



**HOPE & HOME**  
A LOVE TO NURTURE ORGANIZATION  
FOSTER CARE PROGRAM  
POLICIES AND PROCEDURES

**I. ADMISSION OF A CHILD INTO FOSTER CARE**

**A. Demographics and Age Range of Children Served:**

**HOPE & HOME** is a licensed vendor of foster care service for the Colorado Department of Human Services on a contractual basis. **HOPE & HOME** serves children of both sexes from the ages of infancy to 21 years who have need of a permanent home or assistance returning to their biological home.

**HOPE & HOME** families are selected for their ability to be nurturing, gentle and supportive. **HOPE & HOME's** model of care is inclusive and chooses families based on their willingness and desire to have children integrated into their own homes. As such, **HOPE & HOME** is best suited to children who have been placed into care as a result of being the victims of abuse and neglect and who can benefit from a nurturing environment where they feel included and supported.

The clinical director/placement supervisor, or the placement worker, working under the direct supervision of the placement supervisor, will evaluate referrals of the children to **HOPE & HOME's** foster care program. They will agree to the placement of a child if **HOPE & HOME** can provide an appropriate, licensed foster family and if it will be in the best interest of the child or children based on information provided from the placement team.

The admission of a child shall be in keeping with the purpose of general foster care and shall not be a substitute for other types of care, such as correctional services or higher levels of out-of-home care.

**HOPE & HOME** will primarily serve El Paso County but will accept children from out-of-county as well as out of state on a case by case basis. In the latter case, interstate compact approval is also necessary.

**Placement Process:** Admission of a foster child to a family foster care home shall be in keeping with the stated purpose of the family foster care home and shall be limited to those foster children for whom the foster parent(s) is qualified and by the needs of foster children already in residence to provide THE care necessary. Care must be provided in the least restrictive, most appropriate setting in order to meet the foster child's needs.

B. Each family foster care home or its certifying authority shall have a written admission policy which at a minimum must include:

1. The policies and procedures related to intake.
2. The age range and sex of foster children accepted/admitted for care.
3. The needs, problems, situations or patterns best addressed by the family foster care home.
4. Any pre-placement requirements for the foster child, the parent(s) or guardian, and/or the placing agency.
5. The anticipated problems or situations that would result in the family foster care home or certifying authority requesting removal of a foster child from placement prior to the planned discharge.

C. The written description of admission policies and criteria shall be provided to referring agencies.

D. Information regarding the prospective foster child shall be discussed with the foster parent(s) as early as possible prior to placement. The family foster care home shall accept a foster child into care only after a preliminary assessment/screening of presenting problems in areas such as social, physical health, mental health, psychological concerns, previous physical or sexual abuse, and concerns about previous delinquent, assaultive, or destructive behavior, if appropriate, has been conducted.

E. It is desirable for the foster child to visit and become familiar with the foster parents, the foster home and other persons living in the home prior to placement.

F. For each foster child referred for placement, the family foster care home shall be provided with a current comprehensive intake evaluation, including a social, health, and family history, developmental assessment or mental health evaluation, and a psychological evaluation, if determined to be necessary by the family foster care home or certifying authority. Educational records shall be provided if appropriate. As much of this information as possible shall be provided to the foster parent prior to admission, but the total evaluation shall be completed by the placing authority within one month after admission. If the family foster care home or certifying authority is unable to obtain this information within these time periods or is totally unable to obtain the information, the certifying authority must document its attempts to obtain the information and reasons for not obtaining the information.

G. At the time of placement, the foster parent(s) shall be provided with a record of admission as outlined in Section 7.708.51. C. The Medicaid card shall be given to the foster parent(s) for Medicaid eligible foster children as soon as possible after placement. If a foster child is placed at the family foster care home as an emergency placement, the family foster care home shall be provided with at least the following information: name, birth date, if available, and physical description of the foster child, date and time of the admission; name, address telephone number and authority of

person bringing the foster child to the family foster care home, and the reason for placement. Any other information that may be available should be recorded at the time of placement or as it becomes available. The date that placement terminates shall also be recorded.

H. For all placements of foster children, previous medical records should be obtained and pertinent information from those records, including immunization records shall be given to foster parents within four weeks of the initial placement. The medical history shall contain, to the maximum degree possible, the information listed in the Colorado Department of Human Services Health Passport.

I. Preparation of the foster child for admission shall be in a manner consistent with the foster child's age and ability to participate in the plan and to understand the reason for the placement.

J. Prior to placement of the foster child at the family foster care home, the, guardian(s), and/or placing agency must be notified of the religious practice, philosophy, and affiliation of the family foster care home.

K. The placement agreement shall be developed with the involvement of the foster child, the parent(s) or guardian(s) and the representative of the placing agency. Where the involvement of any of these is not feasible or desirable, the reasons for the exclusion shall be recorded by the certifying authority. The placement agreement shall include by reference or attachment at a minimum the following:

1. Discussion of the foster child's and the parent's or guardian's expectations regarding: family contact and involvement: how family contact and involvement are to occur; the nature and goals of care, including any specialized services or specialized treatment to be provided: the religious orientation and practices of the foster child and, or family; and the anticipated planned discharge date and plan for the foster child following discharge.
2. The policy and procedure to be followed regarding the use of restraint in an emergency situation pursuant to Section 7.708.36.
3. A delineation of the respective roles and responsibilities of all agencies and persons involved with the foster child and his/her family.
4. Written authorization for care and treatment of the foster child.
5. Written authorization to obtain routine medical and dental care for the foster child and to obtain emergency medical and dental care.
6. Legal status or custody of the foster child.
7. If a foster child is being placed by a Colorado county department of social/human services, the appropriate state form or contract shall be completed. This form or contract may provide some of the required authorizations.
8. Foster parents shall provide supervision and care appropriate to each child's age, level of development and ability to accept independence and responsibility.

B. Within 24 hours of arrival at the family foster care home, a foster child shall be given an orientation to the home, consistent with the foster child's age and ability to participate, which includes at least the following:

1. Tour of the home and instruction on fire alarm and fire evacuation procedures, escape routes and exits.
2. The rules/regulations of the home.
3. Procedures affecting the foster child's behavior, including limiting or restricting a foster child's rights where allowed, the type of discipline used in the family foster care home, and consequences for certain behaviors.
4. The complete foster children's rights and foster children's grievance procedures as developed by the family foster care home or by the certifying authority.

C. At any time when foster parents are unable for any reason (including, but not limited to, illness or temporary absence from the home) to provide supervision and care, they shall arrange for a qualified substitute who is familiar with these rules and with the foster children in care to provide temporary supervision and care to the foster children in the child(ren)'s identified family foster care home. If in care for up to 6 hours, it is preferable that the provider of substitute care be at least sixteen years old. Exceptions based on age and maturity can be made with concurrence of the foster parent and the certifying authority, but in no case should the provider of substitute care be less than 14 years of age. If care is provided for more than 6 hours including overnight and respite care, the substitute care provider must be at least 18 years of age, trained in first aid and CPR, and must have completed the following background checks:

1. Colorado Bureau of Investigation (CBI)
2. State Department's automated system

Waivers to these requirements may be requested by filing an appeal and receiving approval from the Colorado Department of Human Services' designated appeal panel. Waivers must be documented in the provider and foster child's record.

D. Respite care for a foster child(ren) in a certified foster home, other than the foster child(ren)'s identified foster home, that exceeds the license capacity of the foster home, shall occur for short term temporary relief of the 9 of 2612 CCR 2509-8 PROGRAM AREA 7 –

#### 1. FAMILY FOSTER CARE HOMES 7.708 – 7.708.69

Foster parent(s) for not more than seven (7) consecutive days per month not to exceed 28 days in a calendar year. During the time when respite care for a foster child(ren) is occurring, the respite home may not exceed six (6) foster children or a maximum of eight (8) total children with no more than two (2) children under two years of age. The respite home must be in compliance with all other applicable rules for family foster care homes.

E. Care shall include the requirements of the following sections, numbered F through I. F. Health Care

1. Suspected mental or emotional disorders which are observed by foster parents shall be reported to the certifying authority and the child's caseworker so that appropriate care may be obtained.
2. Where pets or other animals are present, additional precautions shall be taken as required to insure both safety and good hygiene. Dogs and cats shall be vaccinated as required by State law or as designated by a veterinarian. Foster children shall not be permitted to mistreat animals. Any animal that poses a threat to a foster child's safety or health must be confined in a place away from the foster child(ren).

G. Home Environment and Family Activity

1. It is the purpose of family foster care to provide constructive family living experiences for foster children during the period of placement.
2. Daily activities shall be designed to encourage normal physical, mental, social and emotional development of foster children. This requirement shall be met in the following manner:
  - a. Materials and equipment appropriate for the age of foster children in care shall be available for both active and quiet play.
  - b. An effort shall be made to provide for contact and friendship between children in foster care and other children of a comparable age. Opportunities shall be provided for both group and individual play.
  - c. Foster children shall be encouraged to relate or to communicate with each other and with adults.
  - d. Outdoor activity shall be available to each foster child each day, weather permitting.
3. Foster parents or a designated representative from the certifying authority with knowledge of the child shall attend Administrative Reviews for the foster children in their care and participate in the planning for such foster children. They shall receive a copy of the Family Services Plan for each foster child in their care.

