

# REQUIRED DOCUMENTS FOR CHILD PLACING AGENCIES



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### **Required Documents and Forms**

This guide lists the required documents and forms **Child Placing Agencies** must use to ensure they follow Washington State Law and <u>Chapter 110-147 WAC</u>. Different documents are required for New Kinship License (Child Specific), New Foster License (General), Provisional Expedited License, Renewal, Amendment (move), Modification, Updated Home Study for Adoption, and Certified In-home Respite Care. \*Any updates/changes from the last edition of this document are in **BOLD**.

- All documents are to be completed in WA CAP by applicants and CPAs, unless LEP or other accommodations are needed for the applicant.
- While the applicant may require LEP or other accommodations, CPAs must submit all documents through WA CAP.

#### New Kinship License (Child Specific)

Applicant Forms (completed by Applicant unless "waived" by CPA):

Document	Number	Date	Notes
Home Study or Reassessment Application	<u>DCYF 10-354</u>	11/2022	Do not list children in out of home care. CPA needs to provide "Public Notice of Nondiscrimination Publication" <u>HR_0012</u>
Authorization and Consent to Share Records (CPA Home)	<u>DCYF 15- 824A</u>	05/2023	Must be submitted with "Home Study or Reassessment Application" and "Background Confirmation and Out-of- State Check."
Background Confirmation and Out-of-State Check	<u>DCYF 15-460</u>	<mark>03/2024</mark>	Must be completed by anyone 16 years of age and older after they have submitted the online BAF. If BAF was already submitted thru Child Welfare, consult with Regional Licensor if new BAF is needed. <b>Practice Guidance</b> : <u>CPA Foster Home BG Steps</u>
Personal Information	<u>DCYF 15-276</u>	09/2022	There is no right or wrong answer. If additional info is needed to assess each applicant, CPA can obtain additional info during the interview(s).

Document	Number	Date	Notes
Applicant Medical – Confidential (Self-Report)	<u>DCYF 13-001A</u>	09/2022	Required for each applicant.
Emergency and Evacuation Plan	<u>DCYF 16-204</u>	01/2023	Page 2: Worker Information is to be completed by the applicant(s) outside of WA CAP (not sent to RL) then per the direction on the form, the family needs to <i>"post it (entire page 2) in a prominent location in their</i> <i>home."</i>
Infant Safety Agreement	DCYF 15-821	09/2022	Required for all adult household members.
WAC Agreement Checklist	DCYF 10-290	03/2023	Form must be reviewed and signed by each Applicant.
Applicant Medical Report - Confidential (Medical Provider)	DCYF 13-001	09/2022	<ul> <li>If applicable for adoption or mitigating issues/concerns, date of last physical exam needs to be within 12 months of application received date.</li> <li>Each applicant completes Section #1 and CPA either faxes or emails using secure email to the licensed healthcare provider.</li> </ul>

Agency Forms (completed by CPA):

Document	Number	Date	Notes
File Checklist and Certification for License of Foster Home	DCYF 10-016	<mark>3/2024</mark>	
Financial Worksheet	DCYF 14-452	9/2022	Income is subject to Relative Non-Safety Exemption/Suitable Other Waiver. Regardless of adoption recommendation or not, the form is not required for Kinship License. CPA can utilize the form as a tool during interviews to help assess financial stability and to provide resources and support.
Home Inspection Checklist (Licensed)	<u>DCYF 10-183</u>	03/2023	<ul> <li><u>Required in Person:</u> <ul> <li>One inspection minimum.</li> </ul> </li> <li><u>Virtual Inspection Permitted:</u> <ul> <li>Follow-up to verify, including photos or videos.</li> </ul> </li> <li>Resources:         <ul> <li>Safety Barrier Guidelines for Pools.pdf (cpsc.gov)</li> </ul> </li> </ul>
Limited English Proficient (LEP)/Deaf/Hard of Hearing Service Record	DCYF 15-245	10/2021	If applicable. CPA needs to complete the form documenting their compliance with the LEP requirement. Applicant's children are not allowed to serve as interpreters/translators for their parents.
Kinship License Non-Safety Exemption/Waiver (Licensed Home)	<u>DCYF 15-411G</u>	06/2023	<ul> <li>CPA assesses for the needs at the first home visit and marks the form accordingly.</li> <li>For Relatives, CPA signs and sends to RL for review prior to submitting the completed certification packet.</li> <li>For Suitable Others, CPA sends to RL for review prior to submitting the completed certification packet. Do not sign (needs to be signed by LD AA and Deputy)</li> </ul>
Supervision Plan for Site Specific Conditions	DCYF 10-419	11/2022	When applicable (trampolines, water hazards, etc.).

Home Study (completed by CPA):

Document	Number	Date	Notes
Home Study	<u>DCYF 10-043</u>	12/2023	<ul> <li>Interviews Required in Person:</li> <li>Primary applicant.</li> <li>All household children, including children in the care and custody of DCYF and children who reside in the home part-time; separate from others.</li> <li>Observation and documentation of non- verbal children.</li> <li>Virtual Interviews Permitted:</li> <li>Secondary applicant.</li> <li>Joint interview if two or more applicants.</li> <li>Separate, individual interviews with all other adult household members in home/on property.</li> <li>Consult the child's DCYF Case Worker or document attempts.</li> <li>Resources: Permanency Planning Matrix</li> </ul>

#### References (completion verified by CPA):

Document	Number	Date	Notes
Reference Questionnaire	<u>DCYF 15-286</u>	01/2023	<ul> <li>Two references of any relation. Best practice would be for at least one reference to have known both applicants for at least 2 years, but this is not a must.</li> <li>If one of them is from an adult child, that counts as the reference and a separate adult child reference is not needed.</li> </ul>
Adult Child Reference Questionnaire	<u>DCYF 15-286A</u>	01/2019	<ul> <li>Interview all adult children, or document attempts including:</li> <li>Two attempts minimum.</li> <li>Two different forms of communication on two different days.</li> <li>Document attempts or contact in home study. All adult children need to be interviewed even If they complete "Adult Child Reference Questionnaire" as one of the two required references.</li> </ul>

Supporting Documents (uploaded by Applicant or CPA):

Document	Number	Date	Notes
Valid government issued ID			Must be a valid driver's license if transporting children in out of home placement.
Training Marriage/Divorce/Death Verification			Subject to Relative Non-Safety Exemption/Suitable Other Waiver unless a safety issue exists. If applicable for the child specific needs: Certificates - upload by Applicant or CPA under the individual's Training Certificate section Training Log - upload by CPA in the Other/Miscellaneous CPA Documents section (and FamLink entry by Regional Licensing) If applicable for an adoption recommendation.
Floor Plan			CPA is expected to assist the Kinship applicant with the drawing and must upload in WA CAP.
Applicant Mental Health Report - Confidential	<u>DCYF 13-001B</u>	07/2022	<ul> <li>If applicable to mitigate issues/concerns.</li> <li>Applicant completes Section #1 and CPA either faxes or emails using secure email to the mental health provider.</li> <li>Upload by CPA under the individual's Miscellaneous Documents section.</li> </ul>

#### Required Documents for Kinship License Renewal (Child Specific)

Applicant forms (completed by Applicant unless "waived" by CPA):

Document	Number	Date	Notes
Reassessment Application	DCYF 10-354	11/2022	Do not list children in out of home care.
			CPA needs to provide "Public Notice of Nondiscrimination Publication" <u>HR_0012</u>
Authorization and Consent to Share Records (CPA Home)	DCYF 15-824A	05/2023	Must be submitted with "Home Study or Reassessment Application" and "Background Confirmation and Out-of-State Check."
Background Confirmation and Out-of-State Check	DCYF 15-460	<mark>03/2024</mark>	Needs to be completed by anyone 16 years of age and older after they have submitted the online BAF.
			Practice Guidance: <u>CPA Foster Home BG Steps</u>
Applicant Medical - Confidential (Self-Report)	DCYF 13-001A	09/2022	Required for each applicant.

