

Resource Family Document Guidelines (DHS)

I. Agency Completing Document:

Agency		County of Agency	
Street Address			
City	State	Zip Code	
Agency Contact Person	Email Address	Telephone Number	

Checklist of Attachments:

- Home Safety Checklist
- Family Autobiography
- Transfer of Learning (TOL) Summaries
- Recent Applicant(s) Physical Examination**
- Current Clearances for All Adults Residing in Household**
- Recent Family Financial Summary**
- Applicant References**

** Attachments on file with Affiliate, will be released upon request of the placing county

II. Family Information:

Applicant name (First, MI, Last)				
Occupation/Stay at home parent		Briefly describe work schedule		
Date of Birth:		Race/Ethnic Group (Check all that apply)		
Place of Birth:		<input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Caucasian <input type="checkbox"/> Other (please specify):		
Street Address	City	County	State	Zip Code
Telephone Number	Current Marital Status			
Additional Information:				

This document is intended to be a guide for completion of the Resource Family Profile. However, this document does not relieve your agency of any obligation under state law, or regulations including, but not limited to, 55PA Code, 3700, et seq, ACT 160, ACT 73, and The Child Protective Services Law.

Applicant name (First, MI, Last)				
Occupation/Stay at home parent		Briefly describe work schedule		
Date of Birth:		Race/Ethnic Group (Check all that apply)		
Place of Birth:		<input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Caucasian <input type="checkbox"/> Other (please specify):		
Street Address	City	County	State	Zip Code
Telephone Number	Current Marital Status			
Additional Information:				

Please attach a cover sheet on agency letterhead that includes a small narrative paragraph in which the following information will be shared: Resource family name, name of identified child(ren) achieving permanency, date of termination of parental rights (if applicable), date the referral was received and how long child(ren) has been in the home.

II. Family Information

1. **Status of Family:** indicate if the applicant is a foster family with a child(ren) identified; a foster family with no child(ren) identified; an approved adoptive family with no child(ren) identified; or a kinship family. **Please include brief introduction of family/relationships and has the family provided permanency for a child(ren) previously.**
2. **Household Members & Family Relationships:** Include in this section: information regarding existing family relationships, attitudes and expectations regarding the applicant's own children and parent/child relationships, especially as they might affect a foster child.
3. **Permanency option applicant wishes to provide:** identify the status of the permanency option by checking Adoption, Kinship Adoption, Foster to Adoption, or Permanent Legal Custodianship. (Kinship Adoptions involve fit and willing relatives (formal kinship))
4. **Applicant Name:** include first, middle, and last name of the potential resource parent. Space is provided for two applicants. **Include any AKA names or alias.**
5. **Occupation/Stay at Home Parent:** indicate what the applicant does for a living. Enter "Stay at home parent" if the applicant is a stay at home parent. If the applicant works from the home, list the occupation and indicate that it is a home office or work from home situation.
6. **Briefly describe work schedule:** Briefly describe the applicant's work schedule: Does the applicant work a day, evening or overnight shift; work weekends; and/or have a flexible work schedule?
7. **Date of Birth:** indicate the month, day, and year the applicant was born as well as place of birth.
8. **Race/Ethnic Group and Gender:** indicate the race/ethnic group of the applicant. If the applicant is bi-racial, check the races that make up the applicant's ethnicity.
9. **Street Address:** include all address information, including the street, city, county, state, and zip code where the applicant resides.
10. **Telephone Number:** list the primary area code and phone number used to contact the applicant(s). **Please include cell phone telephone numbers.**
11. **Current Marital Status:** list the marital status of the applicant as married, single, divorced, widowed, separated, same sex, and other: describe.

12. Home Environment: Would the home environment be described as urban, suburban, or rural?

13. Comments: indicate any specific information that will assist in matching a child with the applicant and their family, including if any family members smoke; if the family has pets; or any special family and home conditions.

III. Children in Family

Give the name, date of birth, gender and race of each child residing in the household, as well as those of the applicant's children who are not living at home. Include foster children residing with the applicant, and indicate their relationship to the applicants. Indicate if the child is residing in the household (either "yes" or "no").

IV. Other Adults Living in Household

Give the name, date of birth, gender, and race of all adults residing in the household, and their relationship to the applicant. If the adult is not a relative of the applicant, indicate "relationship."