H. Nighttime Care Requirements

1. Foster children shall be provided with a bed, cot or crib as required by Section 7.708.22, B, 8.
  2. Two sheets and suitable warm covering shall be provided to each foster child. Sheets shall be changed weekly or more frequently if needed, and no foster child shall be allowed to remain sleeping in a wet bed.
  3. Except for emergency placements, foster children over the age of 18 months shall not sleep in the same room as unrelated adults on a regular basis. Sleeping rooms for unrelated foster children shall not be shared by foster children of the opposite sex when one foster child is over 4 years old. Siblings of the opposite sex that are over the age of 4 years and share bedrooms shall do so only with the written approval of the certifying authority and the county designee. The written documentation must be maintained in the foster child's and provider's file. Teen parents and their children may share a room.
  4. Each foster child shall be provided with adequate sleep wear, and a complete set of clean sleep wear shall be available in the event that a change is necessary.
- I.
5. Sleeping rooms for foster children under 5 years of age shall be near the bedroom of the foster parents or other responsible person. Monitoring systems may be utilized to ensure safety. Foster children under 12 years of age shall not be permitted to sleep in a detached structure unless a responsible person sleeps in the same structure. Foster children who sleep in a detached structure must have written approval of the county department that placed the foster child, who will assess the foster child's abilities and needs.

Infant Care

1. Not more than two infants, whether birth, adoptive or foster children under the age of two years, shall be cared for in a family foster care home, except under unusual circumstances such as multiple births.
2. In addition to the applicable provisions of paragraphs A through G, above, infant care shall include the following:
  - a.
  - b. Infants shall be held during bottle feeding and at other times during the day. Infants shall not be confined but shall be allowed freedom of movement insofar as practical and shall be provided with an environment designed to stimulate their senses. Diapers shall be changed as required and used diapers cleaned or disposed of consistent with the practices of good hygiene. Toilet training shall not be attempted with any foster child less than 18 months of age and shall be done in a non-disciplinary manner.

**7.708.62 Foster Children's Grievance Procedure**

The certifying authority must establish a written grievance procedure that provides adequate due process safeguards, spells out the appeal process, and assures that foster children and parent(s) or guardian(s) are entitled to report any grievance and shall not be subject to any adverse action as a result of filing the grievance.

- A. The family foster care home and/or certifying authority for the family foster care home must follow grievance procedures without alteration, interference, or unreasonable delay.
- B. If a grievance is filed with the family foster care home, the grievance shall be recorded in the foster child's official case record along with the investigation findings and resulting action taken by the family foster care home or certifying authority. Information regarding the grievance must be sent to the individual or agency holding legal custody of the foster child.

**7.708.63 Comprehensive Program for Medical Care for the Foster Child**

The certifying authority shall ensure the availability of a comprehensive program of preventive, routine, and emergency medical and dental care for each foster child in care. Every reasonable effort shall be made to obtain routine and corrective dental care. The certifying authority shall have a written plan for providing such care. This plan shall include at a minimum:

- A. Ongoing appraisal of the general health of each foster child, including immunizations, in accordance with state law and regulations.
- B. Procedures for obtaining diagnostic services, emergency care, including the availability of emergency medical care on a 24-hour, seven-day-a-week basis, corrective care, recuperative care, and immunization updates.

B.

C. **Children's Rights**

**HOPE & HOME** agrees to abide by the Colorado State Department of Human Services' statement of Children's Rights for children in residence in foster care.

- D. The following rights will not be restricted or denied by **HOPE & HOME**:  
Every child shall have the right to:
1. Enjoy freedom of thought, conscience, cultural and ethnic practice, and religion.
  2. A reasonable degree of privacy
  3. Have his or her opinions heard and considered, to the greatest extent possible, when any decisions are being made affecting his/her life.
  4. Receive appropriate and reasonable adult guidance, support and supervision.
  5. Be free from physical abuse or neglect and inhumane treatment. Every foster child has the right to be protected from all forms of sexual exploitation.
  6. Receive adequate and appropriate medical care.
  7. Receive adequate and appropriate food, clothing, and housing.
  8. Live in clean, safe surroundings
  9. Participate in an educational program that will maximize his/her potential in accordance with existing law
  10. Communicate with "significant other" outside the family foster care home, such as a parent or guardian, caseworker, attorney or guardian ad litem, current therapist, physician, religious advisor, and, if appropriate, probation officer unless prohibited by the court.
- E. The following foster children's rights may be limited to reasonable periods during the day or restricted according to routine of the family foster care home to ensure the protection of the foster children and foster family. Every foster child has the right to:
1. Have access to letter-writing materials, including postage, and to have a foster parent(s) assist him/her if unable to write, prepare, and mail correspondence.
  2. Have access to telephones to both make and receive calls in private
  3. Have convenient opportunities to meet with visitors
  4. Wear his/her own clothes, keep and use his/her own personal possessions, and keep and be allowed to spend a reasonable sum of his/her own money
  5. Receive and send sealed correspondence
- F. Family foster care homes must develop a plan, in conjunction with the **HOPE & HOME**, regarding the following rights of foster children and these rights must be explained to the foster children upon admission. The notification must be communicated in a language or mode of communication the foster child can understand. There must be plans made for:
1. How and when telephone and written communications will take place
  2. How, when and where regular visits of the foster child with relatives, friends, or others interested in his/her welfare will take place
  3. Extenuating circumstances and emergency situations affecting the foster child and his/her family.
- G. If a child's rights are being restricted, the child has the right to be notified at the time of admission. The notification must be communicated in a language or mode of communication the child can understand and, if possible, be signed by the child and his/her parent guardian. **HOPE & HOME** will inform the child and family of conditions and reasons for the restriction or termination of his/her rights.
- H. When a child's rights are restricted, it will be noted in the child's case file with a report summarizing the conditions of and reasons for restriction, denial, or termination of the child's rights. The child and their attorney have the right, upon request, to be informed regarding why restrictions were applied.
- I. **Children's Grievance Procedure:**
1. **HOPE & HOME** agrees to respond to filed grievances in a timely manner and without altering or interfering with the grievance.
  2. If a child files a grievance, it shall be recorded in the child's record along with the investigation findings and resulting action taken by **HOPE & HOME** or the county. Information regarding the grievance must be sent to the individual or agency holding legal custody of the child. A copy of the child's grievance may be sent to the parent with the child's permission.
  3. A list of the child's rights and the grievance procedure must be provided and explained to the child and the parent or guardian in a language or manner of communication that they can understand.
  4. The child will be requested to state his grievance to both the foster and **HOPE & HOME**. The **HOPE & HOME** worker will advise the County of the child's grievance. The County may request a written memorandum from **HOPE & HOME** stating the child's grievance.
  5. A meeting will be called to involve the child, foster parents, **HOPE & HOME** caseworker. Mediation tactics will be used to resolve conflicts. If the child feels the grievance has not been adequately addressed, the **HOPE & HOME**

worker will carefully record or provide the child writing materials to record and mail a copy of the complaint directly to the County.

6. The County Caseworker and the **HOPE & HOME** Clinical Director will meet to discuss the problem. If the two parties are in agreement with the solution, they will give a written response to the child.
7. If the County Caseworker and the **HOPE & HOME** Clinical Director cannot agree on the solution, the County has the right to remove the child from foster care. The Executive Director of **HOPE & HOME** has the final authority within **HOPE & HOME**.
8. If the child's rights have been violated by the foster family, **HOPE & HOME** will work with the foster family to correct the situation. A written plan of correction will be shared with the County, the child, and the child's legal guardian. A follow up meeting will be held between all parties following the stated date of compliance plan of correction.

J. **Caseworker's Development and Provision of Family Services Plan:**

1. The family Services Plan shall include by reference of attachment at least the following: The FSP shall be developed with the involvement of the child, the parent(s) or guardian and the representative of placing agency. The certifying authority will record any reasons for non-involvement of any party. Discussion of the child's and the parent's or guardian's expectations regarding family contact and involvement, how family contact and involvement are to occur, the specialized treatment to be provided, the religious orientation and practices of the child and/or family, and the anticipated planned discharge date and plan for the child following discharge.
2. A delineation of the respective role of the County, **HOPE & HOME**, and the **HOPE & HOME** foster family.
3. Written authorization for care and treatment of child
4. Written authorization to obtain routine medical and dental care for the child and to obtain emergency medical and dental care
5. Legal status pr custody of the child
6. Completed DHS-CPA contract

K. Disruption Prevention and Run Policy

1. **HOPE & HOME** seeks to carefully evaluate the foster family and the child's response to the family and to agree to placements that appear to be a good match between foster family and foster child. Through regular and effective support from the staff at **HOPE & HOME** and other foster families, it is **HOPE & HOME's** belief that fewer foster families will quit, and fewer moves will occur due to disrupted placements.
2. If a child runs from a **HOPE & HOME** foster family all efforts will be directed to secure the safety of the child, including evaluating the circumstances leading to the possible disruption of placement for the child, obtaining treatment, and/or making adjustments necessary for re-stabilizing the child. In all cases, the run will be reported to the County and the local police department. When the child is found, an evaluation will be made as to whether a high level of care, such as brief acute hospitalization, is needed. All efforts will be directed at understanding the circumstances leading to the run and the potential for re-stabilizing the child within the existing foster home.
3. It will be the policy of **HOPE & HOME** to attempt to maintain permanence for the child. Consequently, the foster family will remain supportive of the child during this period of re-stabilization in the hospital if immediate reunification is not considered safe.
4. If a child is deemed to be in need of a longer term residential care, it will be the policy of **HOPE & HOME** for the existing foster family to continue to support the child when in residential care. **HOPE & HOME** will make no foster care charge for continuing to support a child in this manner and will not fill the slot for that child in the foster home until a long-term determination is made that he/she is not to return to that foster family.

