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## **Resource Family Written Report Instructions**

This Resource Family Written Report has been prepared in compliance with the Written Directives for Counties and the Interim Licensing Standards for Foster Family Agencies (FFA). It contains confidential information that shall not be disclosed except for authorized purposes. This report may be shared with county staff for the purposes of placement matching of children only.

When completing the Resource Family Written Report, the County, Department, or foster family agency may use this form (RFA 05) or another template. If using another template, the content contained in the RFA 05 must be included in the template to ensure it adheres to the RFA standards.

It is important for a worker to use his or her knowledge, skills, and abilities to determine when additional information should be included in the Written Report and assessed utilizing best practices when evaluating an applicant.

If, at any time, the County, Department, or foster family agency determines it has sufficient information to deny approval of an applicant, it may cease further review of the applicant(s) and include the relevant conclusions in the Written Report.

**COUNTIES ONLY:** Counties that are considering a denial of approval are strongly encouraged to discuss the potential denial during a legal consult with CDSS Legal Division prior to making a final determination to deny approval of an applicant.

**FOSTER FAMILY AGENCIES ONLY:** FFA's that are considering a denial of approval are strongly encouraged to discuss the potential denial with their agency's management and/or their legal counsel as appropriate prior to making a final determination to deny approval of an applicant.

No application shall be denied based upon an applicant's age, sex, race, religion, color, national origin, disability, marital status, gender identity, gender expression, actual or perceived sexual orientation, medical condition, genetic information, or ancestry.

The Written Report should be a summary, analysis, and determination of an applicant's suitability to foster, adopt, or provide legal guardianship of a child or nonminor dependent based on all the information gathered through the Resource Family Approval application and comprehensive assessment processes. The worker should include information contained in this document to determine the strengths of the applicant(s), including the rationale for the strength and how it supports the applicant's ability to meet the qualifications to be a Resource



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Family. The worker should also document any concerns and describe any historical or current events contributing to the concern, the frequency and duration of the concern, how the concern was (or attempted to be) resolved, and the impact this concern has on the applicant's ability to meet the qualifications as a Resource Family.

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<b>RESOURCE FAMILY INFORMATION</b>	
<b>Applicant 1</b> (Full Name):	<b>Applicant 2</b> (Full Name):
<b>Telephone:</b>	<b>Telephone:</b>
<b>Address:</b>	
<b>Application Received Date:</b>	
<input type="checkbox"/> <b>Approval/</b> <input type="checkbox"/> <b>Denial Date:</b>	

<b>Type of Care Resource Family is Primarily Interested in Providing (Check all that apply)</b>	
<b>Foster Care:</b> <input type="checkbox"/>	<b>Adoption:</b> <input type="checkbox"/>
<b>Legal Guardianship:</b> <input type="checkbox"/>	

<b>Summary of Identifying Information of Family</b>
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*Include at minimum the following information regarding the demographics of the family.*

- Identifying Information of an applicant and any children or adult residing in the home (Include all adults and children, Identify foster children in the home as "Child #1, etc. and complete the last page):

<b>Applicant 1:</b>	
<b>Date of Birth:</b>	<b>Gender:</b>
<b>Ethnicity:</b>	
<b>Tribal Affiliation (if any):</b>	
<b>Occupation:</b>	
<b>Relationship (Married, Divorced, Domestic Partner, etc.):</b>	
<b>Language(s) Spoken:</b>	

<b>Applicant 2:</b>	
<b>Date of Birth:</b>	<b>Gender:</b>
<b>Ethnicity:</b>	
<b>Tribal Affiliation (if any):</b>	
<b>Occupation:</b>	
<b>Relationship (Married, Divorced, Domestic Partner, etc.):</b>	

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<b>Language(s) Spoken:</b>
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<input type="checkbox"/> Adult/ <input type="checkbox"/> Child residing in the home:	
<b>Date of Birth:</b>	<b>Age:</b>
<b>Gender:</b>	
<b>Ethnicity:</b>	
<b>Tribal Affiliation (if any):</b>	
<b>Relationship (for a child, include whether the relationship is biological, adoption, guardianship, or other):</b>	
<b>Language(s) Spoken:</b>	
<b>Result of TB Screening for Adults:</b>	

<input type="checkbox"/> Adult/ <input type="checkbox"/> Child residing in the home:	
<b>Date of Birth:</b>	<b>Age:</b>
<b>Gender:</b>	
<b>Ethnicity:</b>	
<b>Tribal Affiliation (if any):</b>	
<b>Relationship (for a child, include whether the relationship is biological, adoption, guardianship, or other):</b>	
<b>Language(s) Spoken:</b>	
<b>Result of TB Screening for Adults:</b>	

