

# Unified Home Study

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*Relative/Non-relative*

*Unified Home Study*



## **Participant Guide**

Office of Child Welfare

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*4/1/2018*



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## Relative/Non-relative Unified Home Study

**Learning Objectives:**

1. Identify what information needs to be gathered and assessed in a Relative/Non-relative Unified Home Study.
2. Demonstrate how to gather the necessary information for the Relative/Non-relative Unified Home Study.
3. Demonstrate how to document a Relative/Non-relative Unified Home Study using FSFN.

## Relative/Non-relative Unified Home Study

### Situations Requiring a Relative/Non-relative UHS

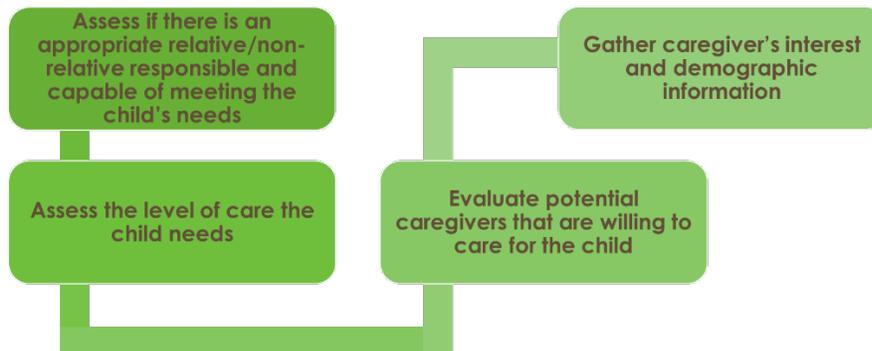
A child was placed in a relative or non-relative placement by a CPI and an Emergency Placement Home Study was completed and approved.	A Case Manager is placing a child with a relative/non-relative as an initial placement.  A Case Manager cannot complete Emergency Placement Home Studies.	To update an existing Relative/Non-relative UHS.
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## Information Gathering



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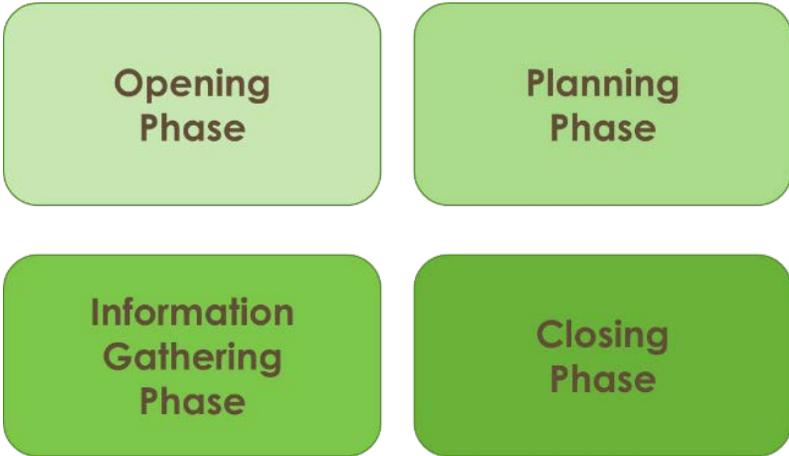
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### The UHS Interview Process

- Goes beyond reading questions and documenting caregivers' responses.
- Requires information gathering beyond yes/no responses.
- Qualitative interview skills must be used to gather the necessary information to assess the relative/non-relative caregiver(s).



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## Demographic Information

Questions that may be asked in gathering this information include:

- What is the person's full name?
- Do they have any other last names or aliases?
- What is the person's date of birth and social security number?
- Did the caregiver or any other household member ever live out of state? If so, how long ago and where?
- Do they have frequent visitors, over 18 years of age, who will be providing sight and sound supervision for the child(ren) being placed?

Once the demographic information is gathered and documented in FSFN and the UHS is created, the demographic page captures the following information:

- **Case(s) Associated:** Child Welfare Professionals can search for the relevant cases pertaining to the participants.
- **Children Associated:** Based on the case that was selected, any child under 18 years of age and active in a case is also displayed as long as the child has a role designation of "child receiving services". Child Welfare Professionals must select the child associated with the UHS being completed. Only the child checked as part of the UHS is displayed when the UHS is launched /printed.
- **Contact/Identifying Information** (for caregiver 1 and 2): This populates from the Provider Inquiry page which will be discussed shortly. Child Welfare Professionals must ensure that the social security numbers are verified and that dates of birth, addresses, phone numbers, and length of time in Florida is collected.
- **Other States of Residence and Approximate Dates Lived There:** For both caregiver 1 and 2, Child Welfare Professionals need to enter all of the states that they lived in and the time periods.
- **Home Evaluation:** The Date Initiated field is system derived based on the date that the UHS is launched and required to initially save the UHS page. The Date Completed field is user entered and should capture the date the user completed the home study.
- **Provider Notes:** Entered into FSFN that are created on or after the Initiated Date captured in the Home Evaluation group box. The user can enter Provider Notes directly from this page.

- **Other Household Members:** Other household members are displayed in this section of the demographic page. The other household members include the caregivers' biological children that reside in the home. These individuals are pulled from the Person Provider page.
  - **All Children Currently Placed OR Exited within 1 Year from Home Evaluation Date Initiated:** Name, date of birth, age, placement type, placement dates, race, ethnicity, gender, language, and client characteristics are populated for each child that is currently or was previously placed (within one year) with the potential caregivers.
  - **Non-Household Members:** Non-household members involved with the family are displayed here. These are individuals, such as frequent visitors, that the Child Welfare Professional listed in the Person Provider page.
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### FSFN Screens

#### UHS Demographics tab:

**Florida Safe Families Network** Hand Book Print Audit Spell Check Help

**General Information**  
 Provider ID: 900000202 Worker Name: YILLPH, LISA I (20FSIQ FAMILY SAFETY QA) Purpose of Home Study: Non-Relative Placement Pending

**Demographics** | Prior Intakes and Investigations/Referrals | Background Check Information | Financial Security Resources and Child Care Arrangement | Narrative Family Assessment | Outcome/ Attachments to the Unified Home Study

**Case Information**  
 Case(s) Associated

Case ID	Case Name	Investigation ID	Action
Insert			

**Children Associated**

Names (Person ID)	DOB	Age	Relationship to Caregiver(if any)	Court Case Number
Insert				

**Contact/Identifying Information**  
 Rivera, Amanda  
 Date of Birth: 05/27/1986

Save Close

#### UHS Demographics tab:

**Florida Safe Families Network** Hand Book Print Audit Spell Check Help

**General Information**  
 Provider ID: 900000202 Worker Name: YILLPH, LISA I (20FSIQ FAMILY SAFETY QA) Purpose of Home Study: Non-Relative Placement Pending

**Demographics** | Prior Intakes and Investigations/Referrals | Background Check Information | Financial Security Resources and Child Care Arrangement | Narrative Family Assessment | Outcome/ Attachments to the Unified Home Study

**Contact/Identifying Information**

**Rivera, Amanda**  
 Date of Birth: 05/27/1986  
 Viewed SSN Verification:  Yes  No  
 Address: 518 Academy Ave  
 City: Tallahassee  
 County, State & Zip Code: Leon, FL 32399  
 Home Phone:  
 Cell Phone: (850)370-4516  
 Work Phone:  
 Fax:  
 Email Address:  
 Primary Language:  
 Race: White  
 Ethnicity:  
 FL Residence Length: 0 Years - 0 Months

**Other States of Residence and Approximate Dates Lived There**

State	From	To	Action
Insert			

**Date of Birth:**  
 Viewed SSN Verification:  Yes  No  
 Address:  
 City:  
 County, State & Zip Code:  
 Home Phone:  
 Cell Phone:  
 Work Phone:  
 Fax:  
 Email Address:  
 Primary Language:  
 Race:  
 Ethnicity:  
 FL Residence Length:

**Other States of Residence and Approximate Dates Lived There**

State	From	To	Action
Insert			

Save Close

UHS Demographics tab:

**Florida Safe Families Network** Hand Book | Print | Audit | Spell Check | Help

**General Information**  
 Provider ID: 900000202 Worker Name: YILLPH, LISA I (20FSIQ FAMILY SAFETY QA) Purpose of Home Study: Non-Relative Placement Pending

**Demographics** | Prior Intakes and Investigations/Referrals | Background Check Information | Financial Security Resources and Child Care Arrangement | Narrative Family Assessment | Outcome/ Attachments to the Unified Home Study

**Home Evaluation**  
 Date Initiated: 03/22/2018 Date Completed: 00/00/0000

**Provider Notes**

PNID	Begin Date	Date Entered	Note Category	Note Type	Worker Creating Note	Worker Making Contact
<a href="#">Insert</a>						

**Other Household Members**  
*This includes biological children*

Name	Person ID	Role	SSN Verified	Race/Ethnicity	Gender	Primary Language
<a href="#">Insert</a>						

All Children Currently Placed OR Exited within 1 Year from Home Evaluation Date Initiated  
*Other Children Placed in the Home (by the Department or Other Agency)*

[Save](#) [Close](#)

UHS Demographics tab:

**All Children Currently Placed OR Exited within 1 Year from Home Evaluation Date Initiated**  
*Other Children Placed in the Home (by the Department or Other Agency)*

First Name/Last Initial Only	Date of Birth	Age	Placement Type	Placement Begin Date	Placement End Date	Race	Ethnicity	Gender	Primary Language	Client Characteristics
<a href="#">Insert</a>										

**Non-Household Members**

Name	Person ID	Date of Birth	Role	SSN Verified	Frequent Visitor	Action
<a href="#">Rivera, Rebecca</a>	900000340	03/20/1968	Mother	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<a href="#">Delete</a>
<a href="#">Insert</a>						

## Background Checks

Case Managers must obtain and assess background checks for all caregivers, household members over the age of twelve, and frequent visitors over the age of 18 who will provide sight and sound supervision for the child being placed. This may be done by gathering and verifying the demographics of the potential caregivers, household members, and frequent visitors via phone or in person.