Document	Number	Date	Notes
Emergency and Evacuation Plan	<u>DCYF 16-204</u>	01/2023	Page 2/Worker Information is to be completed by the applicant(s) outside the WA CAP (not sent to RL) then per the direction on the form, the family needs to "post it (entire page 2) in a prominent location in their home."
Infant Safety Agreement	<u>DCYF 15-821</u>	09/2022	Required for all adult household members.
WAC Agreement Checklist	DCYF 10-290	03/2023	Form must be reviewed and signed by each Applicant.
Applicant Medical Report - Confidential (Medical Provider)	<u>DCYF 13-001</u>	09/2022	<ul> <li>If applicable for mitigating new issues/concerns, the date of last physical exam needs to be within 12 months of renewal application received date.</li> <li>Applicant completes Section #1 and CPA either faxes or emails using secure email to the licensed healthcare provider.</li> </ul>

#### Agency Forms (completed by CPA):

Document	Number	Date	Notes
File Checklist and Certification of Foster Home	DCYF 10-016	<mark>03/2024</mark>	
Financial Worksheet	<u>DCYF 14-452</u>	9/2022	Income is subject to Relative Non-Safety Exemption/Suitable Other Waiver. If finances have decreased significantly, CPA can utilize the form as a tool during interviews to help assess financial stability and to provide resources and support.
Home Inspection Checklist (Licensed)	<u>DCYF 10-183</u>	03/2023	<ul> <li><u>Required in Person:</u></li> <li>One inspection minimum.</li> <li><u>Virtual Inspection Permitted:</u></li> <li>Follow-up to verify, including photos or videos.</li> </ul>

Document	Number	Date	Notes
Foster Home Reassessment	<u>DCYF 10-405</u>	06/2023	<ul> <li>Interviews Required in Person:</li> <li>Primary applicant</li> <li><u>Virtual Interviews Permitted:</u></li> <li>With secondary applicant, if needed.</li> <li>Separate, individual "mini" interviews with all other new household members in home/on property.</li> <li>Details on sleeping arrangements (who sleeps where and types of bed for children in out of home care) should be included in box #8 even if the home has not moved</li> </ul>
Limited English Proficient (LEP)/Deaf/Hard of Hearing Service Record	<u>DCYF 15-245</u>	10/2021	If applicable. CPA needs to complete the form documenting their compliance with the LEP requirement. Applicant's children are not allowed to serve as interpreters/translators for their parents.
Kinship License Non-Safety Exemption/Waiver (Licensed Home)	<u>DCYF 15-411G</u>	06/2023	<ul> <li>CPA assesses for the needs at the first home visit and marks the form accordingly.</li> <li>For Relatives, CPA signs and sends to RL for review <b>prior</b> to submitting the completed certification packet.</li> <li>For Suitable Others, CPA sends to RL for review <b>prior</b> to submitting the completed certification packet. Do not sign (needs to be signed by LD AA and Deputy)</li> </ul>
Supervision Plan for Site Specific Conditions	<u>DCYF 10-419</u>	11/2022	When applicable (trampolines, water hazards, etc.).

Supporting Documents (uploaded by Applicant or CPA):

Document	Number	Date	Notes
Valid government issued ID			Must be a valid driver's license if transporting children in out of home placement. Upload by Applicant or CPA.
Training			<ul> <li>Subject to Relative Non-Safety Exemption/Suitable</li> <li>Other Waiver unless a safety issue exists. If</li> <li>applicable for the child specific needs,</li> <li>Certificates -upload by Applicant or CPA under the individual's Training Certificate section</li> <li>Training Log - upload by CPA in the Other/Miscellaneous CPA Documents section (and FamLink entry by Regional Licensing)</li> </ul>
Floor Plan			CPA is expected to assist the Kinship applicant with the drawing and must upload in WA CAP.
Applicant Mental Health Report - Confidential	<u>DCYF 13-001B</u>	07/2022	<ul> <li>If applicable to mitigate any new concerns/issues.</li> <li>Applicant completes Section #1 and CPA either faxes or emails using secure email to the mental health provider.</li> <li>Upload by CPA under the individual's Miscellaneous Documents section</li> </ul>

#### Required Documents for New Foster License (General)

#### Applicant Forms (completed by Applicant and not to be "waived" by CPA):

Document	Number	Date	Notes
Home Study or Reassessment Application	DCYF 10-354	11/2022	Do not list children in out of home care. CPA needs to provide "Public Notice of Nondiscrimination Publication" <u>HR_0012</u>
Authorization and Consent to Share Records (CPA Home)	<u>DCYF 15- 824A</u>	05/2023	Must be submitted with "Home Study or Reassessment Application" and "Background Confirmation and Out-of-State Check."
Background Confirmation and Out-of-State Check	DCYF 15-460	<mark>03/2024</mark>	Must be completed by anyone 16 years of age and older after they have submitted the online BAF. <b>Practice Guidance</b> : <u>CPA Foster Home BG Steps</u>
Personal Information	DCYF 15-276	09/2022	There is no right or wrong answer. If additional info is needed to assess the applicant(s), CPA can obtain additional info during the interview(s).
Applicant Medical – Confidential (Self-Report)	DCYF 13-001A	09/2022	Required for each applicant.