<input type="checkbox"/> Adult/ <input type="checkbox"/> Child residing in the home:	
<b>Date of Birth:</b>	<b>Age:</b>
<b>Gender:</b>	
<b>Ethnicity:</b>	
<b>Tribal Affiliation (if any):</b>	
<b>Relationship (for a child, include whether the relationship is biological, adoption, guardianship, or other):</b>	
<b>Language(s) Spoken:</b>	
<b>Result of TB Screening for Adults:</b>	

<input type="checkbox"/> Adult/ <input type="checkbox"/> Child residing in the home:	
<b>Date of Birth:</b>	<b>Age:</b>
<b>Gender:</b>	
<b>Ethnicity:</b>	
<b>Tribal Affiliation (if any):</b>	

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<b>Relationship (for a child, include whether the relationship is biological, adoption, guardianship, or other):</b>
<b>Language(s) Spoken:</b>
<b>Result of TB Screening for Adults:</b>

<input type="checkbox"/> Adult/ <input type="checkbox"/> Child residing in the home:	
<b>Date of Birth:</b>	<b>Age:</b>
<b>Gender:</b>	
<b>Ethnicity:</b>	
<b>Tribal Affiliation (if any):</b>	
<b>Relationship (for a child, include whether the relationship is biological, adoption, guardianship, or other):</b>	
<b>Language(s) Spoken:</b>	
<b>Result of TB Screening for Adults:</b>	

<input type="checkbox"/> Adult/ <input type="checkbox"/> Child residing in the home:	
<b>Date of Birth:</b>	<b>Age:</b>
<b>Gender:</b>	
<b>Ethnicity:</b>	
<b>Tribal Affiliation (if any):</b>	
<b>Relationship (for a child, include whether the relationship is biological, adoption, guardianship, or other):</b>	
<b>Language(s) Spoken:</b>	
<b>Result of TB Screening for Adults:</b>	

- Any other relevant information

### Summary of Home Environment Assessment

*Evaluate and determine whether the applicant's home is safe and in compliance with the requirements contained in the Written Directives for Counties or the Interim Licensing Standards for Foster Family Agencies.*

The home of the applicant(s) meets the home environment assessment standards.

DAP Attached, if applicable

Fire Clearance Attached, if applicable

The home of the applicant(s) does not meet the home environment assessment standards.

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*If home does not meet the home environment standards, provide information regarding what standards are not met and what attempts to resolve them were made.*

<b>General Description of the Home</b>
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*To assist a placing agency with a general description of the home, the County/agency shall provide the following information:*

Description of the home (inside and outside) and neighborhood including the following:

- Type of residence (single family home, apartment, etc.)
- The number of bedrooms/bathrooms
  - Distribution of family members in bedrooms
  - How many children (including current children in the home) may occupy bedrooms in accordance with the Written Directives for Counties or the Interim Licensing Standards for Foster Family Agencies.
- How long the family has lived there
- Proximity to services (schools, hospitals, etc.)
- Any other relevant information (e.g. weapons in the home)

<b>Summary of Background Check Assessment</b>
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All required components of the background check assessment pursuant to the Written Directives for Counties or the Interim Licensing Standards for Foster Family Agencies were completed for the following individuals. A discussion regarding the results of a background check assessment of each individual listed here will be addressed later on in this report:

- Insert Applicant 1 Name
- Insert Applicant 2 Name
- Insert Names of Other Adults Residing or Regularly Present in the Home

The applicant(s) and all adults residing or regularly present in the home have met the background check assessment standards

The applicant(s) or any adult residing or regularly present in the home have NOT met the background check assessment standards

*If the applicant(s) or any adult residing or regularly present in the home have not met the background check assessment, explain the reason(s).*

<b>Summary Assessment of Family</b>
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*Complete separately for each applicant.*

**Include at a minimum the following information:** (as specified in Written Directive for Counties or the Interim Licensing Standards for Foster Family Agencies)

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## Applicant 1:

- (1) Description of childhood upbringing and experiences - Some items to consider include:
  - Description of childhood
  - Geographic location
  - Applicant's parent's history of marriages, divorces, domestic partnerships
  - Siblings
  - Childhood relationship with parents, siblings, other significant figures
  - Discipline methods in family of origin
  - History of substance abuse within family
  - History of physical, emotional, and sexual abuse and domestic violence within family of origin
  - Other significant events
- (2) Description of adult experiences and personal characteristics - Some items to consider include:
  - Adult relationship with parents, siblings, other significant figures
  - Coping strategies
- (3) Risk assessment, shall include but not be limited to:
  - Physical, emotional, and sexual abuse and family domestic violence history
  - Past and current alcohol and other substance abuse/use
  - Past and current physical and mental health – Some items to consider include any physical restrictions/limitations, list of current medications, date and results of health report and TB screening
- (4) Current marital status and history of marriages, domestic partnerships, or significant relationships – Some items to consider may include:
  - Applicant's view on the relationship
  - Significant events during the relationship
  - Relationship roles
  - Coping strategies
  - Parenting values
    - Discipline values/practices
  - Areas of major disagreement
- (5) Children living in or out of the home
- (6) Parenting approaches – Some items to consider may include:
  - Parenting experiences
- (7) Discipline practices/values
- (8) Social support system

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- (9) Educational experiences
- (10) Employment – Some items to consider include:
  - Occupational history
  - Specialized skills (nurse, teacher etc.)
- (11) Financial situation
- (12) Motivation to become a Resource Family - Some items to consider may include:
  - The applicant’s relationship to a specific child (if any)
  - The desire to care for foster children
- (13) Any other relevant information
- (14) Discussion of the Background Check Assessment results – Some items to consider may include:
  - Applicant’s description of what occurred and the applicant’s determination of the likelihood of reoccurrence
  - Other adult’s description of what occurred and the adult’s determination of the likelihood of reoccurrence

## Applicant 2:

- (1) Description of childhood upbringing and experiences - Some items to consider include:
  - Description of childhood
  - Geographic location
  - Applicant’s parent’s history of marriages, divorces, domestic partnerships
  - Siblings
  - Childhood relationship with parents, siblings, other significant figures
  - Discipline methods in family of origin
  - History of substance abuse within family
  - History of physical, emotional, and sexual abuse and domestic violence within family of origin
  - Other significant events
- (2) Description of adult experiences and personal characteristics - Some items to consider include:
  - Adult relationship with parents, siblings, other significant figures
  - Coping strategies
- (3) Risk assessment, shall include but not be limited to:
  - Physical, emotional, and sexual abuse and family domestic violence history
  - Past and current alcohol and other substance abuse/use

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- Past and current physical and mental health – Some items to consider include any physical restrictions/limitations, list of current medications, date and results of health report and TB screening
- (4) Current marital status and history of marriages, domestic partnerships, or significant relationships – Some items to consider may include:
  - Applicant’s view on the relationship
  - Significant events during the relationship
  - Relationship roles
  - Coping strategies
  - Parenting values
    - Discipline values/practices
  - Areas of major disagreement
- (5) Children living in or out of the home
- (6) Parenting approaches – Some items to consider may include:
  - Parenting experiences
- (7) Discipline practices/values
- (8) Social support system
- (9) Educational experiences
- (10) Employment – Some items to consider include:
  - Occupational history
  - Specialized skills (nurse, teacher etc.)
- (11) Financial situation
- (12) Motivation to become a Resource Family - Some items to consider may include:
  - The applicant’s relationship to a specific child (if any)
  - The desire to care for foster children
- (13) Any other relevant information
- (14) Discussion of the Background Check Assessment results – Some items to consider may include:
  - Applicant’s description of what occurred and the applicant’s determination of the likelihood of reoccurrence
  - Other adult’s description of what occurred and the adult’s determination of the likelihood of reoccurrence

<b>Summary Interviews with Other Adults and Children Residing in the Home</b>
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Some items to consider may include:

- Individual’s opinions on applicant’s ability to parent.

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- Strengths/challenges of applicant(s).
- Any other relevant information.

Characteristics and demographics of a child/nonminor dependent best served by the Resource Family.

<b>Summary of Pre-Approval Training</b>
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Provide a brief description of training the applicant(s) completed, including the number of hours and any evaluation feedback provided by the trainer(s).

Describe any specialized training the applicant(s) completed, if any.