There are two types of relative/non-relative background checks based on when the child is in need of placement:

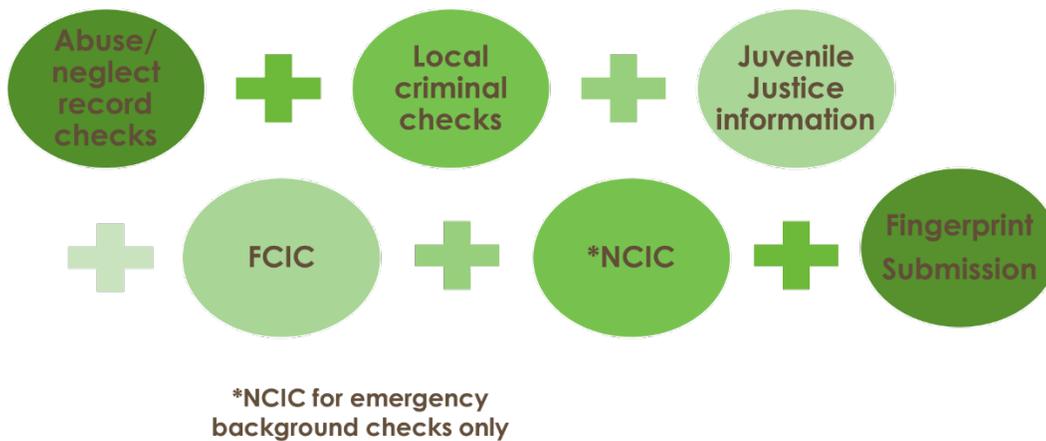
1. Emergency Background Checks
2. Planned Background Checks

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The following background checks are required when a child is placed with a relative/non-relative caregiver:



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In addition to the required background checks, other record resources can be accessed in order to gather and validate additional background information all household members, especially the potential caregiver, to see if past behaviors have negative implications for child safety. These include, but are not limited to:

- Florida Vital Statistics-Provides birth information
- Parent Locator Services
- ACCESS Florida Information
- Comprehensive Case Information System (CCIS) - provides Florida Clerk of Court case information
- FDLE Sexual Offender and Predator Public website
- Dru Sjordin National Sexual Offender website
- Accurint - a system that searches multiple data sources for public information that may be helpful with locating persons and/or verifying personal information
- Driver and Vehicle Information Database (DAVID)

When an emergency background check request is made to the CIU, information is provided by:

- Florida Crime Information Center (FCIC)
- National Crime Information Center (NCIC)
- Driver and Vehicle Information Database (DAVID)
- Department of Corrections (DOC)
- Juvenile Justice Information System (JJIS)

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## Analysis of Background Checks

When reviewing the criminal, abuse, and/or neglect records obtained, Case Managers must assess for patterns of criminal behavior that may place the child in danger. This includes, but is not limited to:

- Patterns of assault and battery
- Domestic and/or family violence
- Substance abuse
- Sexual assault
- Crimes against children
- Resisting arrest with violence
- Other crimes involving violence
- Open arrest warrants
- Household member on probation/parole
- Child welfare history with implications for placement due to similar allegations as the removal reason or other child safety related concerns

## Disqualifiers

Placement of a child with a relative or non-relative who has offenses listed in s. [39.0138](#), F.S., and Rule [65C-28.011](#), F.A.C. is prohibited. These include:

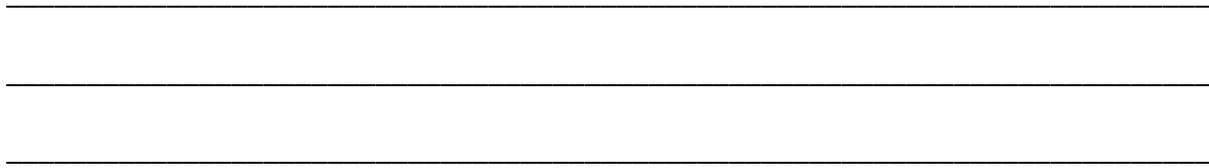
- Child abuse, abandonment, or neglect
- Domestic violence
- Child pornography or other felony in which a child was a victim of the offense
- Homicide, sexual battery, or other felony involving violence, other than felony assault or felony battery when an adult was the victim of the assault or battery, or resisting arrest with violence (The underline section was a revision that was made this year, 2018, by House Bill 1079.)

In addition, Case Managers may not place a child with a person other than a parent if the criminal history records check reveal that the person has been convicted of a felony, within the last five years, that falls within any of the following categories:

- Assault
  - Battery
  - A drug-related offense
  - Resisting arrest with violence
- 
-

## Documentation

The written analysis includes a summary of information about the child welfare history and charges/dispositions from criminal history records obtained directly from a local law enforcement agency. The information is documented in the “Clearance Issues (Analysis of Background Check Results and All Priors)” text box within the Background Check Information page of the UHS.



### FSFN Screens

#### Prior Intakes Investigations/Referrals:

*Florida Safe Families Network* Hand Book Print Audit Spell Check Help

**General Information**  
 Provider ID: 900000202 Worker Name: YILLPH, LISA I (20FSIQ FAMILY SAFETY QA) Purpose of Home Study: Non-Relative Placement Pending

Demographics	Prior Intakes and Investigations/Referrals	Background Check Information	Financial Security Resources and Child Care Arrangement	Narrative Family Assessment	Outcome/ Attachments to the Unified Home Study	Actions:																		
	<p><b>Prior Intakes</b></p> <table border="1"> <thead> <tr> <th>Date</th> <th>Intake Number</th> <th>Intake Name</th> <th>Intake Type</th> <th>Referral Type</th> <th>Screening Decision</th> <th>Case ID</th> <th>Finding</th> <th>Investigative Sub Type</th> </tr> </thead> <tbody> <tr> <td colspan="9" style="text-align: center;">&lt; ----- &gt;</td> </tr> </tbody> </table>	Date	Intake Number	Intake Name	Intake Type	Referral Type	Screening Decision	Case ID	Finding	Investigative Sub Type	< ----- >													<p>Approval</p> <p>Upload Image</p>
Date	Intake Number	Intake Name	Intake Type	Referral Type	Screening Decision	Case ID	Finding	Investigative Sub Type																
< ----- >																								
	<p><b>Prior Investigations/Referrals</b></p> <table border="1"> <thead> <tr> <th>Intake Number</th> <th>Case Name</th> <th>Case ID</th> <th>Intake Type</th> <th>Referral Type</th> <th>Investigative Sub Type</th> <th>Finding</th> <th>Status</th> </tr> </thead> <tbody> <tr> <td colspan="8" style="text-align: center;">&lt; ----- &gt;</td> </tr> </tbody> </table>	Intake Number	Case Name	Case ID	Intake Type	Referral Type	Investigative Sub Type	Finding	Status	< ----- >											<p><b>Text:</b></p> <p>Unified Home Study</p> <p>Prior Maltreatments or Findings/Referrals</p>			
Intake Number	Case Name	Case ID	Intake Type	Referral Type	Investigative Sub Type	Finding	Status																	
< ----- >																								

**Save** **Close**

Requesting Background Checks:

**Florida Safe Families Network** Hand Book | Print | Audit | Spell Check | Help

General Information  
 Provider ID: 900000202 Worker Name: YILLPH, LISA I (20FSIQ FAMILY SAFETY QA) Purpose of Home Study: Non-Relative Placement Pending

**Background Check Information**

**Criminal Background Check Request**  
 Request Type:  Planned Placement  Emergency Placement

Back-ground Check?	Name	Age	Last Background Check	Local Effective Date	Fingerprint Result Received	Date Received	Fingerprint Status	Action
<input type="checkbox"/>	Rivera, Amanda	31			<input checked="" type="radio"/> Yes <input type="radio"/> No	03/22/2018	No Disqualifying Offenses	
<input type="checkbox"/>	Rivera, Rebecca	50			<input type="radio"/> Yes <input type="radio"/> No	00/00/0000		Delete

**Request Background Check**

**Criminal Background Checks Completed**  
*Criminal Records have been checked by the caregiver(s), all adults and other persons living in the home as required. This may also include background checks for other individuals (Visitors, other individuals who may have supervised contact with the child(ren)):*

Name	Action

Additional background checks not listed above (include name of check, (e.g. driving record, civil court) name of individual's screened and date of results):

Clearance Issues (Analysis of Background Check Results and All):  
 Local Backgrounds: No records found for Amanda Rivera  
 Clerk of Court: No records found for Amanda Rivera, except traffic offenses.  
 FL Department of Corrections: No records found for Amanda Rivera.  
 Sexual Offenders: No records found for Amanda Rivera

Documenting Background Check Results and Analysis:

**Florida Safe Families Network** Hand Book | Print | Audit | Spell Check | Help

General Information  
 Provider ID: 900000202 Worker Name: YILLPH, LISA I (20FSIQ FAMILY SAFETY QA) Purpose of Home Study: Non-Relative Placement Pending

**Background Check Information**

**Criminal Background Check Request**  
 Request Type:  Planned Placement  Emergency Placement

Back-ground Check?	Name	Age	Last Background Check	Local Effective Date	Fingerprint Result Received	Date Received	Fingerprint Status	Action
<input type="checkbox"/>	Rivera, Amanda	31			<input checked="" type="radio"/> Yes <input type="radio"/> No	03/22/2018	No Disqualifying Offenses	
<input type="checkbox"/>	Rivera, Rebecca	50			<input type="radio"/> Yes <input type="radio"/> No	00/00/0000		Delete