V. Family Preparation Information

1. Include the name and phone number of the agency that provided the preparation.
2. Indicate whether SWAN orientation and training was completed (yes or no) and the date completed.
3. Include dates family and child/children to be who are achieving permanency were visited.
4. Indicate if the applicant received First Aid/CPR as well as any other additional preparation required by the affiliate agency. Note date completed.
5. Has the applicant had previous preparation activities related to a previous permanency placement, or as a foster parent?
6. Comment on the applicant's participation in family preparation activities, including level of participation.
7. Comment on the applicant's knowledge gains and changes in attitudes.
8. Comment on topics with which the applicant had difficulty or insights.
9. Describe the applicant's ability to cope with the decreased level of agency support as permanency approaches.
10. Provide any special anecdotal statements that provide insight into the applicant's growth process.

Note: The following questions should be related to the impact they pose on the parenting of the child(ren). The information is relevant only if it is related to its impact on the applicant's ability to parent a child(ren) with special needs. Responses should remain strength-based, with examples as to how the applicant's life experiences can help the child(ren).

Responses to each of the following categories should not exceed two pages. Be specific in your responses to each question.

VI. Attitudes Toward Permanency

1. Provide a brief description of the factors motivating the applicant to provide permanency; document discussion of what role, if any, the applicant's infertility has in providing motivation.
2. Indicate whether the family has ever achieved another permanency for a child (ren) before.
3. Document discussion of how all parties feel about the permanency plan (interview children in the home if age appropriate.)
4. Explain why the applicant is interested in providing permanency to a child with special needs and what are their expectations of this permanency option?
5. Does the applicant have a clear understanding of the children available, and are they flexible enough to accommodate a child's special needs?
6. Document discussion of the applicants' ability to meet the needs of the child based on the ages of the children and applicants.
7. Share a specific situation or occurrence that led them to a decision to provide permanency to a child with special needs.
8. Has the applicant had any experience or contact with other special needs children?
9. Explain what the applicant understands about the commitment needed to parent a child with special needs.
10. Document discussion of how the applicants' plan to talk about permanency with the child (ren) and at what point.
11. How will the applicants respond to birth parent issues? Document discussion of how the applicants plan to respond to the child's desire to know about birth family and their willingness to have contact with the birth and/or extended family.
12. How will the applicant's experiences and attitudes enable them to be capable parents of a child with special needs?
 - Describe the relationship between the applicant and the child(ren).
 - Has the applicant accepted that providing permanency to the child(ren) requires an "unconditional" commitment. Please explain.

- Document discussion of parenting between foster and adoption, PLC, Kinship and APPLA parenting, i.e. there are no board extensions to the subsidies they end on the child's 18th birthday.
- What are the reasons the applicant wants to provide permanency to this child(ren), and what is the quality of the applicant's attachment to the child(ren)?
- Has the applicant experienced a previous permanency disruption? If so, how were the termination decisions made, and how did the applicant feel about the disruption?

VII. Family Strengths

1. Describe the applicants' family history and education.
2. Describe the personal strengths of each applicant, including:
 - Personality characteristics;
 - Marital relationship(s);
 - Emotional status;
 - Attitudes toward race and religion.
3. Have there been substantial losses in the applicant(s) life, and how have these losses been overcome?
4. Have there been other stressful situations in the applicant(s) life? If yes, and the problem was not resolved, how is it being managed?
5. Describe the applicants' interests and talents.
6. What special accomplishments have the applicants experienced?
7. Describe any areas of expertise the applicants have that would allow them to parent children with particular special needs.
8. How will these strengths influence their ability to parent a child with special needs?

VIII. Health Information

1. Indicate the following information for **all household members**:
 - Dates of last physical for all household members; physical exams must be done within the last year (with date of exams) for all household members.
 - Special medical needs or conditions of any household member, and a description of how the needs are being met;
 - Special mental health needs or conditions of any household member, and a description of how the needs are being met;
 - Use of medication by any household member, including the type of medication, (be aware – this may not be specified within the physical examination form);
 - Communicable disease of any household member, and how the disease is being treated.