L. Comprehensive Assessment and Treatment Plan

1. Within 30 days of the admission of a foster child into **HOPE & HOME** foster home, a Family Service Plan shall be developed by the country caseworker with input from **HOPE & HOME** staff and foster family.
2. The team shall assess and evaluate the needs and strengths of the child in at least the following areas where information is available:
  - i. Medical, health, and dental care, including a health history of the child and family, and if appropriate health information regarding speech therapy, occupational therapy, and physical therapy needs of the child.
  - ii. Psychological health
  - iii. Education
  - iv. Personal/social development
  - v. Family and community relationships
  - vi. Vocational training if appropriate
  - vii. Recreation
  - viii. Life skills development
  - ix. Legal history
  - x. Treatment/placement history

- xi. Alcohol/substance abuse history
- xii. Emancipation skills if appropriate
- 3. All direct assessments/evaluations of the child shall be conducted in the child's dominant language or mode of communication, including augmented or facilitated communication, if necessary, and shall take into consideration the child's age, disability, and cultural and religious background.
- 4. On the basis of this assessment, and within 30 calendar days, outcome bases, goal oriented, and individual plan.
  - i. The following participants are invited to be present during the evaluation/planning process:
    - 1. The foster parents
    - 2. The child, unless contraindicated
    - 3. The child's parents/guardian unless contraindicated
    - 4. **HOPE & HOME** representatives
    - 5. School personnel
    - 6. Guardian ad litem, attorney, religious advisor, and therapists (If not involved, the caseworker must document attempts to involve them.)
      - a. If involvement of the parent of guardian of the child is deemed contraindicated by the legal custodian (County), the reasons for contraindication shall be documented.
      - b. If any of the above persons do not participate, **HOPE & HOME** shall have a documentation of its efforts.
- 7. The individual plan shall include the following components:
  - a. The finds of the assessment
  - b. A statement of specific, measurable goals to be achieved or worked toward for the child and his/her foster family and birth family.
  - c. Strategy for fostering, maintaining, and enhancing positive family relationships for the child with his/her birth family, including siblings or other individuals considered like family or a guardian and the foster family, and for developing a permanent home for the child.
  - d. Strategy for fostering, maintaining, and enhancing active community involvement for the child.
  - e. Specification of the daily activities, including educational, vocational, and recreational activities, intended to achieve the stated goals.
    - i. Specification of therapeutic services, specialized services, and strategies for positive behavior intervention that will be provided directly or arranged for, frequency of services, and measure for ensuring their proper integration with the child's ongoing program activities.
    - ii. Long-term and short-term goals and the method to be used for evaluating the child's progress toward meeting the goals.
      - 1. Goals and preliminary plans for discharge and aftercare.
      - 2. Identification of all persons responsible for implementing or coordinating implementation of the plan.
      - 3. The completed plan shall be signed by a representative of the facility, a representative of the placing agency, the child, if indicated, and the child's parent of guardian.
      - 4. A facility shall ensure that the plan and any subsequent revisions are explained to the child and his/her parents or guardian in a language or manner of communication the child and parents or guardian can understand.
      - 5. The facility shall review each plan quarterly to evaluate the progress, which the short-term and long term-goals have achieved. The plan shall be revised as appropriate to the needs of the child.
  - f. If the assessment process or the plan requires the services of a specialist, such as a psychiatrist, psychologist, speech therapist, occupational therapist, or physical therapist, the special shall be currently certified or licensed according to state law.

M. Review of the Family Service Plan

- 1. **HOPE & HOME** will review the Family Service Plan a minimum of every 90 days. The FSP will be documented in the family foster file and the child's service file. The FSP may be revised as needed to respond to the individual needs of the foster child, birth family, and foster family.
- 2. **HOPE & HOME** will hold case staffings as needed or as requested by other parties involved with the case. Case staffing might include: therapists, doctors, teachers, GALS, CASA workers, CHS caseworker, foster family, birth family and the child when age appropriate.

### 3. Use of Restraints:

- i. No child shall be restrained by the foster family or by **HOPE & HOME**.
- ii. Use of safety restraints for infants or toddlers: Car seats are mandatory for the transportation of any child whose body weight is too light for restraint by seat belts. For infants or toddlers, appropriate use of a playpen, gates, or other space limitation are allowed as a normal safety precaution, but never to abandon or terrorize the child.

#### N. Child Protection

- i. **HOPE & HOME** family foster care homes shall refrain from engaging in all cruel and aversive treatment or therapy including, but not limited to, the following:
  - ii. Any intervention designed to or likely to cause a foster child physical pain.
  - iii. Releasing noxious, or toxic sprays, mists, or substances in proximity to the foster child's face
  - iv. Any intervention that denies a foster child sleep, food, water, shelter, access to bathroom facilities, adequate bedding, or appropriate physical comfort.
  - v. Any intervention or type of treatment that subjects a foster child to verbal abuse, ridicule, humiliation or that can be expected to cause emotional trauma
  - vi. Interventions that use device, material, or object that is designed to simultaneously immobilize all four of the foster child's extremities.
  - vii. Any treatment intervention that deprives a foster child of the use of his/her senses, including sight, hearing, touch, taste, smell.
  - viii. The use of mechanical restraints, including but not limited to, the use of handcuffs, shackles, straight jackets, Posey vests, ankle and wrist restraints, Craig beds, Vail beds, and chest restraints.
  - ix. Physical restraint and locked seclusion.
  - x. Use of rebirthing therapy or any therapy technique that may be considered similar to rebirthing therapy as therapeutic treatment.

## II. PROGRAM DESCRIPTION

### A. Background: "The Stewards of Gods Children"

**HOPE & HOME** is a non-profit, children's charity operating as one of the first Missional foster care agencies in Colorado. As a non-profit children's charity, **HOPE & HOME** recognized its role in supporting government services by responding to funding shortages by "Stepping Up, not Back," from the challenge, and making sure that children receive the services they need and deserve. As a true children's charity, **HOPE & HOME** recognized its role as a support service to state and local government and seeks to bring additional services to their charge to protect and provide for the communities most vulnerable children. **HOPE & HOME** engages the community, raising funds, services and awareness for the children in foster care.

As a Missional foster care agency, **HOPE & HOME** brings Christian missionaries into the mission field. In doing so, **HOPE & HOME** recruits a different type of foster parent than usually found in the world of foster care. **HOPE & HOME** uses an elaborative process of selection to bring on board only families who are motivated through love and community services – focused on giving instead of getting. As a result, **HOPE & HOME** does not produce long-term "professional" foster parents. This model creates both strengths and challenges. By viewing their participation as Missional, **HOPE & HOME** families wholeheartedly invest emotionally into the children who come into their homes.

The challenge inherent with this Missional model is that Hope & Home must recruit nearly 50% of its homes every year to meet the demands of the community and to support a policy of keeping placement ratios low. As a result, **HOPE & HOME** is always working with excited, fresh, energetic new families. This has been regarded as "a breath of fresh air" by many of **HOPE & HOME**'s customers, but comes with its challenges. **HOPE & HOME** must have extensive training and support systems to maintain these types of families. **HOPE & HOME** accomplished this goal through a commitment to four fundamental principles: Permanency, Inclusion, Community and Education.

### B. Program Description:

The basic principles of the program are:

1. Permanence
2. Inclusion
3. Education
4. Community

### C. Specialized Programs

1. Love to Nurture Institute
2. Advanced Center for ParenTime
3. Woodsum Daniels Store

4. Zoondoogle Factory Token Economy
5. Monthly Support Groups/Ongoing Education
6. Summer of Fun
7. iTrax

**D. Personnel**

**HOPE & HOME** shall have staff members in sufficient number to meet the needs of individuals served. Such staff members shall meet the following requirements:

1. The executive director shall possess knowledge of the type of child welfare services in which **HOPE & HOME** engages and shall be able to demonstrate administrative skill and leadership qualities.
  - i. The executive director must have graduated with a Bachelor's degree from an accredited college or university with a minimum of thirty semester credits or equivalent quarter credits in social or behavioral sciences, shall have at least five years' full time or equivalent part time work experience in an administrative capacity, at least two of which included staff supervision and budget or fiscal management; or must have graduated with a Master's degree or greater from an accredited college or university with a minimum of thirty semester credits or equivalent quarter credits in the social or behavioral sciences, and have two years full time or equivalent part time work experience in an administrative capacity, all of which must have included staff supervision and budget or fiscal management.
  - ii. Administrative capacity includes, but is not limited to, policy and procedure development and implementation, strategic planning, budget responsibility, fiscal management, quality assurance, networking, human resources management, program development and oversight, and business management.
  - iii. The responsibilities of the executive director are: human resources management, policy and procedures development and implementation, accountability for being in compliance with regulations, fiduciary requirements, quality assurance, regulatory compliance and accountability, overall professionalism of **HOPE & HOME**, and responsibility for the daily operation of **HOPE & HOME**.
  - iv. The executive director must have at least nine (9) semester hours or equivalent quarter hours in business finance classes; or 18 months previous work experience, including budget responsibility and fiscal management.
  - v. The State Department must receive at least three written statements from individuals unrelated to the applicant, which describes the executive director's character, reliability, knowledge of child welfare services and ability to perform the tasks of the executive director at Section 7.710.26, A of Volume 7 from State of Colorado.
  - vi. Placement supervisors shall have a master of social work degree or a master's degree in the social or behavioral sciences. If the placement supervisor has a Master of Social Work degree, the placement supervisor must have a minimum of two years (3640 hours) full-time or equivalent part-time experience in social work, some of which must have included child placement. If the placement supervisor is not qualified by a Master of Social Work degree, the individual must have a minimum of two years (3640 hours) full-time or equivalent part-time experience in child placement. The two years experience in child placement shall have been supervised by a person holding a Master of Social Work degree, a licensed professional counselor, a licensed marriage & family therapist, a licensed clinical social worker, or a licensed psychologist. **HOPE & HOME** shall obtain at least three written statements from individuals unrelated to the applicant, which describes the character, reliability, knowledge of child welfare services and the ability to perform the tasks of the placement supervisor as outlines in the duties for that position at Section 7.710.26, B of Volume 7 from the State of Colorado.
2. Additional placement workers shall be supervised by a qualified placement supervisor and hold a Bachelor degree in the social or behavioral sciences. If an individual has a Bachelor's degree in a non-related field, he/she shall have at least two years experience supervised by an individual with a Master of Social Work or other Master's degree in the social or behavioral sciences.
3. There shall be sufficient clerical staff to comply with record keeping, bookkeeping and reporting requirements as necessary.
4. Paraprofessionals or trainees may assist qualified placement workers, but may not assume primary responsibility. Qualifications of each position shall be defined in a written job description.
5. A statement of personal policy shall be made available o each employee or qualified applicant. This statement shall, as a minimum contain the following information: a job description which outlines the duties, responsibilities, qualifications and educational requirements for the position of the placement supervisor and/or placement worker.
6. A personnel file with official transcripts from the college or university shall be maintained for the executive director, the placement supervisor(s) and placement worker(s) and shall be available to authorized representatives of the Department of Human Services.