**Criminal Background Checks Completed**  
*Criminal Records have been checked by the caregiver(s), all adults and other persons living in the home as required. This may also include background checks for other individuals (Visitors, other individuals who may have supervised contact with the child(ren)):*

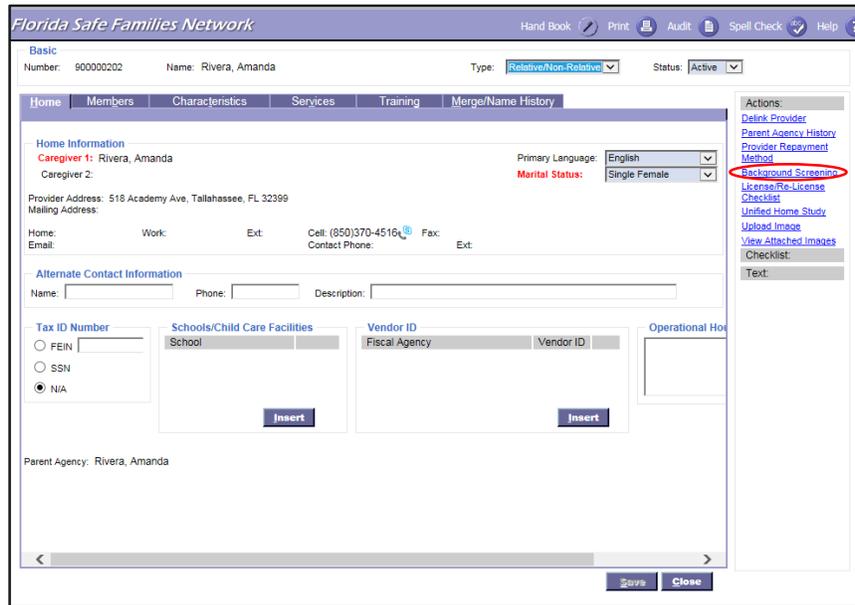
Name	Action

Additional background checks not listed above (include name of check, (e.g. driving record, civil court) name of individual's screened and date of results):

Clearance Issues (Analysis of Background Check Results and All):  
 Local Backgrounds: No records found for Amanda Rivera  
 Clerk of Court: No records found for Amanda Rivera, except traffic offenses.  
 FL Department of Corrections: No records found for Amanda Rivera.  
 Sexual Offenders: No records found for Amanda Rivera

**Save** **Close**

Updating criminal history dates:



Where to insert clearance from different sources:

**Person Provider Information**

Provider Name: Kimi Qlsmhlm    Provider Type: Relative/Non-Relative    Worker:  
Provider ID: 100192984    Provider Status: Active    Last Updated: 01/23/2018

**Screened Records**

Name	Cleared? Yes No	Source	LOCAL	FDLE	FBI	FL Abuse Registry	OS Abuse Registry
Qlsmhlm, Kimi	<input type="radio"/> Yes <input checked="" type="radio"/> No	Effective Date: 01/23/2018 Expiration Date: 00/00/0000	00/00/0000	00/00/0000	00/00/0000	00/00/0000	00/00/0000
Qlsmhlm, Montrey	<input type="radio"/> Yes <input checked="" type="radio"/> No	Effective Date: 01/23/2018 Expiration Date: 00/00/0000	00/00/0000	00/00/0000	00/00/0000	00/00/0000	00/00/0000

**Background Screening Summary**

NA

Buttons: Print, Audit, Spell Check, Help, Insert, Save, Close

## General Information Discussed during the Interview

Case Managers need to interview the prospective caregiver(s) to discuss:		
The danger threats creating the child's need for out-of-home care.	Any special medical needs the child has, including current medications.	The ability and willingness of the caregiver(s) to protect and care for the child. This includes whether or not the caregiver is aligned with the child.
The court proceedings involving the family.	Their rights and responsibilities as a caregiver.	Support and resources available to the caregiver, such as relative caregiver funds, Medicaid, at-risk daycare, etc.

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### Caregiver Supports

Medical Insurance (Medicaid)	"At-risk" Child Care Referral	"Child-only" Temporary Cash Assistance
Relative Caregiver Program (RCP)	Non-Relative Caregiver Program (NRCP)	DCF Tuition and Fee Exemption

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## Financial Security, Resources, and Child Care Arrangements

In the UHS, there are four areas of information used to assess the caregiver's financial situation:

1. **Finance Breakdown:** Information about the caregiver's current employment and the income they earn from each place of employment
  - Employer Name: Includes all current employers for each caregiver.
  - Employer Address
  - Length of Current Employment: The length is measured in years and months.
  - Hours and Shifts Worked
  - Net Monthly Salary: Total amount of money brought home after taxes
2. **Additional Monthly Support:** Information about other sources of income, outside of employment, that a caregiver or household member is contributing to the household.
  - Who Is Receiving the Additional Income (Member Name)
  - Income Type: Type of income that is being received. Options in dropdown menu in FSFN include:
    - Adoption subsidy
    - Disability benefits
    - Retirement benefits
    - Social Security benefits
    - Temporary Cash Assistance
    - Other
  - Income Amount: Amount of money from each specified type of income.
3. **Household Information:** Information on all of the expenses caregivers have on a monthly basis.
  - Expense Type: Type of expense that has been identified.
  - Expense Amount: Monthly expense amount for each selected expense type.
  - Combined Monthly Income, Total Monthly Expenses, and Net Monthly Income: This information is totaled by FSFN which allows for easy viewing.
4. **Family Situation:** Financial strengths/needs of the relative/non-relative placement. Includes the identification of any financial barriers and possible assistance that can be provided to the caregivers.
  - Does the family have sufficient funds to support their current expenses?
  - Will child care or after-school care be needed?
  - What new expenses are anticipated for the child(ren) to be placed in the home?
  - Will the family be able to provide sufficient care for children to be placed in the home without causing financial hardship for the family?
  - Were all available assistance programs discussed with the family? If yes, explain. If

no, why not. What assistance programs will the family need in order to help ensure placement stability?

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### FSFN Screens

#### Employment Information:

**Florida Safe Families Network** Hand Book Print Audit Spell Check Help ?

General Information  
Provider ID: 900000202 Worker Name: YILLPH, LISA I (20FSIQ FAMILY SAFETY QA) Purpose of Home Study: Non-Relative Placement Pending

Demographics	Prior Intakes and Investigations/Referrals	Background Check Information	Financial Security Resources and Child Care Arrangement	Narrative Family Assessment	Outcome/ Attachments to the Unified Home Study	Actions:
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**Finance Breakdown**

**Employment Information**

Member Name	Employer Name	Net Monthly Salary	Action
Rivera, Amanda (900000240)	Walmart	\$2,000.00	<a href="#">Edit</a> <a href="#">Delete</a>

[Insert](#)

**Additional Monthly Support or Income**

Member Name	Income Type	If Other, Specify	Income Amount	Action
Rivera, Amanda (900000240)	Other	Food Stamps	\$200.00	<a href="#">Delete</a>

[Insert](#)

**Household Information**

Combined Monthly Income: \$2,200.00

Total Monthly Expenses: \$1,789.00

**Monthly Expenses**

Expense Type	If Other, Specify	Expense Amount	Action
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**Text:**

[Unified Home Study](#)  
[Prior Maltreatments or Findings/Referrals](#)

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Adding Employment Details:

The screenshot shows a web browser window titled "Employment Details -- Webpage Dialog" for the "Florida Safe Families Network". The form contains the following fields:

- Member Name:** A dropdown menu.
- Employer Name:** A large text input area.
- Employer's Address:** A large text input area.
- Length of Current Employment:** Two input fields for "Years" and "Months".
- Hours and Shifts Worked:** A large text input area.
- Net Monthly Salary (after taxes):** A text input field with the value "\$0.00". A note below it says "(if paid weekly or bi-weekly, calculate into monthly amount)".

At the bottom right of the form are "Save" and "Close" buttons.

Adding Additional Monthly Support or Income:

**Additional Monthly Support or Income**

Member Name	Income Type	If Other, Specify	Income Amount	Action
Rivera, Amanda (900000240)	Other	Food Stamps	\$200.00	Delete
	Adoption Subsidy		\$0.00	Delete
	Disability Benefits			
	Other			
	Retirement Benefits			
	Social Security Benefits			
	Temporary Cash Assistance			

**Insert**

Adding Monthly Expenses:

Household Information		Monthly Expenses		
Combined Monthly Income:	\$2,200.00	Car Payment	\$269.00	Delete
Total Monthly Expenses:	\$1,789.00	Car Insurance	\$200.00	Delete
Net Monthly Income:	\$411.00	Car Payment	\$200.00	Delete
		Child Care	\$125.00	Delete
		Food/Supplies		
		Housing		
		Medical		
		Other Expense	Cable/Internet	\$75.00 Delete
		Transportation		
		Utilities		

**Insert**

Family Situation:

**Florida Safe Families Network**

Hand Book | Print | Audit | Spell Check | Help

Provider ID: 900000202 Worker Name: YILLPH, LISA I (20FSIQ FAMILY SAFETY QA) Purpose of Home Study: Non-Relative Placement Pending

Demographics	Prior Intakes and Investigators/Referrals	Background Check Information	Financial Security Resources and Child Care Arrangement	Narrative Family Assessment	Outcome/ Attachments to the Unified Home Study	Actions:
<b>Family Situation</b>						Account Upload Image
1. Does the family have sufficient funds to support their current expenses? <input checked="" type="radio"/> Yes <input type="radio"/> No						Text: <a href="#">Unified Home Study</a> <a href="#">Prior Maltreatments or Findings/Referrals</a>
Amanda has sufficient funds to manger her current expenses.						
2. Will child care or after-school care be needed? <input checked="" type="radio"/> Yes <input type="radio"/> No						
Amanda will need child care for Jacob and before/after school care for Jenna.						
3. What new expenses are anticipated for the child(ren) to be placed in the home?						
Amanda will need beds, clothing and toys for the children. There will also be a need for additional food. Child care and before/after school care will be an additional expense.						
4. Will the family be able to provide sufficient care for children to be placed in the home without causing financial hardship for the family? <input checked="" type="radio"/> Yes <input type="radio"/> No						
There appears to be no concerns for financial hardship if Jenna and Jacob are placed in the home.						
5. Were all available assistance programs discussed with the family? If yes, explain. If no, why not. <input checked="" type="radio"/> Yes <input type="radio"/> No						
Amanda is currently receiving food stamps and will be adding the children to her account. She is aware of either applying for Medicaid or adding the children to her health insurance. Relative/Non-Relative Caregiver funds was explained to Amanda.						
6. What assistance programs will the family need in order to help ensure placement stability? (List all)						
Besides additional food stamps, health insurance and child care, no other assistance is needed						
7. Is the family willing to adopt this child without subsidy? <input type="radio"/> Yes <input type="radio"/> No						

## Narrative Family Assessment

Not all questions listed as part of the Narrative Family Assessment are required for the Relative/Non-relative UHS. It is best practice to answer all questions, but the questions with grey text boxes are not required for the completion of the home study.