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Document	Number	Date	Notes
Emergency and Evacuation Plan	<u>DCYF 16-204</u>	01/2023	Page 2/Worker Information is to be completed by the applicant(s) outside the WA CAP (not sent to RL) then per the direction on the form, the family needs to "post it (entire page 2) in a prominent location in their home."
Infant Safety Agreement	<u>DCYF 15-821</u>	09/2022	Required for all adult household members.
Financial Worksheet	DCYF 14-452	9/2022	Income verification is only needed when applicable for adoption.
TB Screening Tool	<u>DCYF 15-820</u>	06/2023	<ul> <li>Active TB Screening for each person 18 and older in the home/on the property.</li> <li>Latent TB Screening for each person 18 and older in the home/on the property.</li> <li>TB Test when screening indicates.</li> </ul>
Pet Vaccination Agreement	DCYF 15-826	06/2023	If applicable. No Rabies verification is required.
WAC Agreement Checklist	DCYF 10-290	03/2023	Form must be reviewed and signed by each Applicant.
Influenza Vaccination Agreement	DCYF 15-822	09/2022	The agreement is only signed by each Applicant. CPA needs to verify the completion of agreement, not the actual flu vaccination.
Applicant Medical Report - Confidential (Medical Provider)	<u>DCYF 13-001</u>	09/2022	<ul> <li>If applicable for adoption or mitigating issues/concerns, date of last physical exam needs to be within 12 months of application received date.</li> <li>Applicant completes Section #1 and CPA either faxes or emails using secure email to the licensed healthcare provider.</li> </ul>

Agency Forms (completed by CPA):

Document	Number	Date	Notes
File Checklist and Certification for License of Foster Home	DCYF 10-016	<mark>03/2024</mark>	
Home Inspection Checklist (Licensed)	<u>DCYF 10-183</u>	03/2023	<ul> <li><u>Required in Person:</u></li> <li>One inspection minimum.</li> <li><u>Virtual Inspection Permitted:</u></li> <li>Follow-up to verify, including photos or videos.</li> <li><u>Resources:</u></li> <li><u>Safety Barrier Guidelines for Pools.pdf (cpsc.gov)</u></li> </ul>

Document	Number	Date	Notes
Individual Training Plan	<u>DCYF 06-166</u> or CPA documentation	11/2022	CPA can discuss the training plan with each applicant and either complete/upload the form in WA CPA or include the training plan discussion in the home study.
Limited English Proficient (LEP)/Deaf/Hard of Hearing Service Record	<u>DCYF 15-245</u>	10/2021	If applicable. CPA needs to complete the form documenting their compliance with the LEP requirement. Applicant's children are not allowed to serve as interpreters/translators for their parents.
Supervision Plan for Site Specific Conditions	DCYF 10-419	11/2022	When applicable (trampolines, water hazards, etc.).

Home Study (completed by CPA):

Document	Number	Date	Notes
Home Study	<u>DCYF 10-043</u>	<b>12/2023</b>	<ul> <li>Interviews Required in Person:         <ul> <li>Primary applicant.</li> </ul> </li> <li>All household children, including children in the care and custody of DCYF and children who reside in the home part-time; separate from others.</li> <li>Observation and documentation of non- verbal children.</li> <li>Virtual Interviews Permitted:         <ul> <li>Secondary applicant.</li> <li>Joint interview if two or more applicants.</li> <li>Separate, individual interviews with all other adult household members in home/on property.</li> </ul> </li> <li>Consult the child's DCYF Case Worker or document attempts.</li> <li>Resources: Permanency Planning Matrix</li> </ul>
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References (completion verified by CPA):

Document	Number	Date	Notes
Reference Questionnaire	<u>DCYF 15-286</u>	01/2023	<ul> <li>Two references, one must be unrelated.</li> <li>One must have known both applicants for at least two years (related or unrelated).</li> <li>If one of them is from an adult child, that counts as the reference and a separate adult child reference is not needed.</li> </ul>
Adult Child Reference Questionnaire	<u>DCYF 15-286A</u>	01/2019	<ul> <li>Interview all adult children, or document attempts including:</li> <li>Two attempts minimum.</li> <li>Two different forms of communication on two different days.</li> <li>Document attempts or contact in home study. All adult children need to be interviewed even If they complete "Adult Child Reference Questionnaire" as one of the two required references.</li> </ul>

Supporting Documents (uploaded by Applicant or CPA):

Document	Number	Date	Date
Valid government ID			Must be <b>a valid driver's license</b> if transporting children in out of home placement.
Auto Insurance			If transporting children in out of home placement.
Floor Plan			Upload by Applicant
First Aid/CPR/BBP Certificates			Upload by Applicant
CCT Certificate			Upload by Applicant
Child Vaccinations			<ul> <li>After CPA verifies the child's vaccinations outside WA</li> <li>CAP, <ul> <li>"waive" and enter "verification completed" or</li> <li>submit the vaccination exemption form</li> </ul> </li> <li>Do not keep the child's vaccination records in CPA agency file.</li> </ul>
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Document	Number	Date	Notes
Proof of Pertussis			<ul> <li>If the home is licensed for children under the age of 2 or medically fragile,</li> <li>upload by each Applicant and completion verified by CPA.</li> <li>for other household members over the age of 3 months, CPA verifies outside WA CAP and enters "verification completed" under "waive" in WA CAP.</li> </ul>
Vaccine Exemption	DCYF 15-455	11/2021	If applicable. Upload by Applicant.
Private well water tests, including both coliform and nitrates			If applicable upload by Applicant.
Income Verification			If applicable for an adoption recommendation.
Marriage/Divorce/Death Verification			If applicable for an adoption recommendation.
Training Certificates			Upload by Applicant or CPA
Training Log			Include CCT/CPR/FA/BBP and any additional training. Upload by CPA and FamLink entry by Regional Licensing
Applicant Mental Health Report -Confidential	<u>DCYF 13-001B</u>	07/2022	<ul> <li>If applicable to mitigate issues/concerns.</li> <li>Applicant completes Section #1 and CPA either faxes or emails using secure email to the mental health provider.</li> <li>Upload by CPA under the individual's Miscellaneous Documents section.</li> </ul>

#### Required Documents for Foster License Renewal (General)

Applicant forms (completed by Applicant unless "waived" by CPA):

Document	Number	Date	Notes
Reassessment Application	<u>DCYF 10-354</u>	11/2022	Do not list children in out of home care. CPA needs to provide "Public Notice of Nondiscrimination Publication" <u>HR_0012</u>
Authorization and Consent to Share Records (CPA Home)	<u>DCYF 15-824A</u>	05/2023	Must be submitted with "Home Study or Reassessment Application" and "Background Confirmation and Out-of- State Check."

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Document	Number	Date	Notes
Background Confirmation and Out-of-State Check	<u>DCYF 15-460</u>	<mark>03/2024</mark>	Needs to be completed by anyone 16 years of age and older after they have submitted the online BAF.
Applicant Medical – Confidential (Self-Report)	DCYF 13-001A	09/2022	Required for each applicant.
Emergency and Evacuation Plan	<u>DCYF 16-204</u>	01/2023	Page 2/Worker Information is to be completed by the applicant(s) outside the WA CAP (not sent to RL) then per the direction on the form, the family needs to "post it (entire page 2) in a prominent location in their home."
Infant Safety Agreement	DCYF 15-821	09/2022	Required for all adult household members.
Financial Worksheet	DCYF 14-452	09/2022	If finances have decreased significant since previous home study or reassessment.
WAC Agreement Checklist	DCYF 10-290	03/2023	Form must be reviewed and signed by each Applicant.
Influenza Vaccination Agreement	DCYF 15-822	09/2022	The agreement is only signed by each applicant. CPA needs to verify the completion of agreement, not the actual flu vaccination.
Applicant Medical Report - Confidential (Medical Provider)	<u>DCYF 13-001</u>	09/2022	<ul> <li>If applicable for mitigating new issues/concerns, date of last physical exam needs to be within 12 months of renewal application received date.</li> <li>Applicant completes Section #1 and CPA either faxes or emails using secure email to the licensed healthcare provider.</li> </ul>
Pet Vaccination Agreement	DCYF 15-826	06/2023	If applicable. No Rabies verification is required.
TB Screening Tool *For new person age 18 and over in the home/on the premise	<u>DCYF 15-820</u>	06/2023	<ul> <li>Active TB Screening for each for each new person 18 and older in the home/on the property.</li> <li>Latent TB Screening for each new person 18 and older in the home/on the property.</li> <li>TB Test when screening indicates.</li> </ul>

