

Resource

Day 3 - Facilitator Guide



IHC Simulation (Traditional)

IHC Simulation (Provisional)

Monitoring, Support, and Other Responsibilities

Difficult Conversations

Day 3:

Resource Training Agenda

Wednesday	
9:00 – 9:30	Welcome
9:30 – 10:30	IHC Simulation (Traditional)
10:30 -10:45	Break
10:45 – 12:00	IHC Simulation (Provisional)
12:00 – 1:00	Lunch Break
1:00 – 2:15	Monitoring, Support, and Other Responsibilities
2:15 - 2:30	Break
2:30 – 3:15	Difficult Conversations
3:15 – 4:00	Wrap Up and Review Post Test

Before You Train

Facilitator Resources – Day 3

Materials and Handouts

- Name Tents
- Markers, Pens, Highlighters
- Sticky Notes
- Giant Sticky Note Pad
- Printed Participant Manuals
- Blank paper

DCFS Entry Level Competencies

- | | | |
|---------|---------|----------|
| • 101-1 | • 102-8 | • 105-2 |
| • 101-2 | • 103-2 | • 201-2 |
| • 101-4 | • 103-4 | • 201-5 |
| • 101-5 | • 104-1 | • 201-6 |
| • 101-7 | • 104-3 | • 201-7 |
| • 102-1 | • 104-4 | • 201-9 |
| • 102-2 | • 104-5 | • 201-10 |
| • 102-4 | • 104-6 | • 201-3 |
| • 102-6 | • 104-7 | • 201-4 |
| • 102-7 | • 105-1 | |

DCFS Forms and Publications

- DHS-1010: Application for Out-of-State Travel
- CFS-446: In-Home Consultation Contact Report
- CFS-450: Prospective Provisional Resource Parent Information and Questionnaire
- CFS-480 Alternate Compliance of Water Supply Agreement for Resource Homes
- CFS-509-B: Request For Alternative Compliance or Policy Waiver
- PUB-30: Resource Parent Handbook
- PUB-17 Arkansas Road to Fostering

DCFS Policy And Internal Procedures

- 9 CAR § 40-736. Travel procedures for children receiving out-of-home placement services
- Internal Procedure 805: Alternate Compliance or Policy Waiver Protocol

Day 3 Sources

- Minimum Licensing Standards

Resource Specialty Training



MidSOUTH
COLLEGE OF BUSINESS,
HEALTH, AND HUMAN SERVICES

Day 3

RESOURCE SPECIALTY TRAINING DAY 3



WELCOME

Time: 3 Minutes

Purpose: To welcome and re-engage participants.

Say:

Good morning, and welcome back to your final day of Resource Specialty Training. Over the past two days, we have focused on two types of resource families: traditional and kinship resource families. Remember, traditional resource families are those who raised their hands and said, “We want to help children,” while kinship resource families are those who “already love the child.” Throughout your work with kinship families, you were challenged to keep one important question at the center of your practice: “How can I safely help this child remain connected to family?”

As Resource Specialists, your work with resource families ultimately serves a larger purpose, supporting the safety, stability, well-being, and permanency of children who are living in out-of-home placements. While children are placed with resource families, your role is to help ensure those homes remain safe, supportive, and prepared to meet each child’s changing needs. This requires more than completing required processes. It means building relationships with families, assessing how the placement is functioning, identifying strengths and concerns, reinforcing expectations, connecting families with

support, and acting when a child's safety or well-being may be affected.

Target Outcomes



- Discuss quarterly visits and annual reevaluations
- Discuss corrective action plans
- Navigate difficult conversations with resource families
- Identify and apply requirements related to medications and out-of-state travel
- Discuss collaboration with the Adoption Specialty staff
- Apply resource family practice skills during simulations involving traditional and kinship resource homes

TARGET OUTCOMES

Time: 3 Minutes

Purpose: To strengthen Resource Specialists' ability to manage ongoing resource family responsibilities, address concerns, and collaborate across specialties.

Say:

Today, we will focus on the ongoing responsibilities of the Resource Specialist when working with both traditional and kinship resource families. Through discussion, skill-building activities, and simulations, you will explore key processes, practice navigating complex situations, and consider how policy, standards, professional judgment, and family support come together in everyday practice.