7. Each file shall include:
  - i. Employment application showing qualifications and experience.
  - ii. Statements obtained from previous employers and personal references
  - iii. Dates that statements were obtained from previous employers and personal references.
  - iv. Reports of job performance
  - v. Medical reports as requires in CPA employment practice
8. The **Executive Director** has the overall responsibility for the development, implementation, and coordination of the treatment program.
9. Under the direction of the Executive Director, **HOPE & HOME** personnel include:
  - i. **Business Office Manager:** The Business Office Manager oversees all financial responsibilities of the program.
  - ii. **Clinical Director:** The placement supervisor shall be responsible for the certification of foster care homes and the placement of children in foster care homes and/or the study of adoptive families, study of the child for adoption, and the placement of children in homes for adoption.
  - iii. **Placement Supervisor** shall be responsible for the coordination of medical services for the children placed in the care of any facility certified or sponsored by **HOPE & HOME**.
    1. This placement worker is responsible for the monitoring and protection of children, provides case management for individual children, coordinates service for child(ren) and their family and with Department of Human Services, providing monitoring and support to foster homes, may conduct home studies to assess the ability of foster homes to meet children's needs, all under the direct supervision of the placement supervisor.
    2. Paraprofessionals/trainees may complete home assessments of the physical environment for foster homes for compliance with regulations; act as a liaison with courts, schools, foster parents and all peripheral parties under the direct supervision of a placement supervisor or placement worker.
  - iv. **Home Supervisors:** Home Supervisors shall work as professional members of the organization in providing ongoing support and supervision for foster parents.
  - v. **Administrative Support:** There shall be sufficient clerical staff to comply with record keeping, bookkeeping and reporting requirements as necessary.
  - vi. **Volunteers/Interns:** Volunteers/interns will have group contact, individual contact, or no contact with children. Group contact would involve parties or special functions with foster children. Individual contact involves helping with visitation, crafts and other activities. Individual contact requires specialized training and appropriate background checks. No contact involves office help, storing donated items and planning and facilitating special functions.

### III. DISCIPLINE

- A. **HOPE & HOME** instructs foster families that any use of corporal punishment is prohibited. Foster children will be advised of this policy. **HOPE & HOME** families are trained in the "Love to Nurture" model and are expected to implement it with children in their care. Every family reads *Kids in Crisis*, and receives ongoing education and support to implement this emotionally safe and relationship-based approach to parenting.
- B. Discipline shall be constructive or educational in nature and may include talking with the child about this situation, praise for appropriate behavior, diversion, separation from the problem situation, and withholding privileges.
- C. Basic rights shall not be denied s a disciplinary measure.
- D. Separation when used as discipline must be brief and appropriate to the foster child's age and circumstances. The foster child shall always be within hearing of an adult in a safe, clean, well lighted, well ventilated, room in the family foster care home that contains at least 50 square feet of floor space. No foster child shall be isolated in a bathroom, closet, or pantry.
- E. Foster children in care at the family foster care home shall not discipline other foster care children.
- F. A family foster care home shall prohibit all cruel and usual discipline including, but not limited to, the following:
  - a. Any type of physical hitting or any type of physical punishment inflicted in any manner upon the body of the foster child, such as spanking, striking, swatting, punching, shaking, biting, hair-pulling, roughly handling a foster child, striking with an inanimate object, or humiliating or frightening method of discipline to control the actions of any foster child or group of foster children.
  - b. Discipline that is designed to, or likely to, cause physical pain.
  - c. Physical exercises such as running laps, push-ups, or carrying heavy rocks, bricks, or lumber when used solely as a means of punishment.
  - d. Assignment of physical, strenuous, or harsh work that could result in harm to the foster child.
  - e. Requiring or forcing a foster child to take an uncomfortable position such as squatting or bending, or requiring the foster child to stay in a position for an extended length of time such as standing with nose to the wall, holding hands over head, or sitting in a

cross legged position on the floor, or requiring or forcing a foster child to repeat physical movements when used solely as a means of punishment.

- f. Verbal abuse or derogatory remarks about the foster child, his/her family, his/her race, religion, or cultural background.
- g. Denial of any essential basic program service solely for disciplinary purposes.
- h. Deprivation of meals or snacks, although scheduled meals or snacks may be provided individually.
- i. Denial of visiting or communication privileges with family, clergy, attorney, or caseworker solely as a means of punishment.
- j. Releasing noxious, toxic, or otherwise unpleasant sprays, mists, or aerosol substances i+ n proximity to the foster child's face.
- l. Denial of sleep.
- m. Requiring the foster child to remain silent for a period of time inconsistent with the foster child's age, developmental level, or medical condition.
- n. Denial of shelter, clothing or bedding.
- o. Withholding of emotional response or stimulation.
- p. Discipline associated with toileting accidents or lapses in toilet training.
- q. Sending a foster child to bed as punishment. This does not prohibit a family foster care home from setting individual bed times for foster children.
- r. Force feeding a foster child.
- s. Isolating a foster child in a locked room for discipline.
- t. Use of physical or mechanical restraint as a discipline for a foster child, including, but not limited to, the use of handcuffs, shackles, straight jackets, Posey vests, ankle and wrist restraints, Craig beds, Vail beds, hospital cribs, and chest restraints.

#### IV. LEGAL REPORTING

- A. **HOPE & HOME** is required by law to report to the county Department of Human Services Child Protection Unit any injury, bruising, or death. If such a case occurs, the **HOPE & HOME** caseworker will write a report of the incident, provide the foster family a copy, and involve the county monitor. The child may be required to be examined by a physician at a local emergency room. The county Child Protection Unit would undertake an investigation.

#### V. RELIGION

- A. **HOPE & HOME** will accept children from any religious background or without any religious background.
- B. Children admitted into foster care will be given consideration for their religious background and preferences. **HOPE & HOME** shall assist a child to be involved in religious activities appropriate to the child's religious background based upon the needs and interests of the child and the wishes of the family of origin. The child's biological family has the right to declare the child's religious preference and to have **HOPE & HOME** provide and encourage the child to celebrate their religious holidays. **HOPE & HOME** will make necessary arrangements for attendance of children at a church or other religious institution or a study group for religious instruction.
- C. A foster child may be invited to participate in any religious activities of the foster family.
- D. **HOPE & HOME** will make no effort to persuade, proselytize, or evangelize a particular child to a belief system in conflict with the beliefs of the biological family while the biological family continues to have parental rights. No child will be forced to participate in any religious ceremony such as baptism. Children may be invited to attend ordinary worship services with their foster parents.

#### VI. EDUCATION

- A. Children shall attend educational programs that are the most appropriate and least restrictive for the child. Foster children shall not be home schooled.
- B. Children attending school shall be permitted to participate in school extracurricular activities to the extent of their interests and in accordance with each individual child's plan.
- C. **HOPE & HOME** shall assure that the educational program is an integral part of the FSP.
- D. Disabled children are entitled to participate in the local Child Find program. Child Find includes a process for screening, referring, assessing and staffing students suspected of having a learning delays or disabilities. The caseworker will be responsible for ordering testing for the child.

#### VII. COMMUNITY RELATIONS:

- A. The child's Family Services Plan will include the child's activities within the community. **HOPE & HOME** will embrace the racial, cultural, ethnic and/or religious backgrounds of children in care. **HOPE & HOME** will encourage children's participation in cultural and/or ethnic activities appropriate to his/her cultural and/or ethnic background.

- B. **HOPE & HOME** shall utilize available services, facilities, and activity programs of the community, and children shall be given opportunities to participate as individuals or as a group in agency-sponsored recreational and cultural programs such as provided by YMCA, YWCA, Scouting organizations, schools, and churches.