The Narrative Family Assessment is split up into nine areas:

1. **Assess Caregiver:** This is where Case Managers assess the caregiver(s) and the family environment. There are 15 assessment questions. The questions are:
  - Question 1: Explain any experiences with child abuse or neglect, alcohol and/or substance abuse treatment, or domestic violence. If any, describe if the history involved either of the parent(s) of the child being placed or the child. Explain how experiences may positively or negatively impact the ability of the caregiver(s) to care for and protect the child(ren).
    - *This question is required for ALL home study types.*
  - Question 2: Explain any caregiver physical or mental health conditions that may interfere with the ability of the caregiver(s) to care for the child. Explain how the caregiver will address any challenges.
    - For example, the caregiver takes medications that may result in drowsiness, causing restrictions in the caregiver's ability for driving a vehicle or the caregiver has significant individual needs that might affect the safety of the child, such as severe depression, lack of impulse control, medical needs, other current caregiving demands, etc.
    - *This question is required for ALL home study types.*

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- Question 3: Explain how the caregiver(s) will participate in a team supporting the child's safety, permanency, and well-being by:
  - a. Sharing necessary information with others on the team while maintaining the confidentiality of the child and caregiver as required by law, regulation, and professional ethics.
  - b. Participating in planning activities, court hearings, staffings, and other key meetings.
    - *This question is NOT required for Emergency Placement Home Studies.*
  
- Question 4: Explain how the caregiver(s) are willing and able to make a loving commitment to the child(ren)'s safety and well-being. This may include, but is not limited to, the following:
  - a. Providing appropriate supervision and positive methods of discipline.
  - b. Encouraging the child in his/her strengths, and respecting the child's individual likes and dislikes.
    - Providing opportunities to develop the child's interests and skills.
  - c. Maintaining awareness of the impact of trauma on behavior.
  - d. Involving the child in family and community activities.
    - Providing transportation to school, child care, extracurricular activities, etc.
  - e. Ensuring the child's safety by employing appropriate physical safety measures, including in the household, for transportation, and with pets.
    - *This question is required for ALL home study types.*
  
- Question 5: Explain how the caregiver(s) are willing and able to:
  - a. Respect and honor any child's culture, religion and ethnicity.
  - b. Adapt to and support any child's individual situation, including sexual orientation and family relationships. If the caregiving family's religion, culture, or other factors will impair their ability to meet the needs of any child, please explain what the family's limitations are, and how limitations could impact any child placed in their home.
    - *This question is required for ALL home study types.*

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- Question 6: Explain how the caregiver(s) are willing and able to commit to maintaining any child they accept in their home until such time as it is in the child's best interest to leave the home.
    - *This question is required for ALL home study types.*
  
  - Question 7: Explain how the caregiver(s) will address challenges in caring for the child(ren) to be placed, including available supports and resources.
    - a. These challenges may include, but are not limited to, behaviors that are a significant threat to others, juvenile sexual abuse, problematic sexual behavior, severe self-harm behavior, etc.
    - b. The caregiver is caring for the other children or adults which results in significant demands on their time.
    - c. The caregiver is caring for family members with mental health or medical conditions that might result in harm to the child.
      - *This question is required for ALL home study types.*
  
  - Question 8: Explain how the caregiver(s) are willing and able to participate in transition planning for the child(ren).
    - *This question is NOT required for Emergency home studies.*
  
  - Question 9: Explain how the caregiver(s) are willing and able to assist the biological caregivers in improving their ability to care for and protect their children and to provide continuity for the child after reunification.
    - *This question is required for ALL home study types EXCEPT Adoption and Adoption Addendum.*
  
  - Question 10: Explain how the caregiver(s) are willing and able to assist the child(ren) in family time/visitation and other forms of communication including Post Adoptions Communication Plans when appropriate.
    - *This question is required for ALL home study types.*
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- Question 11: Explain how the caregiver(s) will:  
Maintain records and ensure that these records are made available to other partners that are important to the Child Welfare System and to the child and family, that are important to any child's well-being including child resource records, medical records, school records and all psychotropic medication records.
    - *This question is NOT required for Emergency home studies.*
  
  - Question 12: Explain how the caregiver(s) are willing and able to advocate for children in their care as needed with the Child Welfare System, the court, and community agencies, including schools, child care, health and mental health providers, and employers.
    - *This question is required for ALL home study types.*
  
  - Question 13: Explain the willingness and ability of the caregiver(s) to participate fully in any child's medical, educational, psychological, special or physical needs, and dental care. This includes providing transportation, attending appointments, and communicating with professionals.
    - *This question is required for ALL home study types.*
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- Question 14: Explain how the caregiver(s) are willing and able to support the child(ren)'s school success by:
  - a. Participating in school activities and meetings, including disciplinary and/or IEP (Individualized Education Plan) meetings.
  - b. Assisting with school assignments, supporting tutoring programs, meeting with teachers, and working with an educational surrogate if one has been appointed and encouraging the child's participation in extra-curricular activities.
  - c. For any child who has a disability, or is suspected of having a disability, to attend Educational Surrogate Parent training, if needed or recommended by the court, and thereafter, advocate for the child(ren) in the school system.
  - d. Maintaining the children in the school of origin, if it is in the child(ren)'s best interest to do so.
  - e. Maintaining the child(ren) in the school of origin until an appropriate

grading break in the academic year, if not possible or not in the child(ren)'s best interest to remain in the school of origin for the remainder of the school year.

– *This question is required for ALL home study types.*

- **Question 15:** Is the family willing and able to provide placement for any siblings?

– *This question is required for ALL home study types.*

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2. **Motivation:** This area of assessment is where Case Mangers describe the motivations the caregivers have to be approved as a relative/non-relative caregiver. If it is a two-parent household, Case Managers need to address both caregivers' mutual desire to care for the child. This includes, but is not limited to, gaining an understanding of the following:

- What is the alignment of the caregiver(s) with the child?
- What is the understanding of the caregiver(s) of the danger threats that make the child unsafe?
- What is the commitment of the caregiver(s) to implement and adhere to the safety plan?
- What is the willingness of the caregiver(s) to help the child achieve permanency?

– *This question is required for ALL home study types.*

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3. **Education and Employment:** This area of assessment differs from the financial employment questions previously discussed. Here Case Managers are not detailing where caregivers work or how much money they make, but how their education and /or employment history has helped prepare them to care for a child. In this area of assessment, Case Managers will:
- Describe how the caregiver(s)' education, special training or employment history helps prepare them to care for a child.
  - Discuss whether the person may have any challenges, including but not limited to the caregiver(s)' past difficulties in school, a specific learning disability or his/her current work schedule.
    - *This question is required for ALL home study types.*
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4. **Family History:** This area used to be called Family Life in previous home studies. Here Case Managers describe the relationships between household members, extended family and friends. This means gaining a clear understanding of the elements below:
- Describe/discuss relationships between household members and extended family and friends. Identify the family's formal and informal support systems, including current and anticipated child care arrangements.
  - Describe the family's cultural and religious beliefs and their willingness to accommodate children of different faiths, beliefs, ethnicities, and/or cultures.
  - Discuss each caregiver's history to include any past trauma that could impact the family's ability to provide quality care to children.
  - Describe attitudes towards children and parents involved in the child welfare system.
  - Describe how family members have demonstrated capacity to parent children with special needs.
  - Discuss any significant losses by the family members and any coping mechanisms used to manage such loss.
  - Describe the type of discipline used in the family prior to fostering and how they were disciplined as children.
    - *This question is required for ALL home study types.*
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5. **Child(ren) To Be Placed Interview(s):** This is a new area of assessment included in the UHS. For this area Case Managers interview the child or children being placed to gain their understanding and/or feelings about being placed in the home.
- Discuss and assess the child(ren)'s understanding or feeling about being placed in the home. Document any concerns or needs that they would want the potential caregiver(s) to know about them.
    - *This question is required for ALL home study types.*
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6. **References and Reviews:** This is also a new area of assessment where Case Managers contact references regarding the family's ability to meet the needs of the child.
- Document the references received from relatives, non-relatives, professionals and services providers regarding the family's ability to meet the needs of a child(ren) placed in the home.
    - *This question is required for ALL home study types.*
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7. **Child History:** This area of assessment is also new to the UHS. Case Managers describe each child that is currently living in the home.
- Describe each child living in the home separately, including developmental history/issues, personality, health, education level, special needs and behavioral challenges.
  - In addition, describe/discuss the adjustment and integration of children previously adopted by or placed with the family.
  - Discuss with all family members any failed placements in terms of the cause, resolution, and any differences or changes that will be made as a result of lessons learned.
    - *This question is required for ALL home study types.*
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8. **Physical Environment:** This area requires a walk-through of the home to ensure that the living environment is free of any potential hazards and the sleeping arrangements are appropriate for the age of the child.