As we move through the day, continue to bring the focus back to the child: What does this child need from this resource home, and what is my role in helping the family provide it safely and consistently?

Paraphrase:

By the end of today's training, you will strengthen your knowledge and skills related to the ongoing responsibilities of a Resource Specialist. You will discuss how quarterly visits and annual reevaluations are used to assess continued compliance, recognize family strengths, and identify resource family needs.

You will explore the use of corrective action plans to address concerns and establish required changes, as well as practice navigating difficult conversations using clear, respectful, and professional communication.

You will also review requirements related to medications and out-of-state travel and discuss collaboration with Adoption Specialty staff to support coordination and transitions related to placement options.

But first, you will bring what you have learned thus far together through simulations involving both traditional and kinship resource homes, providing an opportunity to apply the skills and decision-making explored throughout the training.



NEW STAFF TRAINING SIMULATION ROLE-PLAY INSTRUCTIONS

RESOURCE SPECIALIST CLASSROOM SIMULATION



RESOURCE CLASSROOM SIMULATION

Resource Specialist Facilitator Coaching Guide



- **Facilitator - Before Scene**
 - Identify Lead/Team Communication
 - Participant Goals
 - Goal Accomplishment Strategies
- **Facilitator - After Scene**
 - Review Observation
- **Facilitator - Switch Out Participants**

FACILITATOR COACHING GUIDE

Time: 5 Minutes

Purpose: The purpose of this overview is to prepare participants for the simulation by clarifying roles, expectations, and procedures for active participation, observation, and feedback.

Say:

Before beginning the simulation, we will review how each scene will be structured from start to finish. This includes the facilitator's responsibilities before and after each scene, communication between the lead and the team, participants' goals and strategies, the use of observations to guide feedback, and the process for switching participants between scenes.

Paraphrase:

Before Scene – Facilitator Instructions:

1. Participant Selection and Preparation

- **Identify Participants:** Participants are chosen by the facilitator to conduct the simulation. When conducting the home assessment for the In-Home Consultation, participants will complete assessments of the home (e.g., one

participant observes the bedrooms, another observes the living room, etc.).

- Pre-Briefing: Have the selected participant step aside to review his/her strategy and specific goals before the simulation begins.

2. Participant Goals

- Identify the two primary goals of the participants.

3. Goal Accomplishment Strategies

How will you accomplish these goals:

- Using the Observation Form: Reference the specific skills and behaviors listed on your observation form during the coaching session. Focus coaching on:
 - Building trust and rapport with the family, clear communication, and the family's strengths.
 - Applying the Minimum Licensing Home Standards, CFS-446: In-Home Consultation Contact Report, and PUB-30: Resource Parent Handbook to evaluate a traditional resource home.

4. Audience Engagement (The "Observation Learning Lab")

Use this time to engage the remaining audience members with the following questions to improve their observation skills:

- Goal Setting: "Based on our review, what do you specifically want to know or see the Resource Specialist accomplish in this next section?"
- Skill Application: "How would you ask those questions? What specific skills (e.g., open-ended questions, appreciative inquiry) could you use to gain that information from the Mitchell family?"
- Field Connection: "Have you observed a traditional resource home being opened in the field? What went well in that instance, and what specific skills did you see the specialist use?"

5. Re-entry and Final Coordination

Once the participants return from their coaching session, the Lead Facilitator will confirm the following in front of the audience:

- Specific Objectives: "What do you want to accomplish in this scene? (Limit to a maximum of two goals to ensure focus)."

After Scene – Facilitator Instructions:

1. Documentation & Reflection

- Observation Forms: Remind the audience to complete their Observation Forms based on what they just witnessed.
- Quiet Time: Allow 1–2 minutes of silence for thoughtful completion.
- The "Phones Down" Rule: Instruct all audience members to submit their digital forms and put their phones/devices down to signal they are ready to re-engage in the discussion.

2. Debriefing with Participants

- Goal Review: Reiterate the two specific goals identified before the scene began.
 - *Self-Assessment*: Ask the participants, "Do you feel you accomplished your goals? Why or why not?"
 - *Facilitator's Feedback*: Provide your professional assessment of whether the goals were met.
- Kudos & Affirmation: Give specific "Kudos" that align with the behaviors observed (e.g., *"Excellent use of non-judgmental language during the safety planning"*).
- Key Takeaways: Provide a maximum of three key points to remember from this specific scene. (Ensure these align with the specific scene content, such as *Child Vulnerability*).
- Transition: Thank the participants for their courage and allow them to return to their seats.