Agency Forms (completed by CPA):

Document	Number	Date	Notes
File Checklist and Certification of Foster Home	<u>DCYF 10-016</u>	<mark>03/2024</mark>	
Home Inspection Checklist (Licensed)	<u>DCYF 10-183</u>	03/2023	<ul> <li>Form needs to be completed by CPA, not Applicant(s).</li> <li><u>Required in Person:</u></li> <li>One inspection minimum.</li> <li><u>Virtual Inspection Permitted:</u></li> <li>Follow-up to verify, including photos or videos.</li> </ul>
Foster Home Reassessment	<u>DCYF 10-405</u>	06/2023	<ul> <li>Interviews Required in Person:</li> <li>Primary applicant</li> <li><u>Virtual Interviews Permitted:</u></li> <li>With secondary applicant, if needed.</li> <li>Separate, individual "mini" interviews with all other new household members in home/on property.</li> <li>*Details on sleeping arrangements (who sleeps where and types of bed for children in out of home care) should be included in box #8 even if the home has not moved</li> </ul>
Individual Training Plan	DCYF 06-166 or CPA Documentation	11/2022	<ul> <li>Refer to <u>Foster Parent Continuing Education Tool</u> for CPA.</li> <li>CPA can discuss the training plan with each applicant and either complete/uploads the form in WA CPA or include the training plan discussion in the Reassessment form.</li> </ul>
Limited English Proficient (LEP)/Deaf/Hard of Hearing Service Record	<u>DCYF 15-245</u>	10/2021	If applicable. CPA needs to complete the form documenting their compliance with the LEP requirement. Applicant's children are not allowed to serve as interpreters/translators for their parents.
Supervision Plan for Site Specific Conditions	<u>DCYF 10-419</u>	11/2022	When applicable (trampolines, water hazards, etc.).

#### Supporting Documents (uploaded by Applicant or CPA):

Document	Number	Date	Notes
Training Certificates			Upload by Applicant
Child Vaccinations			<ul> <li>After CPA verifies the child's vaccinations outside WA CAP,</li> <li>"waive" and enter "verification completed" or</li> <li>submit the vaccination exemption form</li> <li>Do not keep the child's vaccination records in CPA agency file.</li> </ul>
Valid government issued ID			Must be a <mark>valid driver's license</mark> if transporting children in out of home placement. Upload by Applicant
Auto Insurance			If transporting children in out of home placement. Upload by Applicant.
Floor Plan			Upload by Applicant.
First Aid/CPR Certification			Upload by Applicant.
Vaccination Exemption *For new household members	DCYF 15-455	11/2021	If applicable. If LD has a permanent exemption on file for the individual, a new exemption form is not required for renewal. Upload by Applicant.
Private well water tests, including both coliform and nitrates			If applicable must be re-tested at renewal. Upload by Applicant.
Income verification			If applicable upload by Applicant.
Training Log			Include CPR/FA and any additional training. Refer to <u>Foster Parent Continuing Education Tool</u> for CPA. Upload by CPA and FamLink entry by Regional Licensing
Applicant Mental Health Report -Confidential	<u>DCYF 13-001B</u>	07/2022	<ul> <li>If applicable to mitigate any new concerns/issues.</li> <li>Applicant completes Section #1 and CPA either faxes or emails using secure email to the mental health provider.</li> <li>Upload by CPA under the individual's Miscellaneous Documents section</li> </ul>
Proof of Pertussis *For new household members			<ul> <li>If the home is licensed for children under the age of 2 or medically fragile,</li> <li>upload by each Applicant and completion verified by CPA.</li> <li>for other household members over the age of 3 months, CPA verifies outside WA CAP and enters "verification completed" under "waive" in WA CAP.</li> </ul>

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#### Required Documents for Provisional Expedited License (Phase 1)

Applicant Forms (completed by Applicant):

Document	Number	Date	Notes
Home Study or Reassessment Application	<u>DCYF 10-354</u>	11/2022	Do not list children in out of home care. CPA needs to provide "Public Notice of Nondiscrimination Publication" <u>HR</u> 0012.
Authorization and Consent to Share Records (CPA Home)	DCYF 15-824A	05/2023	Must be submitted with "Home Study or Reassessment Application" and "Background Confirmation and Out-of- State Check."
Background Confirmation and Out-of-State Check	<u>DCYF 15-460</u>	<mark>03/2024</mark>	<ul> <li>Needs to be completed by anyone 16 years and older after they have submitted their online BAF.</li> <li>*For Kinship - if BAF was already submitted thru Child Welfare, consult with Regional Licensor if new BAF is needed.</li> <li>Practice Guidance: <u>CPA Foster Home BG Steps</u></li> </ul>
Infant Safety Agreement	<u>DCYF 15-821</u>	09/2022	Required for all adult household members.
WAC Agreement Checklist	DCYF 10-290	03/2023	Form must be reviewed and signed by each Applicant.

Agency Forms (completed by CPA):

Document	Number	Date	Notes
File Checklist and Certification for License of Foster Home	DCYF 10-016	<mark>03/2024</mark>	Expedited criteria needs to be met
Home Inspection Checklist (Licensed)	<u>DCYF 10-183</u>	03/2023	<ul> <li>Form is completed by CPA for "expedited criteria met."</li> <li><u>Required in Person:</u></li> <li>One inspection minimum.</li> <li><u>Virtual Inspection Permitted:</u></li> <li>Follow-up to verify, including photos or videos.</li> </ul>
Limited English Proficient (LEP)/Deaf/Hard of Hearing Service Record	<u>DCYF 15-245</u>	10/2021	If applicable. CPA needs to complete the form documenting their compliance with the LEP requirement. Applicant's children are not allowed to serve as interpreters/translators for their parents.
Supervision Plan for Site Specific Conditions	DCYF 10-419	11/2022	When applicable (trampolines, water hazards, etc.).
	Original Date: Sente	omher 2022	Bevised Date: April 2024

Original Date: September 2022 | Revised Date: April 2024

Supporting Documents (uploaded by Applicant or CPA):

Document	Number	Date	Notes
Valid government ID			Must be a valid driver's license if transporting children
			in out of home placement.
Auto Insurance			If transporting children in out of home placement.
Floor Plan			Upload by Applicant or CPA

#### Required Documents for Provisional Expedited License (Phase 2)

Refer to the required requirements for "New" Kinship or Foster License.

