group home facilities, and other providers of foster care, childcare, or adoption services. RIL information may be used to determine current or prospective employability or fitness to care for children; this includes foster and adoptive applicants.

When it has been determined that a person is a responsible individual they become eligible for their name to be placed on the RIL. The name is not placed on the RIL until after the timeframe for requesting a judicial review of the decision to place their name on the RIL has passed, or a juvenile petition orders the placement of the name or when a Judicial Review petition results in a determination that the name should be placed on the RIL. More information on the RIL is located in the Family Services Manual; Chapter VIII; Section 1427.

Prior to initial licensure, supervising agencies must check the RIL to ensure that the applicants and adult household members are not on the RIL due to an incident that occurred within the past five years (60 or fewer months). People on the RIL for less than five years are prohibited by law from caring for children in foster care; they cannot be recommended for licensure. If a person's name is on the RIL but the incident occurred five or more years ago (61+ months), the supervising agency may submit a written request to the Licensing Authority to include the individual in a household licensed to care for children in foster care.

The supervising agency should consider carefully his or her decision to recommend someone who has been placed on the RIL at any time. Applicants should always be asked if they have ever had a Child Protective Services (CPS) investigation of their family and whether the report was substantiated or not. The applicants should be able to discuss the circumstances involved in the investigation. The decision to recommend someone who has been listed on the RIL or had substantiation for abuse or neglect should be made after a two level review. The recommendation for licensure should be accompanied by a letter of advocacy addressing the applicant's CPS history and must be signed by the agency's executive director.

RIL checks do not have to be conducted for relicensures unless the license has lapsed for more than 30 days.

To request information from the RIL, supervising agencies must use the Results of the Responsible Individuals List (RIL) Form (DSS-5268). Applicants and adult household members must sign the completed form. Private agencies must submit the DSS-5268 to the Division of Social Services (FAX: 919-715-6714 to the attention of "RIL"). The private agency will receive in return the signed and dated DSS-5268 with the results marked. This document must be submitted with the application packet.

Public agency licensing workers are able to access the RIL within their own agency. Public agency licensing workers must complete the section of the DSS-5268 marked for NCDSS office use only. The actual results of the search should be maintained in the files of the public agency. The signature of the licensing worker and date on the 5268 indicate that those results are in their records. The public agency licensing worker must submit the DSS-5268 in the application packet.

An individual usually knows if he or she is listed on the RIL. If a check of the RIL indicates a person is on the list and the incidents are more than five years ago, the supervising agency must decide whether to recommend the person be licensed in spite of a history of abusing or seriously neglecting a child.

(b) After five years, an applicant who is on the Responsible Individuals List may be considered for licensure based on the following factors:

- (1) nature of the substantiation;
- (2) length of time since the substantiation;
- (3) circumstances surrounding the substantiation;
- (3) evidence of rehabilitation;
- (5) history of convictions and violations; and
- (6) letter of support for licensure from the executive director of the agency.

When the supervising agency wishes to recommend licensure of a person whose RIL incident is over five years old, the supervising agency director must write a letter of support to be included in the packet sent to the Licensing Authority office. This letter should include information to show that the director understands the nature of the applicant's situation, which is based on the applicant's disclosure of the history. The letter must include a description of the substantiated child abuse or serious neglect, how long ago this incident occurred, the circumstances surrounding the incident, evidence of rehabilitation, and any criminal convictions or violations involving children. The letter should explain the reasons the director wishes this individual to be licensed to care for children in foster care. Once it is received by the Licensing Authority, this letter is public domain; therefore, the supervising agency's executive director should write this letter as if it will be printed in the local newspaper. The supervising agency's director will need to carefully assess each situation and present an honest and complete picture so that the Licensing Authority can make an informed decision.

(c) The supervising agency shall provide documentation to the licensing authority of the results of Child Abuse and Neglect Central Registry Checks of states where the applicant has resided the past five years.