3. Audience Discussion

- Observation Learning Lab: Open the floor to the audience by asking: *"What did you observe in terms of skills, policy application, and rapport building while you were in the home?"*
- Skill Identification: Encourage the audience to point out specific behaviors from the observation form that were executed well.

Switch Out Participants – Facilitator Instructions:

1. Transition & Preparation

- Switching Roles: Identify a new participant to take the lead for the upcoming scene.
- Coaching Break: Direct the new participant to step aside to prep their strategy.

2. Audience Engagement: "The Deep Dive"

While the new group is preparing, facilitate a discussion with the audience to process the case progression:

- Information Synthesis: "Now that we've completed the previous scene, what new information do we have about the family that we didn't have before?"
- Future Objectives: "Looking ahead to this next interaction, what do you specifically want to know or accomplish? What are the immediate safety, assessment priorities, or correctable licensing deficiencies?"
- Skill Identification: "How would you phrase those questions to the family? What specific Social Work skill (e.g., appreciative inquiry, miracle question, or circular questioning) could you use to gain that information effectively?"
- Field Application: "Have you observed this in the field?"
 - What went well in that interaction?
 - What specific skills did you see the specialist use that helped move the case forward?"

Say:

Now that we have reviewed how each simulation scene will be structured and facilitated, let's shift our focus to your role in ensuring the simulation's success. As participants, you will be expected to actively engage, observe, collaborate, and apply your skills throughout each scene.

Facilitator Note: Reminders

- Remember, the experience is about them getting up there and accomplishing their goal that is identified with the coach and is stated before each scene; and practice the skills listed on the observation form.
- Time has been identified for each scene in the documents that follow. Try to stick to these. Remember that this experience is about them getting on stage and the audience identifying the skills they see.
- As a facilitator, you can move a scene forward during and after it has ended. If, after the scene, critical information is not obtained, you should move the scene forward, simply stating 'I am going to set the scene' or 'To move the case forward, X has happened, or X information was obtained in this scene.
- Note that during a scene, we are guiding them towards their goals, not towards what is on the observation form.
- You set the tone with positive energy and clarity.
- If the audience is asking questions about "what if" scenarios, you must give them a clear answer. You may want to ask them to 'Tell me more about what you are thinking,' to get the full story.
- When a participant asks a question from the audience, direct the question back to the team, if possible. This encourages team discussion and interaction, helping team members discover their own answers together.
- Make sure to include the audience when engaging with those on stage.
- Avoid closed-ended questions.
- Try to use the SOP language and SDM® assessment skills we have learned in the practice model thus far to engage with participants in the audience and on stage. Solution-Focused Questions and Appreciative Inquiry Questions are provided in the participant manual as resources and examples for participants to draw on in their interviews.
- Do not immediately provide answers when participants do not promptly respond to your

questions. Instead, give space for participant reflection, then try rewording, rephrasing, or restating the questions. This will encourage space for critical thinking and processing.

- Use active listening to indicate you hear what participants are saying and to encourage continued participation.
- Tie all practice into the importance of quality documentation.
- A good way to encourage change or offer suggestions
 - Let's think about a couple of things...
 - I'm going to push back a little bit...
 - I want to put a pin in a couple of things...
 - I'd like to offer another perspective...

YOUR ROLE IN TODAY'S TRADITIONAL SIMULATION

- Introduce yourself
- Explain the licensing process
- Build rapport with the family
- Assess the home using the Arkansas Minimum Licensing Standards
- Determine whether the family appears appropriate to continue in the licensing process



YOUR ROLE IN TODAY'S TRADITIONAL SIMULATION

Time: 5 minutes

Purpose: prepare participants to actively apply their knowledge, communication skills, assessment abilities, and professional judgment as they progress through each stage of a realistic in-home consultation.

Say:

Today, you will apply licensing standards, practice professional communication, build rapport with a prospective family, identify strengths and safety concerns, and determine whether they would recommend the family to continue in the licensing process.