- Discuss the physical environment, including a description of the home; address the interior, exterior, number of rooms, etc., sleeping arrangements, and accommodations for child(ren)'s personal belongings.
- Are there any changes needed in order to accommodate child(ren)?
  - *This question is required for ALL home study types.*

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9. **Family Supports and Resources:** This new addition to the UHS allows Case Managers to fully describe what support system currently exist in the family's life.

- Describe if the applicant(s) have a well-developed support system comprised of extended family, friends, and community organizations that affirms the applicant's decision to provide care for a child placed in their home.
- If there were an unforeseen emergency, whom would they identify as using for respite, or additionally, for long-term planning?
- What is their willingness to engage in recommended services, such as therapy and support group, etc.?
  - *This question is required for ALL home study types.*

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**FSFN Screens**

Narrative Family Assessment Assess Caregiver(s) Questions:

*Florida Safe Families Network* Hand Book Print Audit Spell Check Help

**General Information**  
 Provider ID: 900000202 Worker Name: YILLPH, LISA I (20FSIQ FAMILY SAFETY QA) Purpose of Home Study: Non-Relative Placement Pending

Demographics	Prior Intakes and Investigations/Referrals	Background Check Information	Financial Security Resources and Child Care Arrangement	<b>Narrative Family Assessment</b>	Outcome/ Attachments to the Unified Home Study	Actions: <a href="#">Approval</a> <a href="#">Upload Image</a>
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*The purpose of this section is to assess the caregiver(s) ability to provide a safe and nurturing environment in accordance with Florida Statute and Administrative Code, and Department of Children and Families Operating Procedures.*

**Assess Caregiver(s)**

1. Explain any experiences with child abuse or neglect; alcohol and/or substance abuse treatment; or domestic violence. Describe whether the history, if any, involved either of the parent(s) of the child being placed or the child. Explain how experiences may positively or negatively impact the ability of the caregiver(s) to care for and protect the children.  
 \*Reference any other household members (if applicable)\*  
 Amada stated she does not drink socially and deny a history of substance abuse and domestic violence. She denied a history of childhood abuse or neglect. Amada feels she had a great childhood

2. Explain any caregiver health or mental health conditions that may interfere with the ability of the caregiver(s) to care for the child. Explain how the caregiver will address any challenges. (For example, the caregiver takes medications that may result in drowsiness, causing restrictions in the caregiver's ability to drive a vehicle; or the caregiver has significant individual needs that might affect the safety of the child such as severe depression, lack of impulse control, medical needs, other current caregiving demands, etc.)  
 \*Reference any other household members (if applicable)\*  
 Amada denied having any medical or mental health conditions that would interfere with her ability to be a caregiver. Amada does take Lisinopril 25mg for hypertension and Metoprolol for gout. She does not take any medications that would contribute to her sleeping when she is in care of the children.

3. Explain how the caregiver(s) will participate in a team supporting the child's safety, permanency and well-being by:  
 a) Sharing necessary information with others on the team maintaining the confidentiality of the child and caregiver as required by law, regulation and professional ethics.  
 b) Participating in planning activities, court hearings, staffings and other key meetings.  
 \*Reference any other household members (if applicable)\*  
 Amada stated she is willing to participate in any meetings, court hearings or staffings that are necessary to advocate for the children. She will take the children to any recommended appointments for the children and will ensure the children are at every appointment. She wants to be informed of the case and understand what is occurring in the dependency process. She hopes the parents will participate in the process to be able to care for the children again. She understands the importance of ensuring the children's involvement with services identified.

Text:  
[Unified Home Study](#)  
[Prior Maltreatments or Findings/Referrals](#)

Narrative Family Assessment – Assess Caregiver(s) Questions:

*Florida Safe Families Network* Hand Book Print Audit Spell Check Help

**General Information**  
 Provider ID: 900000202 Worker Name: YILLPH, LISA I (20FSIQ FAMILY SAFETY QA) Purpose of Home Study: Non-Relative Placement Pending

Demographics	Prior Intakes and Investigations/Referrals	Background Check Information	Financial Security Resources and Child Care Arrangement	<b>Narrative Family Assessment</b>	Outcome/ Attachments to the Unified Home Study	Actions: <a href="#">Approval</a> <a href="#">Upload Image</a>
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4. Explain how the caregiver(s) are willing and able to make a loving commitment to the child(ren)'s safety and well being. This may include but is not limited to the following:  
 a) Providing appropriate supervision and positive methods of discipline.  
 b) Encouraging the child in his/her strengths, and respecting the child's individual likes and dislikes.  
 c) Providing opportunities to develop the child's interests and skills.  
 d) Maintaining awareness of the impact of trauma on behavior.  
 e) Involving the child in family and community activities.  
 f) Providing transportation to school, child care, extracurricular activities, etc.  
 g) Ensuring the child's safety by employing appropriate physical safety measures, including in the household, for transportation, and with pets.  
 \*Reference any other household members (if applicable)\*  
 Amada states that she is attached to the children. She wants the Jenna and Jacob to be safe and healthy. She is willing to provide transportation to any doctor appointments or any other necessary appointments. She is willing to provide and maintain the safety measures in his home to ensure the safety of the children. She is aware that as the children grow, if still in her care, there may be behavioral changes and/or difficulties. She would be supportive to engage the children in any needed services that are recommended or identified that the children would benefit from. She will remain with the children at all times when in the home and provide

5. Explain how the caregiver(s) are willing and able to:  
 a) Respect and honor any child's culture, religion and ethnicity.  
 b) Adapt to and support any child's individual situation, including sexual orientation and family relationships.  
 If the caregiving family's religion, culture, or other factors will impair their ability to meet the needs of any child, please explain what the family's limitations are, and how limitations could impact any child placed in their home.  
 \*Reference any other household members (if applicable)\*  
 Amada is willing to continue their family traditions with the children. She is willing to provide any type of special support that the children will need while living in her home. She would like the children to learn about other cultures and religions. She wants the children to learn about many cultures and religions and identify with whichever one they desire. She does not want to sway the children's beliefs in any way and support them with whichever religion they choose. She will support the children regardless of what sexual orientation they will identify with if they are still in her home at an older age.

6. Explain how the caregiver(s) are willing and able to commit to maintaining any child they accept in their home until such time as it is in the child's best interest to leave the home.  
 \*Reference any other household members (if applicable)\*  
 Amada is willing and able to keep the children as long as needed in her home. She has hope that the parents will recover and will be able to reunify with the children. If the children reunifies with their parents she is willing to continue her relationship with the children. She is willing to have the children in her home for as long as needed. There is nothing that would change her mind in caring for the children at this time. Financially she is able to support the children without any added financial burden.

Text:  
[Unified Home Study](#)  
[Prior Maltreatments or Findings/Referrals](#)

Narrative Family Assessment – Assess Caregiver(s) Questions:

**Florida Safe Families Network** Hand Book Print Audit Spell Check Help

**General Information**  
 Provider ID: 900000202 Worker Name: YILLPH, LISA I (20FSIQ FAMILY SAFETY QA) Purpose of Home Study: Non-Relative Placement Pending

Demographics	Prior Intakes and Investigations/Referrals	Background Check Information	Financial Security Resources and Child Care Arrangement	Narrative Family Assessment	Outcome/ Attachments to the Unified Home Study	Actions:
<p>7. Explain how the caregiver(s) will address challenges in caring for the child(ren) to be placed, including available supports and resources.</p> <p>a) These challenges may include, but are not limited to, behaviors that are a significant threat to others, juvenile sexual abuse, problematic sexual behavior, severe self-harm behavior, etc.</p> <p>b) The caregiver is caring for the other children or adults which results in significant demands on their time.</p> <p>c) The caregiver is caring for family members with mental health or medical conditions that might result in harm to the child.</p> <p><b>*Reference any other household members (if applicable)*</b></p> <p>Amanda stated that she has no challenges to provide care for the children. She is aware that the children will need special care and they have her best interest. If any issues arise for the children, she is willing to have the children enter services and receive the assistance from professionals that is needed at that point in time.</p>						<p><a href="#">Approval</a></p> <p><a href="#">Upload Image</a></p> <hr/> <p><b>Text:</b></p> <p><a href="#">Unified Home Study</a></p> <p><a href="#">Prior Maltreatments or Findings/Referrals</a></p>
<p>8. Explain how the caregiver(s) are willing and able to participate in transition planning for the child(ren).</p> <p><b>*Reference any other household members (if applicable)*</b></p> <p>Amanda stated she is willing to participate in transition planning for the children and will help maintain a relationship with them after they leave the home. She is open to any suggestions that are presented on how to make this transition easy for the children. She will maintain a strong relationship with them.</p>						
<p>9. Explain how the caregiver(s) are willing and able to assist the biological caregivers in improving their ability to care for and protect their children and to provide continuity for the child after reunification.</p> <p><b>*Reference any other household members (if applicable)*</b></p> <p>Amanda stated she is willing to assist the parents with improving their life to be able to care and protect the children. She is willing to help with reunification as long as the parents are providing a caring, loving and safe environment for the children. She wants the parents to become stable and drug free to be able to fully care for their children. She is willing to participate in identified services with the parents to help better themselves. She desires for the parents to become stable and able to care for their children. She has attempted to help the parents in the past.</p>						
<p>10. Explain how the caregiver(s) are willing and able to assist the child(ren) in family time/visitation and other forms of communication including Post Adoptions Communication Plans when appropriate.</p> <p><b>*Reference any other household members (if applicable)*</b></p> <p>Amanda is willing to assist with visitation for the parents in her home and able to communicate with both parents appropriately. She is willing to supervise contact between the parents and the children should it be approved by the courts.</p>						