The licensing social worker will need to obtain information from child abuse and/or neglect registries from the states where the applicants and adult household members have resided for the past five years. The findings are documented on the Foster Home Licensing Application (DSS-5016). This information can be accessed:

http://www.hunter.cuny.edu/socwork/nrcfcpp/downloads/policy-issues/State_Child_Abuse_Registries.pdf

P. 10A NCAC 70E .1116 CRIMINAL HISTORY CHECKS

(a) The supervising agency shall complete the following activities at initial licensure for new foster parent applicants and any member of the prospective foster parents' household 18 years of age or older:

- (1) furnish the written notice as required by G.S. 131D-10.3A(e);
- (2) obtain a signed consent form for a criminal history check and submit the signed consent form to the Department of Health and Human Services, Criminal Records Check Unit;
- (3) obtain two sets of fingerprints on SBI identification cards and forward both sets of fingerprints to the Department of Health and Human Services, Criminal Records Check Unit. Once an individual's fingerprints have been submitted to the Department of Health and Human Services, Criminal Records Check Unit, additional fingerprints shall not be required; and
- (4) conduct a local criminal history check through accessing the Administrative Office of the Courts and the Department of Corrections Offender Population Unified System and submit the results of the criminal history checks to the

licensing authority on the Foster Home Application form.

Applicants for foster care licensing are fingerprinted only once. If a licensed foster family wishes to transfer to another supervising agency, their fingerprinted criminal check status transfers with them.

The fingerprint process begins with securing permission from the applicant to conduct the criminal records check based upon fingerprints. A copy of the form, Notice to Foster Home of Mandatory Criminal History Check (DSS-5280), must be read and signed by the applicant and by any other person age 18 or older in the home. Each person should sign his or her own form. This form gives the details of the criminal records search as well as what the person may do if the search reveals something with which the person disagrees. Make sure each person age 18 or older in the home signs one of these forms.

Applicants and adult household members can be fingerprinted by the supervising agency by using the ink fingerprint cards or they can be electronically fingerprinted by an approved law enforcement agency. To complete the ink fingerprint cards the supervising agency can obtain fingerprint cards and bubble sheets from:

NC Department of Health and Human Services
Criminal Record Check Unit | DSS
MSC 2201
Raleigh, NC 27699-2201

Two fingerprint cards and a bubble sheet need to be completed for each applicant and adult household member. The supervising agency mails one fingerprint card and the bubble sheet to the NC DHHS Criminal Record Check Unit address listed above.

The Division of Child Development processes the documents then forwards them to the SBI for the state check. If the fingerprints are of sufficient print quality the SBI processes and forwards to the FBI for the national check. The criminal history is returned to the SBI then to the Division of Child Development. If there is no criminal history found the supervising agency receives a fingerprint clearance letter stating "MEETS THE CRITERIA" as a foster parent. Sometimes there are issues with insufficient print quality, which results in the fingerprint cards and a letter being returned to the supervising agency informing them the prints are unclassifiable. The second fingerprint card needs to be submitted and the process begins over. If after the third attempt fingerprints are returned the DCD automatically resubmits to the SBI asking for "name search only". When a criminal history is found the DCD informs the Licensing Authority. The Licensing Authority contacts the supervising agency to notify them there is a criminal history that prevented the applicant or adult household member from receiving fingerprint clearance. The supervising agency discusses with the applicant that they did not receive fingerprint clearance and the applicant can request a copy of the record from The North Carolina Department of Justice. Please note that it take a while for the page to load after clicking on the link. When the page appears, scroll to the bottom and click on the link that contains the words "Right to Review Fillable Form". A Word document will then open.

If the supervising agency wants to have their foster parent applicants and adult household members fingerprinted electronically through Live Scan at approved law enforcement agencies, start by accessing:
<http://ncchildcare.dhhs.state.nc.us/general/home.asp>. On this web page select "DHHS Criminal Record Checks" which will take the worker to a list of type of background checks the DHHS Criminal Record Check Unit performs. When submitting an application for a foster parent applicant they must be fingerprinted as a foster parent applicant even when the foster parent plans to adopt. Click on Foster Care; it will provide you with three links and directions on how to complete the required documents for electronic fingerprinting. Also in this section there is an Approved Agency Guide, this is a list of the law enforcement agencies in each NC County that is approved to complete the Live Scan fingerprinting. These are the only locations that SBI/FBI will accept Live Scan fingerprinting results. Once applicants are fingerprinted by Live Scan, the Certified Electronic Fingerprint Release Form and the bubble sheet (DHHS-001) must be submitted to the Department of Health and Human Services Criminal Record Check Unit at the following address:

NC Department of Health and Human Services
Criminal Record Check Unit | Foster Care Team
MSC 2201
Raleigh, NC 27699-2201
Attn: Electronic Fingerprinting

The SBI/FBI are processing Live Scan fingerprints in a matter of days so it is imperative for prompt notification that the required paperwork be mailed to DHHS the same day the fingerprints are taken to avoid delays. DHHS will not release any results of the fingerprinting until the required paperwork is complete and on file.