Unlike previous classroom activities, you will integrate policy knowledge, professional judgment, observation skills, and relationship-building techniques throughout the simulation.

During the simulations, your overall goal is to conduct an initial home visit for a traditional and kinship family. You will begin by introducing yourself to the family and explaining the licensing process. As the interaction continues, focus on building rapport while assessing the home using the Arkansas Minimum Licensing Standards. Use the

information gathered through your observations and conversations with the family to determine whether the family appears appropriate to continue in the licensing process.

Say:

With your overall goals and responsibilities in mind, it is time to put them into practice. As you enter the simulation, approach the family and home as you would in the field, using what you observe, hear, and learn to guide your interactions and decisions.

Facilitator Note:

- Stage the simulation house (6-8 deficiencies, if possible, that should include a combination of Immediate Safety Concerns)
- Place all simulation materials in the home
- Review the role-player scenes (scripts) with anyone who is playing the family
- Ensure all participant materials are available
- Verify that all staged licensing concerns can be safely used during the simulation

Avoid making the home appear intentionally unsafe or unrealistic. The goal is to encourage participants to observe, ask questions, and verify information rather than make assumptions. Participants should encounter a mixture of:

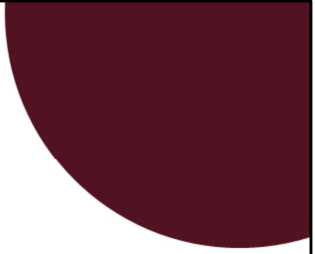
- Home strengths
- Minor licensing deficiencies
- Immediate safety concerns
- Items that require additional questioning but cannot be determined through observation alone

Examples of Immediate Safety Concerns:

- Medication on bathroom counter
- Unsecured firearm or ammunition in bedside table
- Unsafe sleeping arrangement
- Exposed electrical hazards

Examples of Correctable Licensing Deficiencies:

- Smoke detector missing batteries
- Missing outlet covers
- Cleaning supplies stored improperly
- Emergency evacuation plan not developed



New Staff Training
Simulation Role Play Instructions

**TRADITIONAL
IN-HOME CONSULTATION
SIMULATION**

TRADITIONAL IN-HOME CONSULTATION SIMULATION

Meet the Mitchells

Prospective Traditional Resource Home



MEET THE MITCHELLS: PROSPECTIVE TRADITIONAL RESOURCE HOME

Time: 5 minutes

Purpose: To set the stage by providing participants with background information about the family before the simulation begins and to signal that they are now entering a realistic scenario where they will interact with a family as they would during an actual DCFS home visit.

Facilitator Resource: Traditional Simulation Prep Checklist

Say:

Today we are going to spend time with the Mitchell family. Before we get into the simulation scene, we want to make sure everyone has a full picture of who this family is, how we got here, and what the Resource Specialist role will be today.

Let's start from the beginning. This simulation is intentionally designed to move beyond policy knowledge by allowing you to practice the interpersonal, observational, and decision-making skills required of a Resource Specialist. You should leave this session with more confidence in conducting home consultations while recognizing that your approach can directly impact both child safety and resource parent retention. Keep that in mind as you interact with this family and other families in your practice.

Paraphrase:

I am going to provide you with a little background information on the family before we begin.

- David (39) and Sarah (37) Mitchell have two children, Lisa (8) and Emma (11).
- For years, they have discussed fostering after Sarah's cousin became a resource parent.
- After attending a community event and learning more about foster care, they decided they were ready to begin the process.
- They hope to foster one or two school-aged children.
- They are open to boys or girls but would prefer not to accept teenagers because they believe older youth "probably wouldn't fit well with our family".
- They understand that foster care's primary goal is reunification but admit they are still learning what that really means.

Say:

Meeting the family is your first step in establishing a productive and respectful working relationship. These initial interactions give you an opportunity to build rapport, learn more about the family, and observe how family members communicate and respond to the licensing process. As the visit progresses, you will balance relationship-building with gathering relevant information, assessing the home environment, and addressing questions or concerns that may arise.

With introductions complete and the purpose of the visit established, you are ready to move into the next phase of the process. Next, you will review the in-home consultation, including its key components and your responsibilities throughout the visit.