<u>Note:</u> No new application is needed. A full, new license must be completed within 90 days of Provisional Expedited License approval. No duplication of documents that were completed during Phase 1 is needed. Consult with Regional Licensor as applicable.

## Required Documents for Transfer from State to CPA or from CPA to CPA ("New" Foster License – General)

Applicant Forms (completed by Applicant unless "waived" by CPA):

Document	Number	Date	Notes
Home Study or Reassessment Application	<u>DCYF 10-354</u>	11/2022	Do not list children in out of home care. CPA needs to provide "Public Notice of Nondiscrimination Publication" <u>HR 0012</u>
Authorization and Consent to Share Records (CPA Home)	<u>DCYF 15-824A</u>	05/2023	Must be submitted with "Home Study or Reassessment Application" and "Background Confirmation and Out-of- State Check."
Background Check Confirmation and Out-of-State Check	<u>DCYF 15-460</u>	<mark>03/2024</mark>	Needs to be completed by any 16 years and older after they have submitted the online BAF (subject to In-State check). Any NEW adult and existing household members who have turned 18 years need the National/Fingerprint check.

Document	Number	Date	Notes
Personal Information	<u>DCYF 15-276</u>	09/2022	There is no right or wrong answer. If additional info is needed to assess the applicant, CPA can obtain additional info during the interview(s).
Applicant Medical Report – Confidential (Self Report)	DCYF 13-001A	09/2022	Required for each applicant.
Emergency and Evacuation Plan	<u>DCYF 16-204</u>	01/2023	Page 2/Worker Information is to be completed by the applicant(s) outside the WA CAP (not sent to RL) then per the direction on the form, the family needs to "post it (entire page 2) in a prominent location in their home."
Infant Safety Agreement	DCYF 15-821	09/2022	Required for all adult household members.
Financial Worksheet	<u>DCYF 14-452</u>	09/2022	Only required when finances have decreased since the completion of the previous home study or if includes the recommendation of adoption and the previous home study was not a Unified Home Study.
TB Screening Tool *For new household members age 18 and older	<u>DCYF 15-820</u>	06/2023	<ul> <li>Active TB Screening for each new person 18 and older in the home/on the property.</li> <li>Latent TB Screening for each new person 18 and older in the home/on the property.</li> <li>TB Test when screening indicates.</li> </ul>
Pet Vaccination Agreement	DCYF 15-826	06/2023	• If applicable. No Rabies verification is required.
WAC Agreement Checklist	DCYF 10-290	03/2023	Form must be reviewed and signed by each Applicant.
Influenza Vaccination Agreement	<u>DCYF 15-822</u>	09/2022	The agreement is only signed by each applicant. CPA needs to verify the completion of agreement, not the actual flu vaccination.
Applicant Medical Report - Confidential (Medical Provider)	<u>DCYF 13-001</u>	09/2022	<ul> <li>If applicable for</li> <li>mitigating issues/concerns, date of last physical exam needs to be within 12 months of application received date OR</li> <li>the recommendation of adoption and previous home study was not a Unified Home Study.</li> <li>Applicant completes Section #1 and CPA either faxes or emails using secure email to the licensed healthcare provider.</li> </ul>

Original Date: September 2022 | Revised Date: April 2024

Agency Forms (completed by CPA):

Document	Number	Date	Notes
File Checklist and Certification for License of Foster Home	DCYF 10-016	<mark>03/2024</mark>	
Home Inspection Checklist (Licensed)	DCYF 10-183	03/2023	<ul> <li><u>Required in Person:</u></li> <li>One inspection minimum.</li> <li><u>Virtual Inspection Permitted:</u></li> <li>Follow-up to verify, including photos or videos.</li> </ul>
Individual Training Plan	<u>DCYF 06-166</u> or CPA Documentation	11/2022	Refer to Foster Parent Continuing Education Tool for CPA. CPA can discuss the training plan with each applicant and either complete/upload the form in WA CPA or include the training plan discussion in the home study.
Limited English Proficient (LEP)/Deaf/Hard of Hearing Service Record	<u>DCYF 15-245</u>	10/2021	If applicable. CPA needs to complete the form documenting their compliance with the LEP requirement. Applicant's children are not allowed to serve as interpreters/translators for their parents.
Supervision Plan for Site Specific Concerns	DCYF 10-419	11/2022	When applicable (ex: trampolines, water hazards, etc.).

Home Study (completed by CPA):

Document	Number	Date	Notes
Home Study	<u>DCYF 10-043</u>	<b>12/2023</b>	<ul> <li>Interviews Required in Person:         <ul> <li>Primary applicant.</li> </ul> </li> <li>All household children, including children in the care and custody of DCYF and children who reside in the home part-time; separate from others.</li> <li>Observation and documentation of non- verbal children.</li> <li>Virtual Interviews Permitted:         <ul> <li>Secondary applicant.</li> <li>Joint interview if two or more applicants.</li> <li>Separate, individual interviews with all other adult household members in home/on property.</li> </ul> </li> <li>Consult the child's DCYF Case Worker or document attempts.</li> <li>Resources: Permanency Planning Matrix.</li> </ul>

Original Date: September 2022 | Revised Date: April 2024

References (completion verified by CPA):

Document	Number	Date	Notes
Reference Questionnaire	<u>DCYF 15-286</u>	01/2023	<ul> <li>Two references, one must be unrelated.</li> <li>One must have known both applicants for at least two years (related or unrelated).</li> <li>If one of them is from an adult child, that counts as the reference and a separate adult child reference is not needed.</li> </ul>
Adult Child Reference Questionnaire	<u>DCYF 15-286A</u>	01/2019	<ul> <li>Interview all adult children, or document attempts including:</li> <li>Two attempts minimum.</li> <li>Two different forms of communication on two different days.</li> <li>Document attempts or contact in home study. All adult children need to be interviewed even If they complete "Adult Child Reference Questionnaire" as one of the two required references.</li> </ul>

Supporting Documents (upload by Applicant or CPA):

Document	Number	Date	Notes
Valid government ID			Must be <mark>a <b>valid driver's</b> license if transporting children in out of home placement.</mark>
Auto Insurance			If expired and transporting children in out of home placement.
Floor Plan			Upload by Applicant
First Aid/CPR Certificates			If expired and need to be renewed
Child Vaccinations *If applicable for new child in the home			<ul> <li>After CPA verifies the child's vaccinations outside WA CAP,</li> <li>"waive" and enter "verification completed" or</li> <li>Submit the vaccination exemption form</li> <li>Do not keep the child's vaccination records in CPA agency file.</li> </ul>
Proof of Pertussis *If applicable for new household members			<ul> <li>If the home is licensed for children under the age of 2 or medically fragile,</li> <li>upload by each Applicant and completion verified by CPA.</li> <li>for other household members over the age of 3 months, CPA verifies outside WA CAP and enters "verification completed" under "waive" in WA CAP.</li> </ul>