Public Law 92-533 authorizes the FBI to exchange criminal history record information (CHRI) with, and for the official use of, authorized officials of the Federal Government, States, cities and other institutions. Under this legislation CHRI may be used in connection with licensing or employment purposes for which dissemination is authorized by federal law. CHRI obtained under this authority may only be used for the purpose for which the record was requested. If CHRI is requested for a foster care license the information obtained from that request can not be used if the applicant later requests to be an adoptive applicant. If this occurs, applicants will have to submit another set of fingerprints to DCD strictly for the purpose of adoption. Conversely, should adoptive parents later become foster parent applicants they are required to submit another set of fingerprints to DCD strictly for the purpose of foster care. The Criminal Record Check letter from DCD that is submitted to the Licensing Authority on prospective foster parents must state that the applicant MEETS THE CRITERIA for a foster parent and not an adoptive parent, otherwise the foster home licensing packet will be returned to the supervising agency.

The FBI considers county departments of social services as agents of the state and specific criminal convictions can be released to them. However private agencies are not considered agents of the state and the only information that can be provided to private agencies is that the applicant or household member has criminal charges. Applicants

and household members can obtain copies of their criminal histories by following the procedures at this website: North Carolina Department of Justice. Please note that it take a while for the page to load after clicking on the link. When the page appears, scroll to the bottom and click on the link that contains the words "Right to Review Fillable Form". A Word document will then open. They can then provide this information to the private agency.

(b) The supervising agency shall conduct a local criminal history check through accessing the Administrative Office of the Courts and the Department of Corrections Offender Population Unified System and submit the results of the criminal history checks to the licensing authority on the Foster Home Relicensure, Termination and Change Request Application form at relicensure for foster parents and any member of the prospective foster parents' household 18 years of age or older.

The supervising agency must also perform online and courthouse checks for criminal activity. Unlike the fingerprint search, these searches must be done at every relicensure (i.e., every two years). The results of these searches are entered on the Foster Home License Application (DSS-5016), the Foster Home Relicense Application (DSS-5157), and the Foster Home Change Request Application (DSS-5159). An administrative staff person may perform these criminal records checks. However the licensing social worker must review the results of these searches before they are submitted to the Licensing Authority.

Q. 10A NCAC 70E .1117 TRAINING REQUIRMENTS

Each supervising agency shall provide, or cause to be provided; pre-service and in-service training for all prospective and licensed foster parents as follows:

(1) Prior to licensure or within six months from the date a provisional license is issued, each applicant shall successfully complete 30 hours of pre-service training. Pre-service training shall include the following components:

- (a) General Orientation to Foster Care and Adoption Process;
- (b) Communication Skills;
- (c) Understanding the Dynamics of Foster Care and Adoption Process;
- (d) Separation and Loss;
- (e) Attachment and Trust;
- (f) Child and Adolescent Development;
- (g) Behavior Management;
- (h) Working with Birth Families and Maintaining Connections;

- (i) Lifebook Preparation;
- (j) Planned Moves and the Impact of Disruptions;
- (k) The Impact of Placement on Foster and Adoptive Families;
- (l) Teamwork to Achieve Permanence;
- (m) Cultural Sensitivity;
- (n) Confidentiality; and
- (o) Health and Safety.

Supervising agencies are responsible for providing pre-service training for foster parent applicants. The above 15 components must be included in the curriculum. The Division of Social Services provides the train-the-trainer curriculum entitled MAPP-GPS (Model Approach to Partnerships in Parenting-Group Preparation and Selection) to foster parent trainers. Agencies are also permitted to use other nationally recognized foster parent training curriculums. However these courses must contain the 15 required components and be approved by the Regulatory and Licensing Services Team. Agencies can develop their own curriculums to cover the 15 components, but before they can be used all teaching notes, study guides, workbooks, handouts, etc. must be submitted to the Division of Social Services' Staff Development Team for approval.