<b>Determination of Applicant's Commitment and Capability to Meet the Needs of a Child/Nonminor Dependent</b>
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*Review all information gathered through the Resource Family Approval application and assessment processes and provide a determination of the applicant's commitment and capability to meet the needs of a child or nonminor dependent. Include at minimum the following items:*

Strengths/weaknesses of each applicant – Some items to consider may include:

Applicant 1:

- Concerns documented by supporting evidence/information.
- Attempts by the County/agency or applicant(s) to resolve/mitigate the concerns.
- The RFA worker's determination of whether the concern has been resolved.
- Additional resources/services/training RFA worker recommends to a family to enhance their parenting skills/abilities or to meet the needs of a child or nonminor dependent.
- The applicant's understanding of the needs, safety, permanence, and well-being of children or nonminor dependents, including those who have been victims of abuse or neglect.
- The applicant's ability and willingness to participate in the Quality Parenting Initiative Partnership Plan, if applicable.
- Willingness of the applicant(s) to work collaboratively with service providers, public agencies etc.
- A summary of the applicant's understanding of the legal and financial responsibilities for providing care to a child or nonminor dependent. Some items to consider shall include:

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- Ability to maintain family financial stability personal rights for foster youth
- Prudent parent standards/requirements
- Due process rights
- Any other relevant information

## Applicant 2:

- Concerns documented by supporting evidence/information.
- Attempts by the County/agency or applicant(s) to resolve/mitigate the concerns.
- The RFA worker's determination of whether the concern has been resolved.
- Additional resources/services/training RFA worker recommends to a family to enhance their parenting skills/abilities or to meet the needs of a child or nonminor dependent.
- The applicant's understanding of the needs, safety, permanence, and well-being of children or nonminor dependents, including those who have been victims of abuse or neglect.
- The applicant's ability and willingness to participate in the Quality Parenting Initiative Partnership Plan, if applicable.
- Willingness of the applicant(s) to work collaboratively with service providers, public agencies etc.
- A summary of the applicant's understanding of the legal and financial responsibilities for providing care to a child or nonminor dependent. Some items to consider shall include:
  - Ability to maintain family financial stability personal rights for foster youth
  - Prudent parent standards/requirements
  - Due process rights
- Any other relevant information

A statement that the applicant has been provided with information about the foster care payment rates, Kin-GAP, and AAP.

Capacity Determination – List the number of children or nonminor dependents for whom the applicant is capable of providing care. Some items to consider may include:

- Applicant's request for number of children
- Agency's determination of capacity and justification if different than applicant's request



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### Approval/Denial of Resource Family Approval

State the determination of approval/denial of Resource Family Approval. Include, at minimum the following:

- Justification of determination with supporting evidence/documentation
- Determination whether or not the family has demonstrated all elements as indicated in the Written Directives for Counties or the Interim Licensing Standards for Foster Family Agencies. Suggested language as follows:

*During the comprehensive assessment of the applicant(s), they have demonstrated all of the following:*

- 1) An understanding of the safety, permanence, and well-being needs of children and nonminor dependents who have been victims of child abuse and neglect.*
- 2) An ability and willingness to meet those needs, including the need for protection.*
- 3) A willingness to make use of support resources offered by the agency, or a support structure in place, or both.*
- 4) An understanding of children's and/or nonminor dependents' needs and development, effective parenting skills or knowledge about parenting.*
- 5) An ability to act as a reasonable and prudent parent in day to day decision making.*
- 6) An understanding of his or her role as a Resource Family.*
- 7) An ability to work cooperatively with the agency and other service providers in implementing a child's or nonminor dependent's case plan.*

### Resource Family Approval

*Amend language as appropriate*

I certify that \_\_\_\_\_ has/have successfully met the application and  
(Insert names of applicant(s))  
assessment criteria of a Resource Family and is approved to provide care for up to  
\_\_\_\_\_.  
(Insert capacity number)

Or

I certify that \_\_\_\_\_ has/have not met the application and  
(Insert names of applicant(s))  
assessment criteria of a Resource Family and the application has been denied.



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_____	_____	_____
RFA Worker Printed Name	Signature	Date
_____	_____	_____
Supervisor Printed Name	Signature	Date

Receipt of RFA Written Report		
<b>By signing below I acknowledge that I have received a copy of this report.</b>		
_____	_____	_____
Applicant 1 Printed Name	Signature	Date
_____	_____	_____
Applicant 2 Printed Name	Signature	Date

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**SAMPLE: nov 8, 2016****Considerations for Placing Agency**

Provide additional information that may be beneficial for a placing agency to consider before placing a child with the family. An example of considerations may include:

- Family's willingness to accept probation children
- Behaviors the family is best equipped/not equipped to manage
- Family's ability to maintain a child's cultural ties
- Any other relevant information

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### **Confidential List of Foster Children**

*This page is to remain confidential and is not to be attached to copies of the Written Report.*

Child #1: Insert Name of Child \_\_\_\_\_ Date Placed: \_\_\_\_\_

Child #2: Insert Name of Child \_\_\_\_\_ Date Placed: \_\_\_\_\_

Child #3: Insert Name of Child \_\_\_\_\_ Date Placed: \_\_\_\_\_

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