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Document	Number	Date	Notes
Vaccination Exemption	DCYF 15-455	11/2021	If applicable.
*If applicable for new household members			
Private well water tests, including both coliform and nitrates			If applicable.
Income verification			If applicable
Marriage/Divorce/Death Verification			If the original home study was not a Unified Home Study, CPA needs to verify current marriage and prior divorces.
Training Log			Include CCT/CPR/FA/BBP and any additional training. Upload by CPA and FamLink entry by Regional Licensor
Applicant Mental Health Report -Confidential	<u>DCYF 13-001B</u>	07/2022	<ul> <li>If applicable to mitigate any new concerns/issues.</li> <li>Applicant completes Section #1 and CPA either faxes or emails using secure email to the mental health provider.</li> <li>Upload by CPA under the individual's Miscellaneous Documents section</li> </ul>

<u>Note:</u> The CPA licensor will meet with the foster family to verify the information contained in the previous home study. The CPA licensor may use all the information in the previous home study that is still applicable but will create a new home study assessment with the foster family to remove any inaccurate information and add the new information.

#### Required Documents for Adoption Home Study Update only (not issuing a new 3 year license) <u>DCYF Policy 5110</u>:

Adoption home study updates are required when:

- 1. There are changes within the family, e.g. divorce, someone new moves in the home, a medical condition or significant change affecting the caregiver's ability to care for children or
- 2. The needs or characteristics of a child considered for adoption is significantly different than when the family was assessed in a previously approved home study or
- 3. Families have previously adopted a child and are adopting another child that is outside the recommendations on the previous home study or
- 4. The local court requires an update

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Applicant Forms (completed by Applicant unless "waived" by CPA. Most forms can be waived.):

Document	Number	Date	Notes
Home Study or Reassessment Application	DCYF 10-354	11/2022	Do not list children in out of home care.
Authorization and Consent to Share Records (CPA Home)	<u>DCYF 15-824A</u>	05/2023	Must be submitted with "Home Study or Reassessment Application" and "Background Confirmation and Out-of-State Check."
Background Check Confirmation and Out-of-State Check	DCYF 15-460	<mark>03/2024</mark>	Needs to be completed by any NEW adult household member and existing household members who have turned 16 years old after they have submitted the online BAF. If someone turned 18 years old, a fingerprint clearance needs to be completed.
Personal Information	DCYF 15-276	09/2022	In most cases, no Personal Information is required. Consult Regional Licensor to see if Personal Information may be required.
Applicant Medical Report – Confidential (Self Report)	DCYF 13-001A	09/2022	Required for each applicant.
Financial Worksheet	DCYF 14-452	09/2022	If necessary based on changes in the financial history or if the original home study was not a Unified Home Study.
Applicant Medical Report – Confidential (Medical Provider)	<u>DCYF 13-001</u>	09/2022	<ul> <li>If the original home study was not a Unified Home Study or if applicable for mitigating new issues/concerns, date of last physical exam needs to be within 12 months of application received date.</li> <li>Applicant completes Section #1 and CPA either faxes or emails using secure email to the licensed healthcare provider.</li> </ul>

Agency Forms (completed by CPA):

Document	Number	Date	Notes
File Checklist and Certification for License of Foster Home	<u>DCYF 10-016</u>	<mark>03/2024</mark>	Adoption update only
Home Inspection Checklist (Licensed)	<u>DCYF 10-183</u>	03/2023	Virtual inspection permitted if approved by RL Supervisor.
Limited English Proficient (LEP)/Deaf/Hard of Hearing Service Record	<u>DCYF 15-245</u>	10/2021	If applicable. CPA needs to complete the form documenting their compliance with the LEP requirement and send a copy to RL when submitting the completed certification packet. Applicant's children are not allowed to serve as interpreters/translators for their parents.
Supervision Plan for Site Specific Concerns	<u>DCYF 10-419</u>	11/2022	When applicable (ex: trampolines, water hazards, etc.).

#### Home Study (completed by CPA):

Document	Number	Date	Notes
Home Study	<u>DCYF 10-043</u>	<b>12/2023</b>	<ul> <li>Interviews Required in Person:</li> <li>Primary applicant.</li> <li>All household children, including children in the care and custody of DCYF and children who reside in the home part-time; separate from others.</li> <li>Observation and documentation of non- verbal children.</li> <li>Virtual Interviews Permitted:</li> <li>Secondary applicant.</li> <li>Joint interview if two or more applicants.</li> <li>Separate, individual interviews with all other adult household members in home/on property.</li> <li>Consult the child's DCYF Case Worker or document attempts.</li> <li>Resources: Permanency Planning Matrix</li> </ul>

References (verification completed by CPA):

Document	Number	Date	Notes
Reference Questionnaire	<u>DCYF 15-286</u>	01/2023	<ul> <li>Complete new references or a follow-up call with original references from previous home study.</li> <li>Two references, one must be unrelated.</li> <li>One must have known both applicants for at least two years (related or unrelated).</li> <li>If one of them is from an adult child, that counts as the reference and a separate adult child reference is not needed.</li> </ul>
Adult Child Reference Questionnaire	<u>DCYF 15-286A</u>	01/2019	<ul> <li>Interview all adult children or follow-up if previously interviewed or document attempts including:</li> <li>Two attempts minimum.</li> <li>Two different forms of communication on two different days.</li> <li>Document attempts or contact in home study. All adult children need to be interviewed even If they complete "Adult Child Reference Questionnaire" as one of the two required references</li> </ul>

Supporting Documents (uploaded by Applicant or CPA):

Document	Number	Date	Notes
Marital/Divorce/Death Verification			If the original home study was not completed as a Unified Home Study, upload of current marriage and/or prior divorces by Applicant and completion verification by CPA.
Income verification			
Applicant Mental Health Report -Confidential	<u>DCYF 13-001B</u>	07/2022	<ul> <li>If applicable to mitigate any new concerns/issues.</li> <li>Applicant completes Section #1 and CPA either faxes or emails using secure email to the mental health provider.</li> <li>Upload by CPA under the individual's Miscellaneous Documents section</li> </ul>

<u>Note</u>: An Adoption Home Study Update should not contain information that is not current. Incorporate all the necessary updates into each section rather than each section noted as "update."