2. A statement of applicants' health status (note any concerns expressed by physician's report, and any health problems that may affect the applicants' ability to care for the child.) If health problems are noted, the physician needs to give a statement about the applicant's life expectancy and their ability to care for the child until the child is an adult.
3. Are there any specific family issues resulting from an individual's medical and/or mental health needs? If so, what effect will these issues have on the applicant's ability to parent a child with special needs?
 - Document discussion of any mental health history, current mental health issues or concerns. For resource parents who have a drug and/or alcohol history, this information must be shared in the resource family profile along with specifics of how the family has resolved their addiction issues. Keep in mind the focus is on the parents' ability to care for the children, both past and present.

IX. Clearances, References, Mandated Change of Status Statement, and ACT 160

1. Clearances

- Give the date of clearances and results for Police and Childline clearances for all household members over fourteen years old. FBI clearances are required for all adult household members 18 years and older. If the family lived in another state, within the last five years, they must have childline clearances from the state they previously resided in.
- All clearances must be done within the last year
- Clearances do not need to be attached to the resource family profile. Please retain the documents in your agency file.

2. References

- A minimum of three references must be provided. All references must have some awareness of the applicants' ability to care for a child(ren). All references must have the name of the person giving the reference, relationship to the applicant, and the date of the reference. Only one reference can be a relative of the applicant. A reference cannot be a social worker currently providing services to the family.
- All references must be current within the year of the completion of the Resource Family Profile. Original references can be updated over the phone and followed up by something in writing.
- References do not need to be attached to the Resource Family Profile. Please retain these documents in your agency file

Approved resource parents are required to report changes within their household composition as mandated in Act 160. This report must include any changes in the CHRI(Criminal History Record Information) or child abuse, or school employee abuse history clearance information about themselves and anyone 14 yrs and older. This report must be provided to the approving resource family care agency within 48 hours of the changes

Resource parents are required to report any other changes in the resource family household composition within 30 days of the change for review by the approving agency.

3. ACT 160

The following information must be documented / and or obtained during the application process:

- Previous addresses within the last ten years.
- Criminal history clearances (CHRI) and child abuse and school employee abuse history of the applicant(s) and anyone 14 years of age and older living in the home of the applicant for at least 30 days within a calendar year.
- Protection from abuse orders filed by or against either resource parent and/or anyone residing in the household, provided that such records in such proceedings are accessible to the county or private agency. The applicant should be asked to provide copies of any petitions or court orders related to such proceedings
- Details of any proceedings brought in family court regarding the applicant and/or anyone residing in the household, provided that such records in such proceedings are accessible to the county or private agency. The applicant should be asked to provide copies of any petitions or court orders related to such proceedings
- Information about drug related or alcohol related arrests and hospitalizations, if criminal charges or judicial proceedings are pending and if there are convictions or hospitalization within the last five years. If the applicant provides information regarding convictions or hospitalizations in that five year period, then information on the prior five years shall be requested related to any additional convictions or hospitalizations. The applicant should be asked to provide copies of any information regarding the court proceedings and/or hospitalizations and should sign a release so that the approving agency may obtain information from any treating hospital.
- The mental and emotional well-being of the resource family applicants. If there is any question regarding the mental or emotional stability or any person residing in the resource family household, a psychological evaluation of that person shall be required before approving the resource family household.
- Evidence of financial stability, including income verification, employment history, current liens and bankruptcy findings within the last ten years must be provided. Number and ages of foster children and other dependents currently placed in the home.
- Detailed information regarding children with special needs currently living in the home. The applicant or the individual authorized to sign a release must sign a release authorizing the approving agency to obtain information to confirm the special needs. Refusal to sign a release may result in disapproval of the resource family applicant.
- Related education, training or personal experience working with foster children and the child welfare system.

Disclosure Statement

DHS requires that the resource parent applicants and adults or a parent or legal guardian of a minor 14 years or older living in the household to sign a disclosure statement relating to the information that must be obtained and assessed. The parent or legal guardian of any 14-18 years old residing in the household also must sign a disclosure statement on behalf of the minor. The disclosure statement signifies that the applicant has provided accurate information and understands the responsibility to notify the agency of changes in clearances information for themselves and other household members 14 and older, as well as any changes in household

composition. The disclosure statements must be processed by the county with results reported in the family profile. Please note each county has different ACT160 procedures. Please contact the child's county for specific procedures. A new disclosure statement should be signed every year in conjunction with the reapproval process.