Agency social workers that teach pre-service training must meet the state personnel requirements for a Social Worker II. It is highly recommended that agencies encourage and identify foster parents with at least two years of active foster parent experience to become certified as MAPP (or other approved curricula) pre-service trainers. In these situations, the foster parent is not required to meet the Social Worker II requirements. Once these foster parents have been certified to train the foster parent pre-service curriculum, they co-train the pre-service training with the agency social worker. If a certified MAPP-GPS trainer or trainers of other approved curriculums have not taught the pre-service course for three or more years they must be recertified before they can teach pre-service training to prospective foster and adoptive parents.

It is preferred that the social worker teaching the pre-service training also completes the licensing paperwork. When this is not possible, a plan for how the two workers (the pre-service trainer and the licensing social worker) will communicate is essential. It is recommended that this plan include identification of at least one time for a joint face to face discussion including both workers and the prospective family regarding the mutual assessment and the family's strengths/needs associated with the 12 skills. In addition, it is recommended that the pre-service training worker share with the licensing social worker the group meeting notes (which include observations by the pre-service trainer from the group meetings) as well as the strengths/needs assessments that are completed by the family during the group meetings. These steps will assure that a

thorough and behaviorally specific description of the 12 skills will occur in the summary sent to the Licensing Authority.

(2) Prior to licensure or within six months from the date a provisional license is issued, therapeutic foster parent applicants shall receive at least ten additional hours of pre-service training in behavioral mental health treatment services including the following:

- (a) role of the therapeutic foster parent;
- (b) safety planning; and
- (c) managing behaviors.

The Division of Social Services has developed a 10-hour pre-service course for therapeutic foster parents called "Becoming a Therapeutic Foster Parent" that covers these required topics. An online train-the-trainer curriculum for "Becoming a Therapeutic Foster Parent" can be accessed by logging in to: <https://www.ncswlearn.org> and navigating to the Personalized Learning Portfolio (PLP) / Online Courses section of the website. If you do not have an account, click on "create an account" on the main page of [ncswlearn.org](https://www.ncswlearn.org) and follow the instructions. Agencies are also permitted to use other nationally recognized foster parent training curriculums to meet this therapeutic pre-service training requirement. However these courses must contain the 3 required components and be approved by the Regulatory and Licensing Services Team. Agencies can develop their own curriculums to cover the 3 components, but before they can be used all teaching notes, study guides, workbooks, handouts, etc. must be submitted to the Division of Social Services' Staff Development Team for approval.

(3) During the initial two years of licensure, each therapeutic foster parent shall receive additional training in the following areas:

- (a) development of the person-centered plan;
- (b) dynamics of emotionally disturbed and substance abusing youth and families;
- (c) symptoms of substance abuse;
- (d) needs of emotionally disturbed and substance abusing youth and families;
and
- (e) crisis intervention.

There are no curriculums prescribed or recommended by the Division of Social Services for these five trainings. Supervising agencies are responsible for providing or arranging training that addresses these components.

(4) Training in first-aid, cardiopulmonary resuscitation (CPR) and universal

precautions such as those provided by the American Red Cross, the American Heart Association, or equivalent organizations shall be provided to foster parents before a foster child is placed with the foster family. Training in CPR shall be appropriate for the ages of children in care. First-aid, CPR, and universal precautions training shall be updated as required by the American Red Cross, the American Heart Association, or equivalent organizations. The supervising agency shall ensure that family foster parents and therapeutic foster parents are trained in medication administration before a child is placed with the foster family.

A child cannot be placed in a foster home until the foster parents have received these trainings and demonstrated an ability to provide first-aid and CPR, administer medications, and observe universal precautions.

(5) Child-specific training shall be provided to the foster parents as required in the out-of-home family services agreement or person-centered plan as a condition of the child being placed in the foster home. When the child or adolescent requires treatment for abuse – reactive, sexually reactive and sexual offender behaviors, specific treatment shall be identified in his/her person-centered plan. Training of therapeutic foster parents is required in all aspects of reactive and offender specific sexual treatment and shall be made available by a provider who meets the requirements specified for a qualified professional as defined in 10A NCAC 27G .0104. When the child or adolescent requires treatment for substance abuse, specific treatment shall be identified in his/her person-centered plan. Training and supervision of therapeutic foster parents are required in all aspects of substance abuse and shall be made available by a provider who meets the requirements specified for qualified substance abuse prevention professional as defined in 10A NCAC 27G .0104. This training shall count towards the training requirements of Item (6) of this Rule.