Facilitator Note:

This slide is intentionally brief. Its job is to signal a shift in tone — participants should feel they are interacting with a real prospective traditional resource family, not a classroom exercise. Pause after you say this and let the room settle before advancing.

TRADITIONAL SIMULATION PREP CHECKLIST

- ☐ CFS-446
- ☐ PUB-30
- ☐ CFS-480
- ☐ PUB-17
- ☐ Clipboard
- ☐ Participant Instructions
- ☐ Role Play Cards
- ☐ Observation Guide



TRADITIONAL IN-HOME CONSULTATION SIMULATION

- CHRIS History Search
- Family Strengths
- Family Concerns

IN-HOME CONSULTATION TRADITIONAL SIMULATION

Time: 10 Minutes

Purpose: To provide the Resource Specialist with an opportunity to practice the skills needed to conduct an In-Home Consultation.

Say:

On Day One, you were introduced to the In-Home Consultation and its role in the resource home approval process.

Facilitator Question:

- Before moving forward, what do you remember from Day One about the In-Home Consultation and what you should be looking for or discussing during the visit?

Facilitator Answer: *(Responses may vary)*

- The consultation is completed before a traditional applicant moves forward to pre-service training.
- The CFS-446 is used to guide the consultation and assessment.
- You discuss the responsibilities and expectations of becoming a resource parent.
- You observe the home and assess whether applicable home and safety requirements

are met.

- You review sleeping arrangements and other household considerations.
- You consider exterior and environmental safety.
- You discuss emergency planning and preparedness.
- You review transportation expectations and considerations.
- You assess safe medication storage.
- You identify concerns, questions, or areas that require follow-up before the family moves forward.
- You use the information gathered to help determine whether the home meets requirements.

Paraphrase:

As a reminder, you complete this consultation before an applicant moves forward to pre-service training. During the visit, you gather information about the family, observe the home environment, and identify areas that may need clarification, additional discussion, or follow-up.

The CFS-446 helps guide you through this process by focusing your attention on resource parent expectations, household and sleeping arrangements, indoor and outdoor safety, emergency preparedness, transportation, medication storage, and other home requirements.

Say:

As you move into the simulation, you will have an opportunity to apply what you learned about the In-Home Consultation by practicing the skills needed to conduct the visit, engage the family, gather relevant information, assess the home environment, and make decisions based on what you observe and learn.

Paraphrase:

Interviews should:

- Be conducted in a way that allows the family to speak freely, establish rapport, and build relationships using a family-centered approach, and identify strengths and areas requiring corrective action.
- Distinguish between immediate safety concerns and correctable licensing deficiencies, clear explanation of the licensing standards that encourage prospective resource families.
- Demonstrating professional judgment when determining whether a family is ready to proceed to pre-service training and complete the recommendation portion of the CFS-446 based on observations made during the consultation.

CHRIS History Review

What History tells us! Conducting a quality CHRIS History search for the Mitchell family provides a record of any reports, investigations, or services provided to the family.

Family Strengths

These strengths should naturally be discovered by the participants; do not volunteer them unless the participants ask the appropriate questions.

- Stable Marriage
- Stable Employment
- Financially Secure
- Clean Home
- Appropriate Space Available
- Positive Parenting Approach
- Strong support from the church
- Flexible work schedule
- Nearby extended family
- Excited about fostering
- Willing to learn

Family Concern

They genuinely want to foster. However, several concerns should emerge. (The Family should NOT appear difficult)

- **Concern 1: (Visible)**
 - Prescription medication has been left on the bathroom counter.
 - Sarah forgot to put it away before the participants arrived.
 - She is embarrassed when it is mentioned.
- **Concern 2: (Visible)** The firearm safe is unlocked
 - The handgun is secured inside.
 - The ammunition is stored separately. *(David stated that the kids don't know the combination and genuinely believes this is sufficient. This becomes the major safety discussion.)*

Facilitator Note:

Pages one (1) and two (2) of the CFS-446 have been completed for the participants. They will need to interview the family to gather the remaining information on pages six (6) and seven (7), explain the resource parent responsibilities on those pages, and assess the home for the remainder of the form.