Narrative Family Assessment – Assess Caregiver(s) Questions:

**Florida Safe Families Network** Hand Book Print Audit Spell Check Help

**General Information**  
 Provider ID: 900000202 Worker Name: YILLPH, LISA I (20FSIQ FAMILY SAFETY QA) Purpose of Home Study: Non-Relative Placement Pending

Demographics	Prior Intakes and Investigations/Referrals	Background Check Information	Financial Security Resources and Child Care Arrangement	Narrative Family Assessment	Outcome/ Attachments to the Unified Home Study	Actions:
<p>11. Explain how the caregiver(s) are willing and able to maintain records and ensure that these records are made available to other partners that are important to the child welfare system and to the child and family, that are important to any child's well being including child resource records, medical records, school records and all psychotropic medication records.</p> <p><b>*Reference any other household members (if applicable)*</b></p> <p>Amanda is willing to maintain all records pertaining to the children. She is also willing to provide their records to other partners in the child welfare system. She will obtain and organizer to maintain the children's records.</p>						<p><a href="#">Approval</a></p> <p><a href="#">Upload Image</a></p> <hr/> <p><b>Text:</b></p> <p><a href="#">Unified Home Study</a></p> <p><a href="#">Prior Maltreatments or Findings/Referrals</a></p>
<p>12. Explain how the caregiver(s) are willing and able to advocate for children in their care as needed with the child welfare system, the court, and community agencies, including schools, child care, health and mental health providers, and employers.</p> <p><b>*Reference any other household members (if applicable)*</b></p> <p>Amanda is willing to advocate for whatever is the best interest of the children. Should she be required to testify or speak to the courts she is willing to do so. There are no limits that he has identified that would place her in a situation to not do something for the children.</p>						
<p>13. Explain the willingness and ability of the caregiver(s) to participate fully in any child's medical, educational, psychological, special or physical needs and dental care. This includes providing transportation, attending appointments and communicating with professionals.</p> <p><b>*Reference any other household members (if applicable)*</b></p> <p>Amanda is willing to participate fully in any type medical or any other needs which will benefit the children. This will include providing transportation, attending appointments and communicating with professionals.</p>						
<p>14. Explain how the caregiver(s) are willing and able to support the child(ren)'s school success by:</p> <p>a) Participating in school activities and meetings, including disciplinary and/or IEP (Individualized Education Plan) meetings.</p> <p>b) Assisting with school assignments, supporting tutoring programs, meeting with teachers and working with an educational surrogate if one has been appointed and encouraging the child's participation in extra-curricular activities.</p> <p>c) For any child who has a disability, or is suspected of having a disability, to attend Educational Surrogate Parent training, if needed or recommended by the court; and thereafter advocate for the child(ren) in the school system.</p> <p>d) Maintaining the children in the school of origin, if it is in the child(ren)'s best interest to do so.</p>						

Narrative Family Assessment – Assess Caregiver(s) Questions:

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General Information  
 Provider ID: 900000202 Worker Name: YILLPH, LISA I (20FSIQ FAMILY SAFETY QA) Purpose of Home Study: Non-Relative Placement Pending

Demographics	Prior Intakes and Investigations/Referrals	Background Check Information	Financial Security Resources and Child Care Arrangement	Narrative Family Assessment	Outcome/ Attachments to the Unified Home Study	Actions:
<p>14. Explain how the caregiver(s) are willing and able to support the child(ren)'s school success by:</p> <ul style="list-style-type: none"> <li>a) Participating in school activities and meetings, including disciplinary and/or IEP (Individualized Education Plan) meetings.</li> <li>b) Assisting with school assignments, supporting tutoring programs, meeting with teachers and working with an educational surrogate if one has been appointed and encouraging the child's participation in extra-curricular activities.</li> <li>c) For any child who has a disability, or is suspected of having a disability, to attend Educational Surrogate Parent training, if needed or recommended by the court; and thereafter advocate for the child(ren) in the school system.</li> <li>d) Maintaining the children in the school of origin, if it is in the child(ren)'s best interest to do so.</li> <li>e) Maintaining the child(ren) in the school of origin until an appropriate grading break in the academic year, if not possible or not in the child(ren)'s best interest to remain in the school of origin for the remainder of the school year.</li> </ul> <p><b>*Reference any other household members (if applicable)*</b></p> <p>Amanda is willing to participate in any school services that are needed for the children. She will assist with assignments, support any school programs and meet with educators.</p>						<p><b>Approval</b></p> <p><a href="#">Upload Image</a></p> <hr/> <p><b>Text:</b></p> <p><a href="#">Unified Home Study</a></p> <p><a href="#">Prior Maltreatments or Findings/Referrals</a></p>
<p>15. Is the family willing and able to provide placement for any siblings? <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Undecided</p> <p>Amanda is willing to care for both children.</p>						
<p><i>This section is intended to be a descriptive narrative assessment to further describe the overall functioning of the family and their capacity to provide (or to continue to provide) a safe and appropriate placement for children.</i></p> <p><b>MOTIVATION</b></p> <p>Describe the motivation to foster, adopt or be approved as a relative/non-relative caregiver. If a two-parent household, address both caregivers' mutual desire to care for the child. This includes but is not limited to the following:</p> <ul style="list-style-type: none"> <li>a) What is the alignment of the caregiver(s) with the child?</li> <li>b) What is the understanding of the caregiver(s) of the danger threats that make the child unsafe?</li> <li>c) What is the commitment of the caregiver(s) to implement and adhere to the safety plan?</li> <li>d) What is the willingness of the caregiver(s) to help the child achieve permanency?</li> </ul>						

Narrative Family Assessment – Motivation and Education and Employment:

**Florida Safe Families Network** Hand Book | Print | Audit | Spell Check | Help ?

General Information  
 Provider ID: 900000202 Worker Name: YILLPH, LISA I (20FSIQ FAMILY SAFETY QA) Purpose of Home Study: Non-Relative Placement Pending

Demographics	Prior Intakes and Investigations/Referrals	Background Check Information	Financial Security Resources and Child Care Arrangement	Narrative Family Assessment	Outcome/ Attachments to the Unified Home Study	Actions:
<p><i>This section is intended to be a descriptive narrative assessment to further describe the overall functioning of the family and their capacity to provide (or to continue to provide) a safe and appropriate placement for children.</i></p> <p><b>MOTIVATION</b></p> <p>Describe the motivation to foster, adopt or be approved as a relative/non-relative caregiver. If a two-parent household, address both caregivers' mutual desire to care for the child. This includes but is not limited to the following:</p> <ul style="list-style-type: none"> <li>a) What is the alignment of the caregiver(s) with the child?</li> <li>b) What is the understanding of the caregiver(s) of the danger threats that make the child unsafe?</li> <li>c) What is the commitment of the caregiver(s) to implement and adhere to the safety plan?</li> <li>d) What is the willingness of the caregiver(s) to help the child achieve permanency?</li> </ul> <p>Amanda wishes to care for the children as she has been close to the family since Jenna was an infant. She loves both of them and wants to be in their lives. She works full time, 10 hours a day. So she will be able to spend time with the children and ensure their needs are met. She is willing to have the children in her home as long as needed. There is nothing that would change her mind in caring for the children at this time. Financially she is able to support the children without any added financial burden..</p>						<p><b>Approval</b></p> <p><a href="#">Upload Image</a></p> <hr/> <p><b>Text:</b></p> <p><a href="#">Unified Home Study</a></p> <p><a href="#">Prior Maltreatments or Findings/Referrals</a></p>
<p><b>EDUCATION AND EMPLOYMENT</b></p> <p>Describe how the caregiver(s) education, special training or employment history helps prepare them to care for a child. Discuss whether the person may have any challenges, including but not limited to the caregiver(s)' past difficulties in school, a specific learning disability or his/her current work schedule.</p> <p>Amanda has some college education. She has worked for Walmart for 5 years and she is a manager.</p>						
<p><b>FAMILY HISTORY</b></p> <p>Describe/discuss relationships between household members and extended family and friends. Identify the family's formal and informal support systems, including current and anticipated child care arrangements. Describe the family's cultural and religious beliefs and their willingness to accommodate children of different faiths, beliefs, ethnicities, and/or cultures.</p> <p>Discuss each caregiver's history to include any past trauma that could impact the family's ability to provide quality care to children. Describe attitudes towards children and parents involved in the child welfare system. Describe how family members have demonstrated capacity to parent children with special needs. Discuss any significant losses by the family members and any coping mechanisms used to manage such loss. Describe the type of discipline used in the family prior to fostering and how they were disciplined</p>						

***Narrative Family Assessment – Family History, Child(ren) To Be Placed Interview(s), and References and Reviews:***

**Florida Safe Families Network** Hand Book Print Audit Spell Check Help

General Information  
 Provider ID: 900000202 Worker Name: YILLPH, LISA I (20FSIQ FAMILY SAFETY QA) Purpose of Home Study: Non-Relative Placement Pending