Whenever specific needs and issues are identified for a child, foster parents may need specialized training. This training can be identified in the out-of-home family services agreement or person-centered plan. It is the responsibility of the supervising agency to provide or arrange this training.

(6) Prior to licensure renewal, each foster parent shall successfully complete at least twenty hours of in-service training. This training may be child-specific or may concern issues relevant to the general population of children in foster care. In order to meet this requirement:

- (a) each supervising agency shall provide, or cause to be provided, at least 10 hours of in-service training for foster parents annually;
- (b) the training shall include subjects that would enhance the skills of foster parents and promote stability for children;
- (c) a foster parent may complete training provided by a community college, a licensed supervising agency, or other departments of State or county governments; and, upon approval by the supervising agency, such training shall count towards meeting the requirements specified in this Item; and
- (d) each supervising agency shall document in the foster parent record the type of activity the foster parent has completed pursuant to this Item.

To remain licensed, every foster parent must attend 10 hours of in-service training every year. Supervising agencies must provide or otherwise ensure that foster parents receive this training.

This in-service training may be child-specific or it may concern issues relevant to the general population of children in foster care. In general, in-service training must be on topics that enhance the skills of foster parents and promote stability for children. County departments of social services and private child-placing agencies are urged to develop their own curricula for in-service training so that training may be available throughout the year for foster parents.

Licensing social workers should strongly advise foster parents to check in with them before spending money on training to ensure the training is considered valid and appropriate by the supervising agency. Training that foster parents locate on their own should have the agency's approval in advance. Licensing social workers should advocate with their agency to develop a written policy on training materials that will meet requirements.

Once foster parents receive training, supervising agencies are responsible for documenting in the foster parent record the type of activity the foster parent has completed to fulfill the annual in-service training requirement.

(7) A foster family caring for a child with HIV (human immunodeficiency virus) or AIDS (acquired immunodeficiency syndrome) shall complete six hours of training on issues relevant to HIV or AIDS annually. This training may count towards the training requirements Item (6) of this Rule.

Families caring for children with HIV or AIDS must attend six hours of advanced medical training annually. This training, which must cover topics relevant to HIV or AIDS, counts toward the foster parents' annual 10-hour in-service training requirement.

(8) Training requirements for physical restraint holds pursuant to 10A NCAC 70E .1103.

Most supervising agencies do not permit the foster parents they supervise to use physical restraint holds. If their agency permits the use of physical restraints, before they can use physical restraint holds foster parents must complete at least 16 hours of training by a certified/approved trainer in behavior management. The training must include techniques for de-escalating problem behavior, the appropriate use of physical restraint holds recognized by the North Carolina Division of Mental Health, Developmental Disabilities, and Substance Abuse Services as approved physical restraint holds, monitoring of vital indicators, and debriefing children and foster parents involved in physical restraint holds. To remain certified to use physical restraint holds, every year foster parents must complete at least eight hours of behavior management training by a certified/approved trainer, including techniques for de-escalating problem behavior. This training counts toward the foster parents' annual in-service training requirement.

**FOSTER HOME LICENSING
WATER HAZARD SAFETY ASSESSMENT FORM
NORTH CAROLINA DIVISION OF SOCIAL SERVICES**

Instructions: The supervising agency shall assess the (prospective) foster family's home, property and surrounding property for the existence of water hazards. The results of the assessment and the information gathered based upon the child's age and developmental level, will be used to determine the family's ability to keep children safe from water hazards. The Supervising Agency shall take photographs of the body of water or pool from four different vantage points. The Supervising Agency shall attach the four photographs to the DSS-5016 Foster Home License Application.

Supervising Agency Name: _____

Licensing Social Worker Name: _____ Assessment Date: _____

Foster Parent(s) Name: _____

Address of foster home: _____

I. SWIMMING POOLS

Does the family have a swimming pool on their property or on the property on which they live (i.e. apartment or condominium complex)? **yes** **no**; If yes, answer the following questions; If no, skip to Section II.