X. Home Environment

1. Describe the home the applicants reside in, including:
 - The style of the home (i.e. two story, rancher, etc.);
 - A description of the interior of the home, including the room layout.
 - Description of sleeping arrangements for all household members. Document discussion of future sleeping arrangements concerning younger children so that the family understands the requirements for future planning.
 - The outside space surrounding the home, including any detached buildings and play or recreational equipment.
 - Advise family to postpone any home remodeling to avoid delays in finalizing the permanency.

2. Do any household members have pets?

3. Verification that smoking is not allowed in the resource household

4. Discuss the relationship of the applicants to each other:
 - How long the applicants have been together?
 - Do they demonstrate a caring relationship with good communication and cooperation between them?
 - How do the applicants resolve disagreements?

5. Explain how well household members interact. Describe relationships and roles within the household.

6. Have there been any previous marriages or significant relationships, and if so:
 - Discuss the length of each marriage/significant relationship and the reason they dissolved
 - How did the applicants attempt to address problems in previous relationships? Indicate whether the applicant is separated or divorced.
 - Does the applicant have a relationship with the former spouse or children from prior relationships? If so, describe the relationship.
 - Do these past relationships have an effect on how household members interact?
 - If the applicant is separated from his/her spouse, an affidavit of separated parent is required by the Family Court of Philadelphia. If an affidavit cannot be obtained from the estranged spouse, provider must complete an affidavit of efforts to locate spouse and/or obtain affidavit.
 - Copies of marriage certificate and/or divorce decree must be obtained by the provider agency and document that it was seen including date and document number. Or, a copy of the document can be attached to the profile.

7. If the household includes a step-parent:
 - How do the children get along with the step-parent?
 - How well does the step-parent interact with the children?
 - How do current family members interact with previous spouses/partners and children from previous marriages not living in the household?
 - How will these relationships impact a child with special needs who may be joining the resource family through permanency??

8. What is the applicant's parenting style and method of discipline, and is it appropriate for all children in the family?
 - Describe the applicants' experience with birth children, foster children and others. If applicant is a resource parent, how long have they been with the provider agency? If the applicants have been resource parents with another agency, is that agency willing to give a brief statement of their professional relationship, including a recommendation?
 - Method of discipline, including a statement of use of non-physical means of discipline.
 - Recommend parenting classes for families who have used corporal punishment as a means of discipline.
 - Upon completion of parenting classes create either a statement/document that applicants will sign stating they are clear on the non- use of corporal punishment.

9. Describe how well the applicant provides care, guidance, and protection of their children currently in the home. In addition:
 - Are the needs of all children currently in the household being met?
 - Have children in the household been prepared for the arrival of a sibling with special needs?
 - Detail the child care arrangements in place for a child with special needs.

10. How will the applicant address the trans-cultural or trans-racial needs of the child?
 - If the family lives in an environment different from the identified child, the resource family profile should include information about what concerns exist and how they will be addressed.
 - What will the family do to ensure the child is connected to its heritage/culture?
 - What has been done by the family and provider agency regarding trans-racial and trans-cultural issues
 - Is the family aware of the unique health and cultural needs of the child (dietary laws, hair and body care, etc.)

11. How will the family composition and lifestyle influence the applicants, ability to parent a child with special needs?
 - Discuss special needs (emotional, physical, developmental, academic)
 - Ensure parents have a clear understanding of why children are attending therapy and the importance of their active participation in the process.

12. For a resource family who intends to provide permanency for an identified child will the applicant continue to be a resource family for either current or additional children? How will they plan for the individual needs of all children in their family?

XI. Community

1. Describe the applicant's neighborhood and community:
 - Would the neighborhood be described as urban, suburban, or rural?
 - How safe is the neighborhood? Identify any neighborhood social problems (i.e. abandoned homes, drug activity, etc.)
 - Describe health, educational and recreational resources as well as the racial diversity of the community.
 - Discuss the family's experience in utilizing community resources for special needs children or other family members.
2. Describe the school the child will be attending. Can the school and its programs support a child with special needs?
3. Can the social and cultural needs of the child be met in this community?