The following information has **not** been verified and should be explored during the consultation, as appropriate:

- Family motivation and expectations
- Household routines
- Support system
- Home safety
- Sleeping arrangements
- Transportation
- Firearms or weapons
- Medication storage

- Emergency preparedness
- Understanding of foster care and reunification
- Questions or concerns about the licensing process

YOUR GOALS IN THE TRADITIONAL SIMULATION



- Build Rapport
- Recognize family strengths
- Exercise professional judgment
- Explain why licensing standards exist
- Post-visit debrief

THE RESOURCE SPECIALIST GOALS IN TODAY'S SIMULATION

Time: 5 minutes

Purpose: To prepare participants for the simulation by introducing its unique structure and explaining how they will move through each of the three phases.

Participant Manual: CFS-446: In-Home Consultation Contact Report, CFS-480 Alternate Compliance of Water Supply Agreement for Resource Homes, PUB-30: Resource Parent Handbook (from Day 1)

Say:

Before we begin, you will be working in phases. The simulation is organized into three phases that reflect the progression of an In-Home Consultation from the initial interaction through the conclusion of the visit.

You will begin with Rapport Building, which focuses on engaging the family and establishing a foundation for the consultation.

You will then move into the Home Assessment, where you will gather information, observe the home environment, and address relevant requirements and concerns.

The simulation concludes with a Post-Visit Debrief, providing an opportunity to reflect on the information gathered, discuss observations, and consider the decisions and next steps that should follow the visit.

Facilitator Note:

- PHASE 1: RAPPORT BUILDING:

- The Resource Specialist introduces themselves professionally, explains their role, and describes the purpose of today's visit.
- They review what the family can expect throughout the visit, begin establishing rapport, and invite any questions the family may have.
- Through conversation, the Resource Specialist also begins learning about the family's motivation for becoming a resource family, family composition, parenting experience, support system, expectations, and any concerns they may have about the licensing process or caring for children in foster care.
- PHASE 2: HOME ASSESSMENT:
 - During the home assessment, the Resource Specialist uses the minimum licensing standards to evaluate the safety and suitability of the home environment.
 - They observe the storage of medications and firearms, assess the general condition of the home, identify family strengths, and respectfully discuss any safety concerns or licensing deficiencies with the family.
 - Throughout the visit, the Resource Specialist maintains a supportive, family-centered approach while determining whether the home meets licensing requirements and providing coaching on any areas that need improvement.
- PHASE 3: POST-VISIT DEBRIEF:
 - The Resource Specialist will end the consultation by summarizing the family's strengths, explaining the CFS-446: In-Home Consultation Contact Report, their recommendations, pre-service training process, discussing areas that require follow-up, and what the next steps are in the process.

Throughout the simulation, participants should demonstrate the behaviors expected during an actual In-Home Consultation. Resist the urge to coach participants during the exercise. Instead, document observations and reserve feedback for the debrief.

Say:

Each scene builds on the one before it, allowing you to practice how an In-Home Consultation develops from your first interaction with the family through your assessment and post-visit decision-making.

As you move through the simulation, consider how your communication, observations, and responses influence the information you are able to gather.

With the simulation structure established, you are ready to begin Scene One, where your first task is to engage the family and set the tone for the visit.

Key Points:

- The interview will be completed in three phases: Rapport Building, Home Assessment, and Post-Visit Debrief.

- Conclude by summarizing the families' review of the CFS-446, discussing recommendations



TRADITIONAL IN-HOME CONSULTATION SIMULATION

Scene 1 Interview: David & Sarah Mitchell

TRADITIONAL IN-HOME CONSULTATION SCENE 1 – INTERVIEW: DAVID & SARAH MITCHELL

Time: 10-15 minutes

Purpose: To provide participants with an opportunity to practice effective rapport-building strategies when engaging with families during an in-home consultation.

Characters: Resource Specialist (participant), Actors: David and Sarah Mitchell (parents)

Type of interview: In-person

Location: Family home

Participant Manual: CFS-446: In-Home Consultation Contact Report, CFS-480 Alternate Compliance of Water Supply Agreement for Resource Homes, PUB-30: Resource Parent Handbook, PUB-17 Arkansas Road to Fostering

Your Attitude:

You are warm, friendly, and genuinely excited to meet with the Resource Specialist. While you are a little nervous about the visit, your excitement outweighs your anxiety because you have been looking forward to learning more about becoming a resource family. You enjoy talking and naturally share information about your family, home, and experiences

without hesitation. You are curious about the process and ask thoughtful questions as they arise, wanting to understand what to expect and how you can be successful.