- Is the pool above ground? **yes** **no**; If you answer yes, does the ladder lock into place or can it be removed so it is inaccessible? **yes** **no**; **If the answer to this question is no, STOP. The home cannot be licensed until the family complies with this rule.**
- Is the pool inground? **yes** **no**; If you answer yes, is the pool enclosed by a fence that is at least 48" high with a gate that locks or does the family have a fence with a locked gate around the yard? **If the answer to this question is no, STOP. The home cannot be licensed until the family complies with this rule.**

II. OTHER WATER HAZARDS

1. Is there a water hazard such as a pond, lake, river or beach on the property of the home of the family that can be seen from the foster home at any time of year? **yes** **no**; If you answered yes, please describe the potential hazard.

2. If you answer yes to question 1, does the family have a fence with a locked gate that provides for a safe play space for children? **yes** **no**; **If the answer to this question is no, STOP. The home cannot be licensed until the family complies with this rule.**

3. Is there a water hazard such as a pond, lake, river or beach that is not on the family's property but may pose a risk? **yes** **no**; if yes, describe the potential water hazard. Please provide information that describes the proximity of the potential hazard to the home.

**FOSTER HOME LICENSING
WATER HAZARD SAFETY ASSESSMENT FORM
NORTH CAROLINA DIVISION OF SOCIAL SERVICES**

WATER SAFETY PLAN

Instructions: If any water safety hazard was identified during the Water Hazard Safety Assessment, or if any water safety hazard was identified during the Initial Kinship Provider Assessment, this section must be thoughtfully completed by the (prospective) foster family / kinship provider.

For (prospective) foster families, this section must be completed in full regardless of the preferred age of the child the family wishes to foster.

Regarding potential water hazards, what is the family's plan to maintain adequate supervision to ensure the safety of a child in your care according to the following age/developmental age groups?

Age Group	Plan for Supervision and Water Safety
0 – 3 years	
4 – 7 years	
8 – 11 years	
12 – 15 years	
16 years and older	

Applicant's printed name and signature:	
Applicant's printed name and signature:	
Applicant's Phone Number:	
Applicant's E-mail Address	

Social Worker's printed name and signature:	
Social Worker's Phone Number:	
Social Worker's E-mail Address	

**FOSTER HOME LICENSING
INDIVIDUAL WATER HAZARD SAFETY PLAN
NORTH CAROLINA DIVISION OF SOCIAL SERVICES**

Purpose: This safety plan is developed to provide the foster family the opportunity to document the safety measures they will implement to ensure that a child placed under their care will be safe while living in close proximity of a known, potential water hazard such as a pool, pond, lake, river, or beach.

Given the variation of developmental stage, age, and competencies around water, this form is to be completed for each child placed in a foster home where a water safety hazard has been identified during the licensure process. The foster parent should complete this form within three (3) calendar days of the child being placed in the home.

This form shall be filed in the case record for the child and a copy of this form shall be filed in the foster family licensing record.

Foster Parent(s)'s Name: _____

Child's Name: _____ Age: _____

Date of Placement: _____ Date of Safety Plan _____

Supervising Agency's Name: _____

I. Child's Specific Information:

1. Describe any developmental delays, learning disabilities, concerning behaviors, and/or physical limitations the child is known to have at the time of placement.

2. Does the child know how to swim and/or is aware of safety precautions around bodies of water to include but not limited to pools, lakes, rivers, streams, etc.?

II. Safety Plan

1. What types of safety devices i.e. lifejackets, flotation devices, etc. the foster parent(s) has for the child to use when around bodies of water.

**FOSTER HOME LICENSING
INDIVIDUAL WATER HAZARD SAFETY PLAN
NORTH CAROLINA DIVISION OF SOCIAL SERVICES**

2. Foster parent(s)'s description of supervision that will be provided when the child is near bodies of water to include but not limited to pools, hot tubs, wading pools, ponds, lakes, etc.

3. What are the rules the foster parent(s)'s has communicated to the child about the potential water hazard?

4. What techniques and strategies the foster parent(s) has knowledge of and the ability to perform in the event of an emergency? Please list any certifications or trainings received with dates.

III. Signatures:

Foster Parent 1	Foster Parent 2
Foster Parent's Signature/Date	Foster Parent's Signature/Date