Demographics	Prior Intakes and Investigations/Referrals	Background Check Information	Financial Security Resources and Child Care Arrangement	Narrative Family Assessment	Outcome/ Attachments to the Unified Home Study	Actions:
<p><b>FAMILY HISTORY</b></p> <p>Describe the relationships between household members and extended family and friends. Identify the family's formal and informal support systems, including current and anticipated child care arrangements. Describe the family's cultural and religious beliefs and their willingness to accommodate children of different faiths, beliefs, ethnicities, and/or cultures.</p> <p>Discuss each caregiver's history to include any past trauma that could impact the family's ability to provide quality care to children. Describe attitudes towards children and parents involved in the child welfare system. Describe how family members have demonstrated capacity to parent children with special needs. Discuss any significant losses by the family members and any coping mechanisms used to manage such loss. Describe the type of discipline used in the family prior to fostering and how they were disciplined as children.</p> <p>Amanda grew up in a single family home with her mother and sister, who both live close by. She has a good relationship with them and has Sunday brunch with them, every other Sunday. Amanda reports no history with DCF involvement as an adult or child. Her relationship with her mother has always been a good one. Her mother did spank her as a child, but it was never excessive. She does not believe she will use physical discipline on the children, simply because she doesn't think they need corporal punishment at the moment, but more positive reinforcement. Amanda is worried about Bill and Elizabeth and their ability to get their life together and get</p>						<p>Approval</p> <p>Upload Image</p>
<p><b>CHILD(REN) TO BE PLACED INTERVIEW(S)</b></p> <p>Discuss and assess the children's understanding or feeling about being placed in the home. Document any concerns or needs that they would want the potential caregiver(s) to know about them.</p> <p>Both Jessa and Jacob were advised of the placement. They both have known Amanda most of their life and report no concerns for being with her. Jessa was upset with the thought of having to move schools and missing her friends. Jacob was upset at first however when he learned he was able to bring all of his transformers with him, he calmed down and was willing to go with Amanda.</p>						<p>Text:</p> <p>Unified Home Study</p> <p>Prior Maltreatments or Findings/Referrals</p>
<p><b>REFERENCES AND REVIEWS</b></p> <p>Please document the references received from relatives, non-relatives, professionals and services providers regarding the family's ability to meet the needs of a child(ren) placed in the home.</p> <p>Rebecca Rivera (Amanda's mother) advised that she is willing to help daughter as needed. She has known Jessa and Jacob for a long time and care for them as if they were her grandchildren. Rebecca believes Amanda will make a great caregiver. She will have some adjustments to make as she has never cared for children full time but believes Amanda will have no issues caring for the children.</p>						

***Narrative Family Assessment – Child History and Physical Environment:***

**Florida Safe Families Network** Hand Book Print Audit Spell Check Help

General Information  
 Provider ID: 900000202 Worker Name: YILLPH, LISA I (20FSIQ FAMILY SAFETY QA) Purpose of Home Study: Non-Relative Placement Pending

Demographics	Prior Intakes and Investigations/Referrals	Background Check Information	Financial Security Resources and Child Care Arrangement	Narrative Family Assessment	Outcome/ Attachments to the Unified Home Study	Actions:
<p><b>REFERENCES AND REVIEWS</b></p> <p>Please document the references received from relatives, non-relatives, professionals and services providers regarding the family's ability to meet the needs of a child(ren) placed in the home.</p> <p>Rebecca Rivera (Amanda's mother) advised that she is willing to help daughter as needed. She has known Jessa and Jacob for a long time and care for them as if they were her grandchildren. Rebecca believes Amanda will make a great caregiver. She will have some adjustments to make as she has never cared for children full time but believes Amanda will have no issues caring for the children.</p>						<p>Approval</p> <p>Upload Image</p>
<p><b>CHILD HISTORY</b></p> <p>Describe each child living in the home separately, including developmental history/issues, personality, health, education level, special needs and behavioral challenges. In addition, describe/discuss the adjustment and integration of children previously adopted by or placed with the family. Discuss with all family members any failed placements in terms of the cause, resolution, and any differences or changes that will be made as a result of lessons learned.</p> <p>Jessa is 7 years old, in the second grade at Ivey Hawn Elem. She is working at grade level in math, reading and English. Her teacher reports she is a bright child but there has been problems with behavior. However she is easily redirected. Jessa enjoys working on art projects and even won 2nd place last year at the school fair for a painting she completed.</p> <p>Jacob is 4 years old, in VPK at Busy Bee Daycare. He has shown improvement over the year with his shapes, colors and numbers. He</p>						<p>Text:</p> <p>Unified Home Study</p> <p>Prior Maltreatments or Findings/Referrals</p>
<p><b>PHYSICAL ENVIRONMENT</b></p> <p>Discuss the physical environment, including a description of the home and how the environment relates to the safety of the child(ren), including any pets and vehicles; address the interior, exterior, number of rooms, bathrooms, etc., sleeping arrangements, and accommodations for child(ren)'s personal belongings. Are there any changes needed in order to accommodate the child(ren)?</p> <p>Amanda resides in a two bedroom, 1 bathroom home with a fenced in backyard. When you enter the home through the front door, there is an open concept living space. The carpeted living room is to the left, which flows into the kitchen area with an eat-in dining space. There is a door to the backyard off of the kitchen area. There is a hallway to the left which leads to the bathroom on the immediate right, and the spare bedroom on the left which will be for the children. Amanda will be purchasing bunk beds for the children. The master bedroom is on the right. All parties have their own sleeping arrangements and each bedroom has a closet for their belongings.</p>						
<p><b>FAMILY SUPPORTS AND RESOURCES</b></p> <p>Describe if the applicant(s) have a well-developed support system comprised of extended family, friends and community organizations that affirms the applicant's decision to</p>						



## **Activity A: Part 1 – A Non-relative Placement for Jacob and Jenna**

### **Directions:**

1. Read the scenario. Note that the scenario is split into a Part A and Part B. The first part is for everyone, and the second part should only be read by the Interviewee/Caregiver.
  2. Select who will be the Case Manager/Interviewer and who will be the Caregiver/Interviewee.
  3. The interviewer must select up to five of the narrative assessment questions and using the four interview phases gather the needed information from the caregiver.
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### **Scenario Part A:**

A child abuse investigation was received on parents, Bill and Elizabeth, and their two children, four-year-old Jacob and seven-year-old Jenna. After commencing the investigation, the CPI determined that Jacob and Jenna were in present danger due to ongoing drug use by the parents. An In-Home Safety Plan was unable to control the danger threats and the children were removed and placed in foster care. At the time there were no relatives or non-relatives who were identified as a possible placement for the children. The CPI completed their assessment, determined that the children were unsafe, and the case was transferred to Case Management. After case transfer the parents shared with the Case Manager that they have been talking to one of their long-term friends, Amanda Rivera, about taking placement of the children. Amanda Rivera, age 32, is willing to take both children and has known and had regular contact with the children since they were born. Bill and Elizabeth believe Amanda will provide the children with a loving home.

The following information has been gathered about Jessa and Jacob:

- Jenna is seven years old in the second grade at Ivey Hawn Elementary. She is working at grade level in math, reading, and English. Her teacher reports she is a bright child, but there have been problems with behavior. However, she is easily redirected. Jenna enjoys working on art projects and even won 2<sup>nd</sup> place last year at the school fair for a painting she completed.
- Jacob is four years old and in VPK at Busy Bee Daycare. He has shown improvement over the year with his shapes, colors, and numbers. He is struggling with fine motor skills, such as holding a pencil correctly. He is very active and likes to spend time playing outside. He also loves playing video games, especially Minecraft.

- Both Jenna and Jacob have good things to say about Amanda and talked about times when she has taken care of them in the past. They were advised of the placement. Jenna was upset with the thought of having to move schools and missing her friends. However, when she learned that Amanda is willing to transport her to her school, she was willing to go with Amanda. Jacob was upset at first, however, when he learned he was able to bring all of his transformer toys with him, he calmed down and was willing to go with Amanda.

The following information has been gathered from Rebecca Rivera (Amanda's mother):

- She advised that she is willing to her help daughter as needed.
- She has known Jenna and Jacob for a long time and care for them as if they were her grandchildren.
- Rebecca believes Amanda will make a great caregiver. She will have some adjustments to make as she has never cared for children full time, but believes Amanda will have no issues caring for the children.

Background checks have been completed and Amanda Rivera has no criminal or child abuse histories.

### **Scenario Part B:**

Additional Information for the Interviewee/Caregiver: Only read if you are role-playing as the interviewee/caregiver. This only provides a basic level of information; additional information should be added as needed to answer the questions asked by the Interviewer.

- Amanda has known the family for six and a half years. She met the mother, Elizabeth, through work and they became friends.
- Amanda is currently single and has no children of her own. Her sister and mother live locally and she has a good relationship with them. She knows she will be able to depend on them if she is caught at work and unable to get the children on time as well as help with appointment, if needed.
- Amanda takes Lisinopril 25mg for hypertension and Metoprolol for gout. She has no diagnosed mental health issues.
- Amanda has worked full-time at Wal-Mart for two years and five months. She works four ten-hour days, Monday, Tuesday, Thursday, and Friday from 7am to 5pm. Her hours are stable and she does not have to switch shifts unless she requests it.
- Amanda reports having an excellent relationship with Elizabeth and Bill up until last year when their drug usage became more frequent. She is open to supervising visits between the children and Elizabeth and Bill, but is concerned that the parents will not listen to her if they are high. She wants Elizabeth and Bill to stop using



## Finalizing the Relative/Non-relative UHS

### Attachments

**Attachments provide verification of information gathered and evidence of information shared with the caregivers.**

**The attachments that are required depend on the type of Unified Home Study being completed.**

**The Outcome/ Attachments tab includes attachments that are in print form and external to the UHS and/or FSFN.**

<b>Attachments</b>	<b>Upload Requirements for Relative/Non-relative UHS</b>
Affidavit of firearm safety	Required: Signed Acknowledgement of Firearms/Safety Requirements
Consent to Release Information	Required: Use Agency Specific Release
Personal references	Optional to Upload Information
Referrals	Optional to Upload Information Provided to Caregiver
Receipts of Rights and responsibilities	Optional to Upload Information Provided to Caregiver
Receipt of Grievance Brochure	Optional to Upload Information Provided to Caregiver
Water Addendum	Optional to Upload Information Provided to Caregiver
Relative Caregiver Program Information	Optional to Upload Information to Caregiver
Adoption- Child Study	N/A
Adoption-Subsidy Acknowledgement form	N/A
Affidavit of Good Moral Character	N/A
Florida Adoption Assistance Program	N/A
Information Packet Sent-Adoptive Home	N/A
Information Packet Sent-Foster Home	N/A
Florida Adoption Reunion Registry	N/A
TANF information	N/A