#### Required Documents for Amendment (Move)

Applicant Forms (completed by Applicant):

Document	Number	Date	Notes
Reassessment Application	<u>DCYF 10-354</u>	11/2022	Do not list children in out of home care.
Authorization and Consent to Share Records (CPA Home)	<u>DCYF 15-824A</u>	05/2023	Must be submitted with "Home Study or Reassessment Application" and "Background Confirmation and Out-of- State Check."
Background Check Confirmation and Out-of-State Check	<u>DCYF 15-460</u>	<mark>03/2024</mark>	Only for NEW household members and existing household members who recently turned 16-18 years and hasn't previously completed it.
Emergency and Evacuation Plan	<u>DCYF 16-204</u>	01/2023	Page 2/Worker Information is to be completed by the applicant(s) outside the WA CAP (not sent to RL) then per the direction on the form, the family needs to " <i>post it (entire page 2) in a prominent location in their home.</i> "
TB Screening Tool *For new household members age 18 and over	<u>DCYF 15-820</u>	06/2023	<ul> <li>Active TB Screening for each new person 18 and older in the home/on the property.</li> <li>Latent TB Screening for each new person 18 and older in the home/on the property.</li> <li>TB Test when screening indicates.</li> </ul>

Agency Forms (completed by CPA):

Document	Number	Date	Notes
File Checklist and Certification for License of Foster Home	<u>DCYF 10-016</u>	<mark>03/2024</mark>	
Home Inspection Checklist (Licensed)	<u>DCYF 10-183</u>	03/2023	<ul> <li><u>Required in Person:</u></li> <li>One inspection minimum.</li> <li><u>Virtual Inspection Permitted:</u></li> <li>Follow-up to verify, including photos or videos.</li> </ul>
Foster Home Move Reassessment	<u>DCYF 10-405B</u>	06/2023	Details on sleeping arrangements (who sleeps where and types of bed for children in out of home care), as well as the new home/neighborhood should be included in box #3.

Original Date: September 2022 | Revised Date: April 2024

Document	Number	Date	Notes
Limited English Proficient (LEP)/Deaf/Hard of Hearing Service Record	<u>DCYF 15-245</u>	10/2021	If applicable. CPA needs to complete the form documenting their compliance with the LEP requirement. Applicant's children are not allowed to serve as interpreters/translators for their parents.
Supervision Plan for Site Specific Conditions	DCYF 10-419	11/2022	When applicable (trampolines, water hazards, etc.).
*Non-Safety Exemption/Waiver apply if Kinship Licensed home			

Supporting Documents (uploaded by Applicant or CPA):

Document	Number	Date	Notes
Driver's License			<ul><li>Upload by Applicant if expired.</li><li>Upload by CPA if Kinship and assistance is needed.</li></ul>
Auto Insurance			<ul> <li>Upload by Applicant if expired.</li> <li>No verification required for Kinship License</li> </ul>
Floor Plan			<ul> <li>Upload by Applicant</li> <li>Drawing/uploading by CPA if Kinship and assistance is needed</li> </ul>
First Aid/CPR Certification			Upload by Applicant if expired
Private well water tests, including both coliform and nitrates			If applicable. Upload by Applicant unless Non-safety Exemption/Waiver applies for the Kinship applicant

Notes:

- If there is a placement and the foster family remains intact, foster parent(s) may continue providing care under their previous license for 30 calendar days from the move date. Amended licenses for moves must be completed within 30 days from the first day at the new address. Submission for an amended license must be done prior to the 30 days to allow the Regional Licensing time to review the amendment in time.
- If there is NO placement, a foster family's license may remain open for 90 calendar days from the move date. CPA licensor still must complete the inspection within 30 day of move notification from foster parent(s). Amended licenses for moves must be completed within 90 days from the first day at the new address. Submission for an amended license must be done prior to the 90 days to allow the Regional Licensing time to review the amendment in time.
- If the current license expires within six months **after** the move, a "new" three-year license may be issued in lieu of amending the license. The renewal paperwork is required to complete the license.

#### Required Documents for Modification

Documents to be submitted to the Regional Licensor when the license capacity (age and/or number of children) needs to be modified due to change in household members, adoption, licensee request or thru shared decision-making. Modification may require a case by case consultation with Regional Licensor. For example, while changing the age range **from 0 to 6 to 0 to 18** will be "expanding" and may require an inspection, changing **from 0 to 6 to 0 to 8** may not necessarily require an inspection.

Document	Number	Date	Notes
Authorization and Consent to Share Records (CPA Home)	<u>DCYF 15-824A</u>	05/2023	Must be submitted with "Background Confirmation and Out-of-State Check."
Background Check Confirmation and Out-of-State Check	<u>DCYF 15-460</u>	<mark>03/2024</mark>	Only for NEW household members and existing household members who recently turned 16-18 years and hasn't previously completed it.
Emergency and Evacuation Plan	<u>DCYF 16-204</u>	01/2023	If applicable for significant changes in bedrooms/sleeping arrangements. Page 2/Worker Information is to be completed by the applicant(s) outside the WA CAP (not sent to RL) then per the direction on the form, the family needs to "post it (entire page 2) in a prominent location in their home."
Modification Request by CPA			A summary on agency letterhead or an email explaining the purpose for modification, how it may affect the household and the other children in placement and sleeping arrangements (bedrooms/beds).

Applicant Forms (completed by Applicant):

Agency Forms (completed by CPA):

Document	Number	Date	Notes
File Checklist and Certification for License of Foster Home	DCYF 10-016	<mark>03/2024</mark>	
Home Inspection Checklist (Licensed)	<u>DCYF 10-183</u>	03/2023	Virtual inspection permitted if inspection is needed and approved by RL supervisor.

Supporting Documents (upload by Applicant or CPA):

Document	Number	Date	Notes
Driver's License			<ul><li>If expired,</li><li>Upload by Applicant</li><li>Upload by CPA if Kinship and assistance is needed.</li></ul>
Auto Insurance			Upload by Applicant if expired.
Floor Plan			<ul> <li>If applicable such as the change bedroom arrangements</li> <li>Upload by Applicant</li> <li>Drawing/uploading by CPA if Kinship and assistance is needed</li> </ul>
First Aid/CPR Certification			Upload by Applicant if expired
Private well water tests, including both coliform and nitrates			If applicable. Upload by Applicant
Proof of Pertussis if applicable for General Foster Licensed homes only			Upload by Applicant or CPA
Vaccination exemption if applicable			

Notes:

- When modifying a license, it will have the same expiration date as the current license.
- Modification in age range may result in Proof of Pertussis, etc.

#### Required Documents for Change in Circumstance

- May differ for Kinship (Child Specific) License and Foster (General) License, as well as if original home study was pre-WA CAP or in WA CAP. Consult with Regional Licensor for technical assistance.
- Foster parent(s) must have their suitability reassessed when there has been a change in circumstances that affect their ability to care for children.
- Foster parent(s) must apply for <u>a new three-year license</u> if there is a change, such as an addition or removal of "caregiver" to household or the addition of "kinship" placement that was not part of the caregiver's original Kinship License home study.