## VIII. CHILD FINANCES, GIFTS, AND CHORES

- A. **HOPE & HOME** families may establish a weekly allowance in exchange for routine household chores, completion of school assignments and positive behavior for child ages 5 and up. Money earned or received as a gift belongs solely to the child. Limitations may be placed on the amount of money the child may possess or spend at a single time when the limitation is designed to provide money management skills and/or ensure safety. Gifts received by a foster child remain the possession of that child, even if foster placement disruption occurs or at discharge.
- B. If a child willfully damages property or belongings of the foster family the foster family may deduct reasonable sums from a child's allowance as restitution. Restitution must be non-punitive in nature, negotiated within the child's capacity, and handled with compassion and common sense by the foster parent(s). A written record of damages in any restitution paid by a child must be maintained by the **HOPE & HOME** foster family.
- C. Moderate chores may be assigned as part of family life. Chores are to be consistent with the child's age and developmental stage and not a substitute for the parents' responsibilities. Completion of chores shall not conflict with other essential activities such as meal times, rest, night sleep, or school.

## IX. PERSONAL CARE OF THE CHILD

- A. Medical and Health Services
  - a. The foster children assigned by contract into the **HOPE & HOME** foster care program remain in the legal custody of the referring county Department of Human Services. As such, it is the county's legal responsibility to provide a comprehensive health and dental evaluation of the child upon intake into human services. The child must have a Medicaid card prior to being admitted into **HOPE & HOME** thereby allowing the **HOPE & HOME** foster family to obtain appropriate dental and medical care for the child. The county must provide an immunization record for the child. If not, **HOPE & HOME** will require foster families to have the children immunized in accordance with state law. **HOPE & HOME** will ensure the availability of a comprehensive program of preventive, routine, and emergency, medical, and dental care for each child in care. Every reasonable effort will be made to maintain routine and corrective dental care. BIRTH PARENT PERMISSION REQUIRED.
  - b. The foster family in coordination with the caseworker will be responsible for the child's medical care. The foster family will obtain a medical examination for each child admitted into their home within fourteen days of admission. The exam will include evaluation for physical injury and disease, vision and hearing screening, and the current assessment of the child's current health and immunizations. The foster family will follow all recommendations of the healthcare provider including referrals to a specialist. Children being admitted into **HOPE & HOME's** care will have adequate dental examinations. If a child has not had a dental exam within the last four months the foster family will schedule an appointment within eight weeks following placement. **HOPE & HOME** will ensure that the child receive a dental examination every six months.
  - c. The county must provide access to Medicaid and consent for the foster family to get comprehensive medical and dental care for the child. The foster family will report monthly in writing any appointments for the child, along with any noted health problems.
  - d. Medication: If a foster child is on medication at the time of admission to **HOPE & HOME**, the county caseworker must provide a written record of all medication the child is currently taking, along with a written procedure for the dispensing, storing and dosing as prescribed by the physician.
- B. Policies regarding medication include:
  - a. All prescriptive medications shall be administered only on the written prescription of a physician.
  - b. The **HOPE & HOME** foster family shall obtain written authorization from the prescribing physician to administer any non-prescription medication.
  - c. In an emergency, non-prescription medication may be administered on the verbal authorization of the physician. Written confirmation must be obtained for the verbal authorization.
  - d. All medication must be kept in a clean LOCKED storage area inaccessible to children and stored according to pharmacy instructions. Children must not have access to the keys if the locking mechanism for this storage is key operated.
  - e. **HOPE & HOME** foster families shall have a written medication schedule for each child to whom medication is prescribed, a copy of which shall be available to the county and **HOPE & HOME**.

- f. The **HOPE & HOME** foster family shall maintain for each child a cumulative record of all medication--both prescription and non-prescription--dispensed to the child including:
  - i. Child's name
  - ii. Name and dosage of medication
  - iii. Time and date medication was given
  - iv. Name of the person administering the medication
- g. General medical exam within 14 days of admission
  - i. Foster families are required to call a physician and to schedule a general medical exam for the child within 14 days of admission. A statement from the examiner shall be retained in the child's file. The exam shall include:
    - ii. An exam for physical injury and disease
    - iii. Vision and hearing screening
    - iv. A current assessment of the child's health, including immunizations. If the child needs a referral to a specialist, the referral will be made and the consultation noted in the child's chart. Children who wear glasses, hearing aids, contacts, or other devices will be provided with the necessary equipment.
    - v. Dental exam within 8 weeks of admission (unless conducted within the prior 4 months)
- h. First aid:
  - i. Foster families are required to have the primary adult caretaker in the foster home certified in CPR and first aid and to have first aid supplies readily available.
- i. Emergency medical care procedure:
  - i. If a child is considered to be in need of emergency medical care by the foster parent or adult in charge of the child's supervision, emergency medical care will be sought as expeditiously as possible whether the child is in need of a trip to the Emergency Room, physician's office, or treatment by emergency medical personnel, as needed. The county having custody of the child will provide authorization for medical care at the time of admission to a **HOPE & HOME** foster home to cover this procedure. Any emergency medical care will be reported within 48 hours to the caseworker in charge of supervision of the particular child.
- j. Food and Nutrition
  - i. The foster family shall provide a variety of nutritious foods in amounts appropriate for the age, appetite, and activity of each child in care.
  - ii. At least three nourishing, wholesome, well-balanced meals a day shall be offered at regular intervals except when children receive their morning and/or noon meals at school. No more than fourteen hours shall elapse between the evening and the morning meals. Nourishing snacks shall be part of the daily food provided.
  - iii. No force feeding or punishment for refusal to eat will be inflicted on the child.
  - iv. Safe, wholesome food will be stored, prepared and served in a manner to provide for the nutritional needs of the child. If the child drinks milk, the milk must have been pasteurized. Home canned vegetables, fruits, and meats that are risky due to the possibility of botulism will not be used. (Questions may be directed to State Licensing at 866-6958), Fruits, vegetables and meats may be frozen
  - v. Special diets prescribed and prepared for a child must be noted in the file
  - vi. Foster families are encouraged to consult with the child's nutritionist (ordered by the child's pediatrician) to avoid foods high in sugar, chemicals, and preservatives.
  - vii. Children must not be given foods that are contrary to the religious beliefs of their family or are known to cause an allergic reaction or health hazard.
  - viii. Water from an approved source (Colo. Dept. of Public Health and Environment) shall be readily accessible to children.
- k. Hygiene and Daily Routine
  - i. Foster families will supervise the children's hygiene to assure good habits or personal care, hygiene, and grooming appropriate to their age, gender, race and culture. Children must be supplied with an individual toothbrush, towels and washcloths, toothpaste, comb, and shampoo.
  - ii. The daily routine for the child must be established by the foster family to include a schedule for waking, hygiene, dressing, meals, exercise, rest, and bedtimes.
  - iii. Children must be given adequate, clean, proper-fitting, attractive, and seasonal clothing as required for health, comfort, and physical well-being and as appropriate to age, gender, individual needs, culture, and ethnicity. The clothing will belong to the child. The foster family must launder, iron, mend and care for the child's clothing. The county will assure that foster families receive the legal clothing allowance for each child on a timely basis.

- I. **HOPE & HOME** shall ensure that discharge plans make provisions for clothing needs at time of discharge. The wardrobe for each child shall go with him/her at time of discharge.
  - i. Children may bring their own belongings with them into foster care. If use of these items is restricted for the health or safety of the child, it will be noted in the file and explained to the child.

## **X. FOSTER FAMILY CERTIFICATION:**

### **Application and Inspection for Certification of Foster Care Homes**

- A. Any application accepted HOPE & HOME from an individual(s) or couple who wishes to be certified to operate a foster care home shall be on the Department approved form and shall include:
  1. The names and addresses of child placement agencies and county departments of social services that had previously certified the applicant. Information as to whether the applicant has been licensed or certified for child care in the past or is licensed or certified for child care at the time of the application, what agency issued the certificate or license, and the type of child care the license or certificate authorizes.
  2. Information about an applicant or individual living in the proposed foster care home who has been convicted of a felony or charged or convicted of child abuse or an unlawful sexual offense.
  3. Information about whether the applicant is currently licensed by the State Department to provide day care.
  4. Include a statement on the application for certification as a foster care home that states: "Any applicant who knowingly or willfully makes a false statement of any material fact or thing in this application is guilty of perjury in the second (2nd) degree as defined in Section 18-8-503, C.R.S., and, upon conviction thereof, shall be punished accordingly."
- B. No application shall be accepted from an individual who is currently certified by another county or CPA to operate a foster care home until that individual has terminated the certification by the other county or CPA.
- C. No board member, director or staff member of HOPE & HOME shall contact or recruit foster homes currently certified by another county department or CPA.
- D. HOPE & HOME must take an application from an applicant(s) before it has authority to complete the family assessment, background checks, and training.
- E. An applicant may apply to become a dual care provider to operate a family child care home as well as a foster care home. The foster home will be certified by the CPA and the day care home will be licensed by the Colorado Department of Human Services. Both sets of standards shall be met. The CPA will monitor the foster care standards and the State Department will monitor the day care standards. The CPA shall counsel the family if it believes such a situation is not in the best interest of any foster child who may be placed in the home. The CPA must approve the home to be licensed for day care when the home is certified for foster care.
- F. A home that is licensed for day care may only be certified for foster care for one child or for a group of siblings.
- G. A CPA that has a foster/adoptive home that is certified for foster care and also licensed for day care must notify the Division of Child Care when any of the following situations occur in the foster/adoptive home:
  1. A complaint is received; or,
  2. A child abuse investigation occurs; or,
  3. A stage II investigation occurs; or,
  4. A foster/adoptive child is placed in the home; or,
  5. A foster/adoptive child(ren) is removed from the home because of abuse allegations; or,
  6. The foster home certificate is changed to probationary; or,
  7. The foster home certificate is revoked or closed.
- H. Submit the following reports to the Division of Child Care: A CPA that has a foster/adoptive home that is certified for foster care and also licensed for day care must:
  1. All complaint investigation reports; and,
  2. All child abuse investigation reports; and,
  3. All Stage II investigation reports.
- I. A CPA shall conduct a reference check of each applicant by contacting all of the previous certifying authorities listed on the application before issuing the certification for that foster care home. The CPA shall sign an affidavit that, after reviewing all previous certifying information, certification is appropriate.
- J. After the foster care application is received, each applicant listed on the application must complete a minimum of twenty-seven (27) hours of initial training consisting of at least twelve (12) hours of core training prior to the certificate being issued and completion of the remaining training within three (3) months after the placement of a child. The training shall be provided through the statewide core curriculum training, by the CPA, or by a county department. The core training shall include the following ten primary topic areas:
  1. General overview of foster care; and,
  2. Administrative and legal issues; and,
  3. Why children get placed in out-of-home care; and,
  4. Parenting and family dynamics; and,
  5. Key concepts of child growth and development; and,
  6. Importance of the team approach; and,