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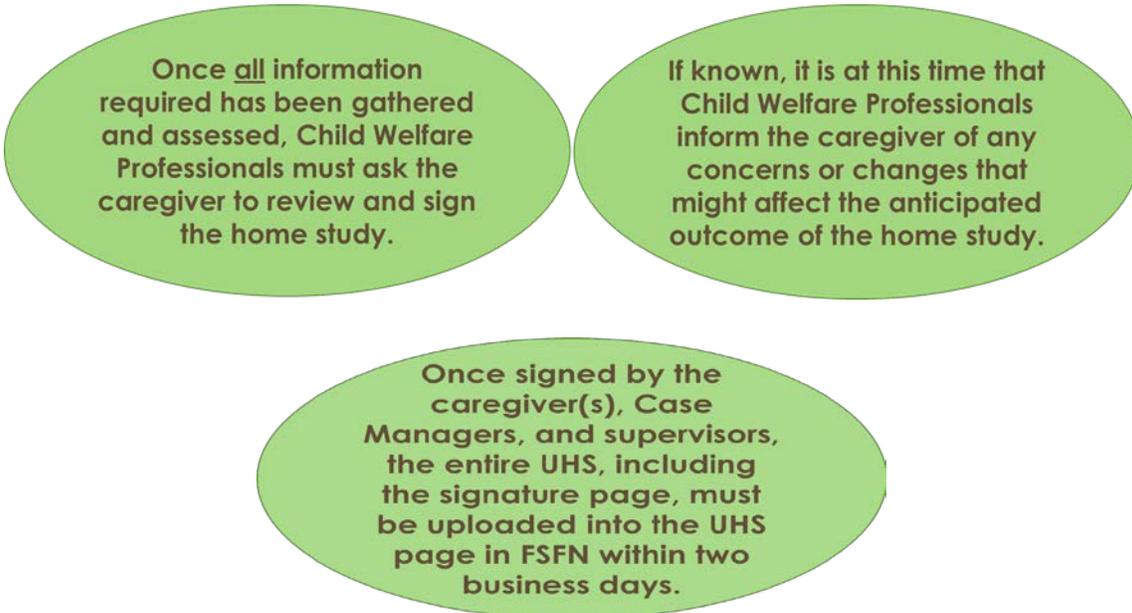


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## Signatures, Recommendations, and Approvals



### Signature

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## Recommendations

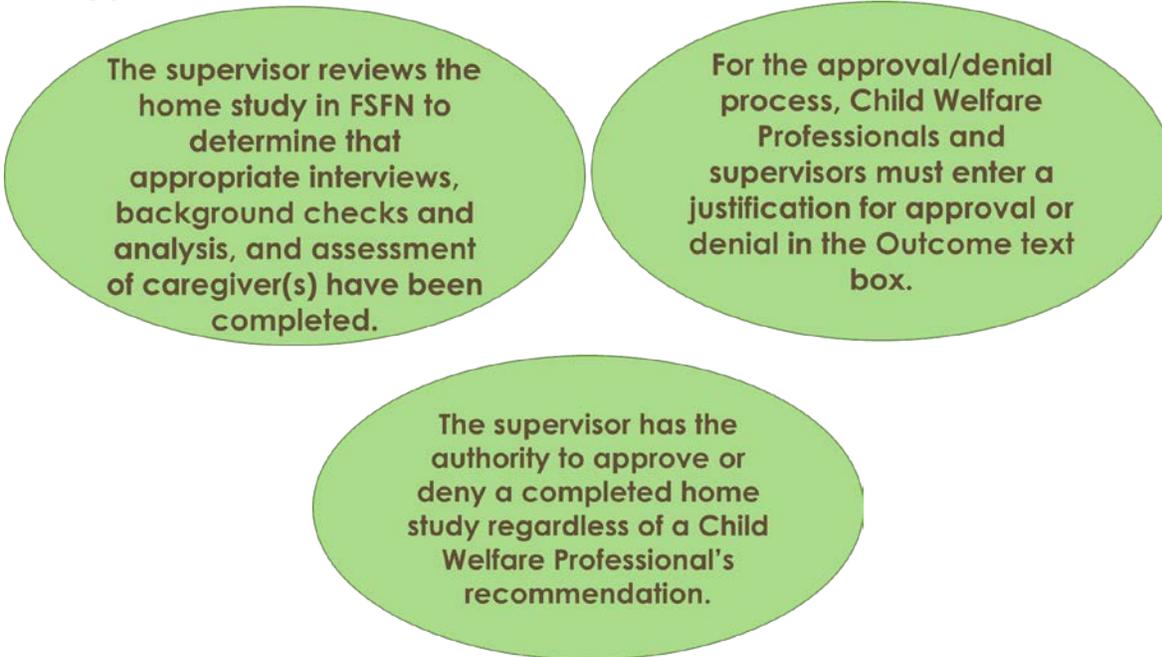
In the Recommendation group box on the FSFN UHS page, the Child Welfare Professional selects an appropriate recommendation from the Recommendation drop-down choices:

Application Withdrawn	Denied - Criminal Disqualifier	Duplicate - Created in Error
Approved - Meets Requirements	Denied - FSFN Disqualifier	
Approved - Review Comments	Denied - Review Comments	

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### Final Approvals



### Final Approvals

In the Outcome group box on the FSFN UHS page, the supervisor selects an appropriate conclusion from the Outcome drop-down choices:

- Application Withdrawn
- Denied - Criminal Disqualifier
- Duplicate - Created in Error
- Approved - Meets Requirements
- Denied - FSFN Disqualifier
- Denied - Court Approved
- Approved - Review Comments
- Denied - Review Comments

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The Child Welfare Professional Supervisor must approve their outcome by completing the approval routing process.

If the Child Welfare Professional's supervisor is not available, they can choose an alternate supervisor.

Child Welfare Professionals cannot approve their own home study.



FSFN Screens

Outcome/Attachments, Recommendations, and Approval:

**Florida Safe Families Network**

Hand Book | Print | Audit | Spell Check | Help

**General Information**  
Provider ID: 900000202 Worker Name: YILLPH, LISA I (20FSIQ FAMILY SAFETY QA) Purpose of Home Study: Non-Relative Placement Pending

**Demographics** | **Prior Intakes and Investigations/Referrals** | **Background Check Information** | **Financial Security Resources and Child Care Arrangement** | **Narrative Family Assessment** | **Outcome/ Attachments to the Unified Home Study** | **Actions:**

**Recommendation**  
Recommendation: Denied - Review Comments  
Amanda appears to be willing to care for the children long term and has a good relationship with the family. However there is only one extra room in the home and the children will have to share a bedroom. Due to the children being a different sexes, it is the recommendation of this CPI to deny the homestudy at this

**Outcome**  
Outcome:

**Attachments**

Attachment Name	Attached	Not Attached	Reason
Adoption - Child Study	<input type="radio"/>	<input type="radio"/>	
Adoption Subsidy Acknowledgement Form	<input type="radio"/>	<input type="radio"/>	
Affidavit of Firearm Safety	<input type="radio"/>	<input type="radio"/>	
Affidavit of Good Moral Character	<input type="radio"/>	<input type="radio"/>	
Consent to Release Information	<input type="radio"/>	<input type="radio"/>	
Florida Adoption Reunion Registry	<input type="radio"/>	<input type="radio"/>	
Florida Adoption Assistance Program	<input type="radio"/>	<input type="radio"/>	

**Text:**  
[Unified Home Study](#)  
[Prior Maltreatments or Findings/Referrals](#)

## Filing the UHS with Court

A copy of the signed home study, copies of criminal records that can be shared, and any additional attachments obtained are submitted to CLS to file with court.

Provided to CLS in conjunction with any request for placement with the relative/non-relative.

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## Copy Function

FSFN will now have the functionality to copy over selected fields from the MOST RECENT APPROVED home study in FSFN.

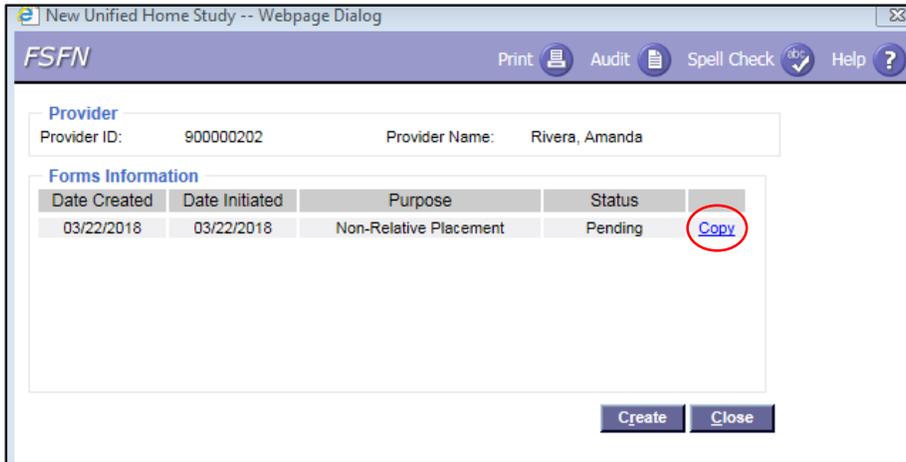
The information that will copy over includes:

- Purpose of home study
  - Narrative Family Assessment questions, except for non-required questions
  - Financial Breakdown, Additional Monthly Support or Income, and Household Information from the Financial Security Resources tab
  - Other states of residence
  - Background check narrative
- 
-



### FSFN Screens

#### Copy Function:



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### Addendum – Not Adoption

An addendum addresses all changes that have occurred in the home within the past year.