#### Required Documents for Certified In-Home Respite

Applicant Forms (completed by Applicant unless "waived" by CPA):

Document	Number	Date	Notes
Application for Certified Respite Provider	<u>DCYF 14-512</u>	11/2021	Required only the first time.
Authorization and Consent to Share Records (CPA Home)	<u>DCYF 15-824A</u>	05/2023	Must be submitted with "Application for Certified Respite Provider" and "Background Confirmation and Out-of-State Check."
Background Confirmation and Out-of-State Check	<u>DCYF 15-460</u>	<mark>03/2024</mark>	Also required for respite renewal. Must be completed after the applicant has submitted the online BAF.
Infant Safety Agreement (Certified Respite)	<u>DCYF 15-821A</u>	01/2023	Also required for respite renewal.
Certified Respite Provider Agreement	DCYF 14-510	11/2021	Also required for respite renewal.
Vaccination Agreement	<u>DCYF 15-822A</u>	11/2021	Also required for respite renewal.
TB Screening Tool	<u>DCYF 15-820</u>	06/2023	<ul> <li>Active TB Screening</li> <li>Latent TB Screening</li> <li>TB Test when screening indicates</li> </ul>

Agency Forms (completed by CPA):

Document	Number	Date	Notes
Limited English Proficient (LEP)/Deaf/Hard of Hearing Service Record	<u>DCYF 15-245</u>	10/2021	If applicable. CPA needs to complete the form documenting their compliance with the LEP requirement. Applicant's children are not allowed to serve as interpreters/translators for their parents.
File Checklist (Certified Respite)	<u>DCYF 16-225</u>	11/2022	Also required for respite renewal.
Non-Safety Exemption apply if respite is in a Kinship licensed home	<u>DCYF 15-411G</u>	<mark>6/2023</mark>	Also required for respite renewal.

Supporting Documents (uploaded by Applicant or CPA):

Document	Number	Date	Notes
Reference Questionnaire (Certified Respite)	<u>DCYF 10-425</u>	11/2021	Two references of any relation. Best practice would be for at least one reference to have known the applicant for at least 2 years, but this is not a must.
Valid government issued ID			Must be a <mark>valid driver's license</mark> if transporting children in out-of-home care. Update at renewal if needed. Upload by Applicant.
Auto Insurance			If transporting children in out-of-home care. Update at renewal if needed. Upload by Applicant.
First Aid/CPR/BBP Certification			BBP is a one-time requirement. Update at renewal if needed. Upload by Applicant.
Vaccination Exemption	DCYF 15-455	11/2021	If applicable. If LD has a permanent exemption on file for the individual, a new exemption form is not required for respite renewal. Upload by Applicant.

#### Notes:

- Interview can be in person or virtual. For additional/follow up interview, phone interview permitted. Interview needs to address
  - Motivation to provide care for general or specific foster homes, including type of care desired
  - Employment, including availability of days/hours to provide care
  - Experience with children'
  - $\circ$  Education and training
  - General health/mental health/ substance abuse/criminal history
  - Special skills related to providing care (such as dealing with children who are medically fragile or who have been sexually and/or physically assaultive)
- Written documentation including Interview, any collateral contact, assessment and recommendation regarding the certified respite applicant is kept CPA.

#### APPENDIX A: Non-Safety Exemption/Waiver (Kinship License)

#1: CPA needs to determine if and which requirements are not being granted, complete and sign Kinship License **Non-Safety Exemption/Waiver (Licensed Home)** (DCYF 15-411G) and submit to Regional Licensor for review.

#2: Support Funds for concrete goods such as fire extinguisher, cabinet locks and medication lock box are available to support kinship caregivers **prior** to licensing and **at any time during** the license. CPA can request for Concrete Goods thru Regional Licensor.

#3 Below are Non-Safety Exemptions/Waivers that apply to relatives/suitable others.

#### **Licensing Process:**

WAC 110-148-1315 (1) 90 day deadline for applicant
WAC 110-148-1320 (1) All licensing requirements (including documents) must be received
WAC 110-148-1320 (2), WAC 110-148-1455 (5), WAC 110-148-1375 (2-5) First aid, CPR, or BBP
WAC 110-148-1320 (4) TB screening for applicant and household members over age 18
WAC 110-148-1320 (5) Current immunizations for any children living in the household.
WAC 110-148-1320 (6) Influenza or pertussis vaccination.
WAC 110-148-1320 (7), WAC 110-148-1375 Training requirements please note: If pre-service (KCT) training is exempted, it must be completed within the caregiver's first licensing cycle
WAC 110-148-1325 Foster family home license must be available for viewing at your home
WAC 110-148-1330 (2)(b) Dual license capacity

#### **Qualifications:**

WAC 110-148-1365 (1) Applicant must be at least 21 years of age
WAC 110-148-1365 (2)(b) Sufficient regular income
WAC 110-148-1370 (3) Expense of evaluations recommended by the department
WAC 110-148-1380 Ongoing training
WAC 110-148-1385 (2-3) Maximum Capacity, (5) Teen parent and child(ren) count towards capacity

#### Managing Records and Reporting:

WAC 110-148-1405 (1)(m) Inventory of child's personal belongings

#### Health and Safety:

WAC 110-148-1440 (3)(c-d) Must have a stove and oven
WAC 110-148-1445 (2) Well water testing
WAC 110-148-1450 (1) Diaper changing requirement
WAC 110-148-1450 (2) Electrical outlet covers
WAC 110-148-1460 (3) Emergency supplies
WAC 110-148-1460 (4) Practice evacuation drills
WAC 110-148-1465 (2) Fire ladder equipment
WAC 110-148-1465 (3) Windows must open/window size requirement (if exempting, a DCYF 10-419 Supervision Plan for Site Specific Conditions is required)
WAC 110-148-1465 (4) Easy access to all rooms
WAC 110-148-1465 (6) Smoke detectors inside and outside of all sleeping areas
WAC 110-148-1465 (7) Carbon monoxide detectors
WAC 110-148-1465 (8) Fire extinguisher
WAC 110-148-1465 (9) Barriers for fireplaces, wood stoves, and other heating systems

Original Date: September 2022 | Revised Date: April 2024

WAC 110-148-1470 (1-6) Bedroom requirements (if exempting WAC 110-148-1470 (5) a DCYF 10-419- Supervision Plan for Site Specific Conditions is required)

WAC 110-148-1470 (7) Waterproof mattress covers and pillow covers

WAC 110-148-1475 (7) Bedroom sharing is based on gender for children over age six

WAC 110-148-1480 (2) Pet rabies vaccination.

WAC 110-148-1480 (5) Pet medication must be locked

WAC 110-148-1505 (1) Notification of exposure to TB/testing recommendation

WAC 110-148-1510 (3) Proof of auto registration

WAC 110-148-1515 (4) Approval for modifying a child's diet

#### Services to Children:

WAC 110-148-1550 (7)(a-f) First aid supplies

WAC 110-148-1565 (1) Medication storage

WAC 110-148-1575 (1) Keep a written record of all prescription meds given for children in care

#### **Rule Violations and Corrective Actions:**

WAC 110-148-1630 (3) Keep a copy of approved exceptions to licensing requirements

#### APPENDIX B: Required Publications for Applicant

Document	Number	Date	Notes
Foster Parents Rights and Responsibilities	<u>LIC_0001</u>	04/2023	CPA needs to provide to applicant at the time Orientation/New License/Renewal
Notice of Nondiscrimination Publication	<u>HR_0012</u>	02/2023	CPA needs to provide to applicant at the time of application