7. Individual differences such as ethnicity and culture; and,
  8. Discipline; and,
  9. Effects of fostering on the foster family; and,
  10. Working with the biological family. If the twenty-seven (27) hours of initial training is not completed prior to the certificate being issued, the remaining training must be completed as identified in each foster parent(s)' training development plan as required at This rule does not apply to foster homes certified for adoption placements; it only applies to initial applicants for family foster home certification on or after June 1, 2001, which is the effective date of implementing legislation.
- K. After the application to become a cradle care provider is received, each applicant listed on the application must complete a minimum of twenty (20) hours of initial training prior to the certificate being issued. The training shall include the following primary topic areas:
1. Attachment/bonding issues; and,
  2. Loss and grief issues, as applicable for all parties to the adoption; and,
  3. Adoption as a life long issue as it pertains to all parties to the adoption; and,
  4. Key concepts of child growth and development; and,
  5. Limit setting and safety; and,
  6. Caring for a child of a different cultural or racial background, if applicable; and,
  7. Understanding adoption laws and procedures, including termination of parental rights and the expedited relinquishment process pursuant to Section 19-5-103.5, C.R.S., if applicable; and,
  8. Possible current and/or future use of community resources, including help with parenting techniques; and,
  9. Infant care to include, but not be limited to, basic care and feeding of the infant and Shaken Baby Syndrome; and,
  10. Fetal alcohol/substance abuse syndrome, if applicable; and,
  11. General overview of the adoption process; and,
  12. Why children get placed for adoption; and,
  13. The importance of the team approach; and,
  14. Effects of fostering on the cradle care family; and,
  15. Potential communication with biological family and/or adoptive family.
  16. The cradle care provider must also hold a current infant/toddler CPR and first aid card and complete four (4) hours of on-going training a year on topics related to adoption.
- L. After the application is received and prior to the certificate being issued, a family assessment using the Structured Analysis Family Evaluation (SAFE) instrument(s) to determine the character and suitability of the applicant(s), appropriateness of the home, and child care practices must be completed.
1. An assessment of character and suitability must include at least a review of the State Department's automated system as to applicants and persons who reside in the home of the applicants with written consent of the individuals. Statements from references and physician must be obtained. A review of all existing child placement agency and county department case records including the automated system must be completed. An investigation of any concerns raised from the application and/or the aforementioned sources of information and a personal assessment of the applicant must be conducted.
  2. The agency will require any applicant or any person eighteen (18) years of age or older who resides with the applicant in the foster care home to submit a complete set of fingerprints taken by a qualified law enforcement agency. The fingerprints and appropriate processing fee must be submitted to the Colorado Bureau of Investigation (CBI) to obtain any record of arrest or conviction which is held by the CBI.
    - a. The agency must send an applicant card (FD 258) to the individual required to provide fingerprints. The fingerprints must be taken by a police or sheriff's department. The individual must send the card to the CBI with a certified check or money order for the amount of the current processing fee. The CBI report must be sent to the child placement agency certifying the foster home.
    - b. A certificate cannot be issued to a foster care home until the fingerprints and current processing fee are submitted to the CBI and a clearance or hit/match is received from the CBI. If a hit/match with a criminal history arrest is received, the formal court disposition must be received and reviewed before a decision is made to issue a certificate.
  3. A family assessment using the Structured Analysis Family Evaluation (SAFE) instrument(s), including Questionnaires One (1) and Two (2) and the psychosocial inventory, to determine the character and suitability of the applicant(s), appropriateness of the home, and child care practices must be completed by a staff member and reviewed by a supervisor both which have completed the two (2) day SAFE assessment training. Separate and joint interviews with the applicant(s), all adults residing in the home both related and non-related to the applicant, and all children residing in the home regarding at least significant events in family background, evaluation of applicants' knowledge and capacity to care for children, and ability to maintain long-term relationships and life changes including issues of grief and loss. Interviews with children must be age appropriate. The assessment shall include, but not be limited to, the following:
    - a. Social history/background (adults and children), including childhood family adaptability; childhood family cohesion; childhood history of deprivation and trauma; childhood history of victimization; history of child abuse or neglect; history of alcohol and drug use; history of crimes, allegations and violence; psychiatric history, occupational history, and marriage or domestic partner history.
    - b. Personal characteristics of the family, including communication, commitment and responsibility, problem solving, interpersonal relations, health and physical stamina to include information about nutritious meals and snacks, self-esteem, acceptance of differences, coping skills, impulse control, mood, anger management and resolution, judgment, and adaptability.

- c. Marital/domestic partner relationship, including conflict resolution, emotional support, attitude toward spouse or partner, communication between couple, balance of power, stability of the marriage or partnership and sexual compatibility.
  - d. Motivation for a child, including a discussion of the child to be placed, attitudes toward foster care/adoption by applicants, other adults residing in the home, children and others such as extended family and discussion of fertility, if relevant. Assess the physical, mental, and emotional capability of the applicant(s) to parent a child(ren) and the ability to reevaluate and readjust expectations.
  - e. Children with Special Needs and/or Disabilities The applicant's interest, preparation, and willingness to care for a child(ren) with disabilities such as emotional, mental and physical, and the ability to meet the special needs of the child(ren). The home study must include an assessment as to how the child(ren)'s special needs will impact the family and extended family.
  - f. Extended family relationships, including extended family adaptability, extended family cohesion, relationship with own extended family, and relationship with spouse's or partner's family.
  - g. Physical and social environment, including cleanliness, orderliness and maintenance, safety; furnishings; play area, equipment, and clothing; finances; support system; and, household pets.
  - h. General parenting Including child development, parenting style, disciplinary methods, child supervision, learning experiences, parental role, and child interactions.
  - i. Specialized parenting , including expectations, effects of abuse or neglect, effects of sexual abuse, effects of separation and loss, structure, therapeutic and educational resources, birth sibling relationships, child background information, and birth parent issues.
  - j. For adoption only, issues Including infertility, telling child about adoption, openness in adoption, and adoptive parent status.
4. Other Requirements
- a. Discuss the applicant's ability to work with the child welfare system, court, birth parents, and others in the child's life, including willingness to obtain help from professionals involved.
  - b. Documentation of any previous emotional problems, mental illnesses, substance abuse issues, or marital/relationship problems that may have an impact on the case of a child(ren). Include any factors which would impact the safety and well-being of any child(ren) in the home.
  - c. The application and medical records must be reviewed; and any issues that are identified be discussed with the applicants. No physical examination shall be required of any person who in good faith relies upon spiritual means or prayer in the free exercise of religion to prevent or cure a disease unless there is a reason to believe such person's physical condition is such that he/she would be unable to care for a child, or such person has a communicable illness.
  - d. The agency shall not perform a family home assessment on its own staff member, board member, or family member of a staff member or board member.
  - e. A current photograph of the family shall be requested and maintained in the file.
  - f. In kinship care, the ability to provide a permanent home through adoption, guardianship or permanent custody, including the ability to meet the individualized needs of the specified child(ren), assessment of the relationship with birth parents and extended family members as they impact capacity of the applicants to care for the child(ren), and The ability to set boundaries with birth parents to maintain safety for the child(ren) in care.
  - g. Assessment of the applicant's ability to foster or adopt a child of a different ethnic and cultural background, preserving continuity of the child's ethnic and cultural identity in a positive manner. Factors should include, but are not limited to, consideration of the child's family, community, neighborhood, faith or religious beliefs, school activities, friends, and child's and family's primary language. Documentation of the assessment of this requirement shall be in the case file.
5. The agency shall not deny to any person the opportunity to become a foster/adoptive parent on the basis of race, color or national origin of the person or of the child involved.
6. As part of the assessment, the agency must:
- a. Conduct a minimum of one joint interview with a couple, one individual interview with each adult member of the household and an age/developmentally appropriate interview with all children residing in the home. For single applicants, a minimum of two (2) interviews will be required.
  - b. Conduct at least one (1) interview in the applicant's home.
  - c. Spread out Interviews over a period of not less than seven (7) consecutive days.
  - d. Update the assessment annually in the form of an addendum. An addendum shall include at least one (1) home visit and a review of the current medical status. During each subsequent addendum, applicants shall be questioned regarding any child abuse investigations during the previous year.
7. Following the completion of the assessment, a narrative report must be completed that summarizes and evaluates the information obtained and lists the characteristics of child(ren) the home is approved for. Age, sex, race, legal risk, and special needs (such as medical, physical, behavioral, emotional) and any limitations or restrictions on placement of a child(ren).
8. If there are additions of new adults to the household, additions of new children to the household, and/or changes in the age, sex, and special characteristics of child(ren) which will be considered for placement with the foster family, a re-evaluation of the family must be completed and the family assessment revised.