XII. Resources

1. What resources would benefit the applicant in an effort to secure permanency?
2. What formal (e.g. social services, community, or religious organizations) and informal resources (e.g. family, friends) are available for the applicant?
3. How willing is the applicant to seek and use resources/support?
4. Describe the applicants' religious practices, if any. What are their plans to involve the child(ren) in their religious practices?
5. Does the area where the applicant resides have accessible medical/mental health services for children with special needs, as well as access to post-finalization services?
6. Has a respite plan been developed?
7. All applicants need to identify someone who will be willing to care for the child in the event of their death or disability. Guardians need to be advised the subsidies are not transferable. Agency should provide a notarized affidavit of guardianship to reflect their knowledge and acceptance of this role.
8. If the applicant had a previous permanency disruption/dissolution, how did the applicant attempt to make use of formal and informal supports available to them?
9. Employment and financial management:
 - All income must be verified
 - i. Net monthly income and the means that this income is obtained (i.e. employment, social security, pension, etc.)
 - ii. Verification of income must be provided including the most recent income tax (1040) from.
 - iii. For those who don't file income tax, other forms of written verification (receipts, etc.) are required.

- iv. Foster care payments should be included and listed separately from the general income.\
 - v. Income from non traditional sources must have supporting documentation
 - vi. If the family refuses to provide documentation from non traditional income, indicate this in the Resource Family Profile
 - vii. Families whose income is only from substitute care per diem, although this is a concern, it is not a legal reason to deny approval. Providers should inform these families why it can become a potential problem in the future.
 - viii. Resource parents who have substantial savings and one or both parents are unemployed temporarily, this information, as well as the source, must be documented in the Resource Family Profile
 - ix. All resource families are required to live in dwellings in which the homeowner currently has fire and liability insurance. Renters insurance is strongly recommended for those who rent.
 - x. It is strongly recommended that applicants have medical and life insurance.
- Delineate monthly expenses such as mortgage, utilities, auto loan, credit card payments, etc.
 - Discuss the applicants' understanding of the types of subsidies, PLC and Adoption and whether the family is interested in only subsidy eligible children. Make sure the discussion includes the non-transferability of subsidies, as well as a clear understanding that a subsidy is used to "supplement" the monies of the resource family that is used for the care of the child(ren)

XIII. For Resource Family Preparation:

1. Explain the applicant's understanding of issues and emotions the child may have, and their understanding of how the roles of family members will change in a resource family home. Was child preparation provided? Yes? No? Explain
2. Describe how the applicant prepared for the child prior to the child's placement in resource family home.
3. What are the applicant's expectations/attitudes regarding contact from and visitation with the child's birth relatives while child is placed in the resource family home?
4. Describe the child's current and future relationship with their biological family as well as the PLC/Kinship visitation plan.

XV. Affiliate Signatures

1. Indicate whether the applicant has been recommended as a permanent resource family for a special needs child.
2. Specify what permanency goal the family has chosen..

3. State whether the resource family profile is approved and whether the applicant is recommended to provide permanency.
4. Document discussion of the Federal Mandate for Post-Permanency Services.
5. **If known**, list the names of specific children the profile is approved for.
6. If the applicant is not recommended for approval, indicate why in the space provided.
7. Upon reviewing the profile with the applicant, the profile writer/worker and their supervisor sign the document and indicate the date of the review. Include all appropriate agency signatures.

XVI. Applicant's Signature

1. **Applicant's with no identified child(ren):** the applicant(s) indicate the Resource Family Approval Document has been reviewed and is a fair and accurate representation of their family by placing a checkmark before the statement. The applicant(s) also indicate permission to share the Resource Family Approval Document with counties by placing a checkmark in the appropriate box. The name of the affiliate that can receive the Resource Family Approval Document will be written in the space provided. Lastly, each applicant signs and dates the section.
2. **Applicant's with an identified child(ren):** the applicant(s) indicate the Resource Family Approval Document has been reviewed and is a fair and accurate representation of their family by placing a checkmark before the statement. The applicant(s) also indicate their permission to forward the Family Approval Document to the county by placing a checkmark in the appropriate box. The name of the affiliate that can share the Resource Family Approval Document will be written in the space provided. Lastly, each applicant signs and dates the section.
3. **Applicants with an identified child(ren) and an interest in pursuing a match with another unidentified child:** the applicant(s) should complete and sign both of the previously mentioned sections.

This document is intended to be a guide for completion of the Resource Family Profile. However, this document does not relieve your agency of any obligation under state law, or regulations including, but not limited to, 55PA Code, 3700, et seq, ACT 160, ACT 73, and The Child Protective Services Law.