9. An onsite home inspection is required to determine its compliance with the Rules Regulating Foster Care Homes and, if the applicant is applying to be dual certified, with the rules regulating Family Child Care Homes. Written documentation of the home inspection shall be in the foster care home file at the child placement agency. Approval of local zoning, health or fire departments must be documented in writing when the situation warrants.

M. An annual on-site, unannounced, home inspection must be made to the foster care home to determine compliance with the Rules Regulating Family Foster Care Homes and, if the foster care home is dual certified, with the rules regulating Family Child Care Homes. A written report of the supervisory visit must be given to the foster parent and a copy maintained at the child placement agency. A written notice of noncompliance with the regulations will be left with the foster parents or sent to the foster parents within fifteen (15) calendar days of the supervisory visit if there is noncompliance. Compliance must be achieved within the time frames indicated on the written compliance notice.

### **Issuance/Denial of Certificate**

A. After the completion of the family assessment/home study, one of the following certification actions must be taken:

1. A one (1) year time-limited certificate will be issued when it is determined that the applicant is competent, has completed the necessary training, and has met the Rules Regulating Family Foster Care Homes. The certificate issue date is the date that the assessment/study is completed and the foster home is in compliance with the Rules Regulating Family Foster Care Homes.
2. A provisional certificate may be issued, upon the written approval of the State Department for a kinship or child specific placement when requested by a county department of social/human services. The reasons for the issuance of a provisional certificate must be displayed on the certificate. The provisional certificate will be issued for up to 60 calendar days from the date it is determined that time will be needed to comply with the appropriate kinship or child specific regulations. Only one original provisional certificate may be issued to a foster care home at one location address.
3. The original application will be denied. The renewal application will not be acted upon. The applicant will not be certified as a foster home.

### **CHILD CARE PLACEMENT AGENCIES**

B. Upon issuance of the certificate, the child placement agency shall submit data entry information to the department on forms prescribed by the State Department.

C. The application will be withdrawn when the applicant no longer chooses to pursue certification.

D. An applicant shall be denied if the person(s) applying for the certificate has been determined to be insane or mentally incompetent by a court of competent jurisdiction and, should a court enter an order pursuant to Part 3 or Part 4 of Article 14 of Title 15, C.R.S., or Section 27-10-109(4) or 27-10-125, C.R.S., specifically finding that the mental incompetency or insanity is of such degree that the applicant is incapable of operating a family child care home, foster care home, child care center, or child placement agency, the record of such determination and entry of such order being conclusive evidence thereof.

E. The application must be denied if the person(s) applying for the certificate has been convicted of:

1. Child abuse
2. A crime of violence
3. Any felony offenses involving unlawful sexual behavior
4. Any felony, the underlying factual basis of which has been found by the court on the record to include an act of domestic violence.
5. Any felony involving physical assault, battery or a drug-related/alcohol-related offense within the five (5) years preceding the date of application for a license or certificate; or,
6. Any felony offense in any other state, the elements of which are substantially similar to the elements of any one of the offenses described in numbers 2 to 4 of this section; or,
7. For the purposes of these regulations, convicted means a conviction by a jury or by a court and shall also include a deferred judgment and sentence agreement, a deferred prosecution agreement, a deferred adjudication agreement, an adjudication, and a plea of guilty or nolo contendere.

F. The application may be denied for one (1) or more of the following reasons if the applicant(s), an affiliate of the applicant, or any person living with or employed by the applicant(s) has:

1. Been convicted in Colorado or in any other state of any felony, or has entered into a deferred judgment agreement or a deferred prosecution agreement in Colorado or in any other state to any felony other than those offenses or child abuse.
2. Been convicted of third (3rd) degree assault, any misdemeanor, the underlying factual basis of which has been found by the court on any record to include an act of domestic violence, any misdemeanor violation of a restraining order, any misdemeanor offense of child abuse, or any misdemeanor offense in any other state, the elements of which are substantially similar to the elements of any one of the offenses described in this paragraph; or,
3. Been determined to be insane or mentally incompetent by a court of competent jurisdiction and incapable of performing duties; or,
4. Used any controlled substance, or consumed any alcoholic beverage or been under the influence of a controlled substance or alcoholic beverage during the operating hours of the facility. This shall not apply to foster care homes, unless such use or consumption impairs the foster parent's ability to properly care for children; or,



5. Been convicted of unlawful use of a controlled substance, unlawful distribution, manufacturing, dispensing, sale, or possession of a controlled substance, or unlawful offenses relating to marijuana or marijuana concentrate or,
6. Consistently failed to maintain standards prescribed and published by the Colorado Department of Human Services; or,
7. Furnished or made any misleading or any false statement or report to the Colorado Department of Human Services; or,
8. Refused to submit to the Colorado Department of Human Services any reports or refused to make available to the State Department any records required by it in making investigation of the facility for licensing purposes; or,
9. Failed or refused to submit to an investigation or inspection by the Colorado Department of Human Services or to admit authorized representatives of the State Department at any reasonable time for the purpose of investigation or inspection; or,
10. Failed to provide, maintain, equip, and keep in safe and sanitary condition premises established or used for child care pursuant to standards prescribed by the Colorado Department of Public Health and Environment and the Colorado Department of Human Services or by ordinances of regulations applicable to the location of the foster car home; or,
11. Willfully or deliberately violated any of the provisions of the Child Care Licensing Act; or,
12. Failed to maintain financial resources adequate for the satisfactory care of children served in regard to upkeep of premises and provision for personal care, medical services, clothing, and other essentials in the proper care of children; or,
13. Been charged with the commission of an act of child abuse or an unlawful sexual offense, if:
  - a. Such individual has admitted committing the act or offense and the admission is documented or uncontroverted; or,
  - b. An Administrative Law Judge finds that such charge is supported by substantial evidence; or,
14. Admitted to an act of child abuse or if substantial evidence is found that the licensee, person employed by the licensee, or person who resides with the licensed in the foster home has committed an act of child abuse, or,
15. Been the subject of an adverse licensing action.

G. Denial of the original application must be carried out in accordance with the Colorado Revised Statutes,

**Renewal or Continuation Notice [Rev. eff. 5/1/10]** A renewal notice must be sent to the foster parents at least ninety (90) calendar days prior to the expiration of the certificate.

A. If the foster parents wish to continue to provide care, the renewal notice must be completed and returned to the child placement agency prior to the expiration of the certificate.

B. If the renewal notice is received by the child placement agency prior to the expiration of the certificate, the renewal notice is timely, and the certificate continues valid until action is taken by the child placement agency.

C. If the renewal notice is received after the expiration of the certificate, the renewal notice is untimely, and the certificate is no longer valid. The untimely renewal notice must be acted upon as an original application.

### **Recertification Action**

A. Within ninety (90) calendar days of the receipt of a timely renewal application for a certificate, the child placement agency must complete the following actions:

1. Evaluate the foster care homes' current and past compliance with the Rules Regulating Family Foster Care Homes.
2. Conduct an unannounced inspection of the foster care home in accordance with Section 7.710.33, G.
3. Review the following information, for the applicants) and all individuals residing in the home, to determine if continued certification is appropriate:
  - a. Any child abuse allegations or investigations in the previous year;
  - b. Any arrest or conviction records in the previous year;
  - c. Any information from the local county department concerning county involvement with the foster family, including information from caseworkers;
  - d. Current health status.
4. Complete the SAFE family assessment narrative update/renewal template with changes that have occurred with the foster family. Questionnaires One (1) and Two (2), and the psychosocial inventory, must be completed on the first renewal if a full SAFE assessment has not been completed on the foster family.

B. At the time of the renewal of the certificate, one of the following must be completed:

1. A provisional certificate for a kinship or child specific placement will be changed to a one year time- limited certificate as soon as the foster family has completed the items listed as reasons for the provisional certificate.
2. A new one (1) year time-limited certificate is issued. The certificate issue date will be the date that the foster care home is in compliance with the Rules Regulating Family Foster Care Homes, as found at Section 7.708.
3. The renewal application for the certificate is denied. The process for denial of a renewal application is the same as the process for denial of an original application.

C. Upon issuance of the one (1) year time-limited certificate, the child placement agency must submit date entry information to the department on forms prescribed by the department.

D. A foster care home certificate is no longer valid whenever one of the following situations exists:

1. A certified foster family moves to a new address.
2. A foster family decides to withdraw from the foster care home program and confirms same in writing.
3. A certificate has been revoked or denied.

## XI. FOSTER FAMILY AND STAFF ORIENTATION ON TRAINING

- A. Foster families will be oriented prior to accepting an application for foster care with **HOPE & HOME**.
- B. Orientation will include an overview of **HOPE & HOME**, the goals of **HOPE & HOME** and program, and the legal requirements for a family to become certified for foster care. A review of the typed of children, their ages, and specific circumstances will be shared to help the families evaluate their own ability to foster parent.
- C. **Certification, and training of foster parents**
  - 1. **HOPE & HOME's** mission is to choose the best possible foster families while observing all State of Colorado regulations and Multi-Ethnic Placement Act guidelines. It is **HOPE & HOME's** goal to provide excellent pre-certification training and on-going training that exceeds the state's requirements.
  - 2. **HOPE & HOME** conducts a two hour Orientation class with each foster parent. This class covers; the foster care and foster/adopt certificate processed, background checks, **HOPE & HOME's** mission and values, the application fee, reimbursement rates for foster care, and subsidies for adoption. In addition, specific responsibilities of a foster parent, birth parent visitation, emergency and safety procedures, and medical coverage for children are addressed during orientation. Prospective families will be asked to write a letter of intent and to complete an application to formally apply to the program. The director of outreach will then conduct an Admissions interview with every family and review the application and letter of intent. If necessary, the director of outreach will meet with **HOPE & HOME's** management team to review the family prior to acceptance.
  - 3. Upon acceptance, the family will meet again with the director of outreach for a Consultation. During the consultation the family will sign up for 27 hours of pre-certification training, fill out the majority of the paperwork, and be given 3 reference forms, and outline for their autobiography, and a schedule for CPR/First Aid. They will also be given a checklist with all the certification requirements including miscellaneous requirements, such as pet vaccination records, a copy of their marriage license, a copy of their federal income tax, a floor plan, and etc. (Please see attached). A copy of their driver's licenses and car insurance is also made at this time.
  - 4. If **HOPE & HOME** does not accept a family, it is our policy to notify the family in writing within 5 business days. Notification will state the reason for denial and a toll free telephone number to contact the State of Colorado if their wish to file a complaint. **HOPE & HOME** observes all Federal Equal Employment Opportunity laws including, but not limited to, the Civil Rights Act, the Age Discrimination in Employment Act, and the Americans with Disabilities Act. In addition, the Multi-Ethnic Placement Act provisions are strictly adhered to.
  - 5. It is **HOPE & HOME's** policy that all 27 hours of pre-certification training be completed prior to the placement of a child. In an emergency situation, **HOPE & HOME** may place a child in a home prior to the completion of their pre-certification training, at the discretion of the executive director, provided the family has:
    - 6. At least 12 hours of pre-certification training,
    - 7. A commitment to complete the additional training in no less than 90 days,
    - 8. Completed background checks showing no criminal activity,
    - 9. A facility check,
    - 10. A completed home study,
    - 11. All other requirements needed for certification, and
    - 12. A completed Issue Certificate Form that has been sent to the State.
  - 13. The 27 hours of pre-certification will include the following classes:
    - i. Orientation
    - ii. Nurturing traumatized children
    - iii. The impact of abuse & neglect
    - iv. Volume 7
    - v. The legal process
    - vi. Attachment and bonding
    - vii. Child development
    - viii. Diversity and culture
    - ix. Discipline with dignity
    - x. Grief and loss
    - xi. Adoption and transitions
    - xii. Love to Nurture
  - 14. These classes will focus on all the areas addressed in the State of Colorado regulations 7.708.65 C 1-7 in addition to other permanent information.
  - 15. A written Individual Learning Plan (ILP) will be developed for all certified foster parent with regard to their ongoing training. ILP will include a plan to complete at least 20 hours of on-going training per year specific to the foster family's individual needs. The ILP will document the training received and the number of hours received for each training (Please see attached ILP).

16. All **HOPE & HOME** foster families will be required to obtain 12 hours of approved foster care training prior to being assigned a child. Foster families are required to have CPR certification and First Aid certification. Copies of certifications will be made a part of the file.
17. **HOPE & HOME** will document that foster families receive appropriate training in the following areas:
  - i. Principles and practices of child care, including developmentally appropriate practices.
  - ii. Administrative procedures.
  - iii. Behavior management and discipline of foster children.
  - iv. Boundaries between foster families and foster child.
  - v. Positive re-structuring of conflict situations with the child.
  - vi. Annual foster family review.

#### **XI. HOPE & HOME TRAINING FOR AGENCY STAFF**

- A. Staff training for all staff having clinical responsibilities for cases assigned will include orientation to **HOPE & HOME**, review of emergency phone numbers for the executive director and clinical director, and responsibilities for the job.
- B. In service training will be documented and a copy kept in the personal file. Subject, hours of training and activities will be listed.
- C. Staff will have a minimum of 12 hours of documented training per year.
- D. Prior to being hired, staff will be fingerprinted and screened through the CBI and registry, and will complete and sign an application.
- E. Staff must have an annual physical by their health care provider certifying good health within 30 days of employment. Thereafter, annually. Tuberculin testing is required unless prior negative testing has been done.
- F. If a staff member, foster parent, or other person shows indication of a physical condition which could be hazardous to a child, other staff, or self, or which would prevent performance of duties, that person shall not be assigned or returned to their position until the condition is cleared to the satisfaction of the medical examiner

#### **XII. HOPE & HOME FACILITY**

- A. **HOPE & HOME's** home office is located at 4945 N. 30<sup>th</sup> Street, Third Floor, Colorado Springs, CO 80919
- B. The facility is located in accordance with local zoning department requirements.
- C. The **HOPE & HOME** office and the **HOPE & HOME** foster family homes are subject to licensing inspections by the Colorado State Department of Human Services.
- D. The **HOPE & HOME** office shall be maintained in a clean and safe condition free from hazards to health and safety.
- E. **HOPE & HOME** homes are subject to the licensing rules regarding space, safety laws, fire safety, regulation of fire arms, and removal of trash, vaccination of pets, and general cleanliness and readiness to care for a child.

#### **XIII. TERMINATION OF PLACEMENT OF CHILD IN HOME & HOME FOSTER CARE**

- A. **HOPE & HOME** shall counsel individuals involved in preparation for termination of the placement.
- B. If the child should return home, supervision and follow up counseling/services are provided by **HOPE & HOME** or a referral agency. **HOPE & HOME** divides the foster child's family follow up contact and counsel should the family desire.
- C. A foster child is released only upon direction of the court if placement is court ordered and is released only to the child's parents, guardians or court of competent jurisdiction.
- D. Upon termination of the placement, **HOPE & HOME** will make available all pertinent health information and record to the Department of Human Services.
- E. **HOPE & HOME** maintains an individual case record for each child in placement and records are kept confidential.
- F. The Colorado State Department of Human Services is given access to the above records.
- G. Records are maintained for at least 3 years after termination of case.
- H. **HOPE & HOME** maintains a record for each family care home in accordance with licensing regulations. These records are available to state licensing for inspection. Records regarding closed foster families are kept for a minimum of 3 years.

#### **XIV. REQUIRED RECORDS**

- A. **HOPE & HOME** will maintain an individual case record for each child accepted for care. All records will be maintained as confidential and shall be protected from un-authorized examination.
- B. The Department of Human Services staff shall have access to such records upon request.
- C. Foster parents will receive necessary information regarding a prospective foster child as early as possibly prior to placement. The family will be given detailed instructions regarding the confidential nature of the information which they received.
- D. The record for each child shall contain at least the following information:

- i. A report of the original intake study.
  - ii. An agreement signed by the parent or legal guardian authorizing **HOPE & HOME** to place the child in foster care and consenting to necessary medical and surgical care. It is understood that a court order transferring legal custody to **HOPE & HOME** will fulfill this requirement.
  - iii. A copy of the record of admission form as required in minimum rules and regulations for family foster homes will be in the record if the child is actually placed in a **HOPE & HOME** foster home.
  - iv. Documentation of the legal custody and responsibilities for the child.
  - v. Reports of the child's progress under care, at least monthly.
  - vi. School reports including records of scholastic achievement and social adjustment.
  - vii. Individual medical records for each child, including reports of the admission examination and complete and continuous record of illnesses, immunizations, communicable diseases and follow up treatment and examination.
  - viii. Reports of psychological test, psychiatric examination, and follow-up treatment, if obtained.
  - ix. Record of visits to the child and the record of the contact with the child's own family and services to be provided for which arrangements have been made.
  - x. A copy of the treatment plan for the child.
- E. The record for each child placed by **HOPE & HOME** in foster care shall be maintained for at least 3 years after the foster care has been terminated.
  - F. **HOPE & HOME** shall maintain a separate record for each family foster care certified by **HOPE & HOME**. This record shall include the application, all relevant information obtained at the time of certification re-certification, together with summary reports of subsequent visits to the home and a list of the children placed in the home, including name, birth date, and date of placement, and reason for removal. This record shall be available to the staff of the department of human services for inspection.
  - G. Records relating to family foster homes whose certificates have expired shall be retained for at least 3 years after the expiration of the last issued certificate and for a longer period if they contain information which would be relevant to subsequent request for foster care home certification.

#### **XV. TRANSPORTATION**

- A. **HOPE & HOME** will ensure that each child is provided with the transportation necessary for implementing the child's treatment plan. The foster family or if the foster family is unavailable, the child's home supervisor will transport the child in cases of emergency. Foster families will have their proper driver's license and their automobiles will be properly insured. Any staff of **HOPE & HOME** will also be properly licensed and the automobile properly insured. Children under the age of 16 will be properly fastened into the vehicle. Foster families will not be allowed to transport more children in a vehicle than there are available seatbelts. Foster families and staff shall transport in vehicles that are enclosed and have door locks. If a child has difficulty with motion sickness or seizures this information will be communicated to the foster family.

#### **XVI. AMENDMENT OF POLICIES AND PROCEDURES**

- A. These foster care policies and procedures may be amended by a majority action of the **HOPE & HOME** board, provided that:
  - i. Such amendment is in compliance with established policy of state and county department of social services.
  - ii. Such amendment clearly improved services to children or clarifies intent and methodology for serving children under these policies and procedures.

Hope & Home reserves the right to revise this document as needed. Volume 7 has recently been revised, and Hope & Home is in the process of updating its policies & procedures to reflect the most recent version of Volume 7. Please default to Volume 7 regarding any policies and procedures that may currently vary from the most recent version. Please refer to the following link to access Volume 7:

<http://www.colorado.gov/cs/Satellite/CDHS-ChildYouthFam/CBON/1251583639322>

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