You are not trying to hide anything or avoid questions. Instead, you are open, honest, and eager to provide information that will help the Resource Specialist get to know your family. You appreciate guidance and reassurance and respond positively when participants explain the process or answer your questions. Your attitude reflects enthusiasm, cooperation, and a sincere desire to make visitors feel welcome while demonstrating your commitment to becoming a safe and supportive resource home.

What You Will Tell IF Asked:

- **IF the Resource Specialist asks whether there are any additional firearms in the home:** You will explain that David owns three additional hunting rifles. They are stored in a separate locked gun cabinet located in the garage. Do not volunteer this information on your own. Participants must specifically ask whether there are any additional firearms in the home.
- **IF asked whether you have prepared a space for a child:** You will explain that Sarah has already started preparing a bedroom for a child. The room is nearly complete, and you are excited to show it to them. If participants ask to see the room, gladly invite them to take a look.
- **IF asked about the PUB-30: Resource Parent Handbook:** You will tell them that your family has already read the PUB-30: Resource Parent Handbook. You understand the general expectations of becoming a resource family, but you may still have questions about the licensing process as you move forward.
- IF asked about the loose extension cord

Facilitator Note:

Role-play Reminders

- Your job is not to test participants or intentionally make the simulation difficult. Instead, portray a realistic family that is interested in becoming a foster family and is participating in an In-Home Consultation.
- Respond naturally to participants' questions. Do not volunteer information unless participants ask an appropriate question.
- Avoid leading participants towards licensing concerns; allow them to discover concerns through observation, conversation, and application of the licensing standards.
- If participants do not introduce themselves, do not help them, simply ask, "I'm sorry, what was your name again?" If they fail to explain the purpose of their visit, respond with, "What is the purpose of this visit?"
- During your interviews, remember to provide any information when techniques that are taught in PM are used correctly:
 - Open-ended questions

- Silence
- Empathy
- Genuineness

Begin simulation.



TRADITIONAL OBSERVATION FORM

Scene 1 Interview: David & Sarah Mitchell

OBSERVATION FORM SCENE 1 – INTERVIEW: DAVID & SARAH MITCHELL

Time: 5 minutes

Purpose: To assess participant skill application during the completion of the Traditional In-Home Consultation.

After the scene: Facilitator Instructions

- Ask audience participants to complete their Observation Forms.
- Allow 1–2 minutes of quiet reflection.
- Instruct participants to submit their digital forms.
- Ask everyone to put away their phones or devices before beginning the discussion.

Say:

Before we debrief, please take a minute to complete your Observation Form by scanning the QR code on the slide. Rate what you observed based on the skills listed. You will have about one to two minutes.

Once you've submitted your digital form, place your phone or device down so we know you're ready to begin our group discussion.

Once all forms are completed, begin the discussion,

Role-Play Participant Debrief:

• **Facilitator Questions:**

- What was the goal you identified?
- Do you feel you accomplished your goal?
- Why or why not?
- If no, what could you have done to meet the goal?

Facilitator Answer: *(Responses may vary)*

Say:

I appreciate your willingness to participate. Let's give our role-play participant a round of applause.

Audience Participant Debrief: Paraphrase

- Now let's learn from what we observed together.

Facilitator Questions:

- What specific behaviors or statements did you observe that helped build rapport with the family?
- Was there an opportunity where an open-ended question could have gathered more meaningful information? What might you have asked?
- What behaviors from the Observation Form were demonstrated effectively?

Facilitator Answer: *(Responses may vary)*

Paraphrase

Provide a brief professional assessment of the participant's performance, connecting feedback directly to the goals they identified.

Kudos

Recognize specific observable strengths.

Say:

Great job, everyone!

In this scene, you practiced skills essential to your role as a Resource Specialist: clearly introducing yourself and your role, explaining the purpose of the visit, building rapport, using open-ended questions, and adjusting your communication when engaging both parents and children. These skills help you create an environment where family members feel comfortable participating while allowing you to gather meaningful information and observe family interactions. As a Resource Specialist, the way you communicate is an important part of how you assess the family, identify strengths and concerns, and make

informed decisions throughout the in-home consultation.

We're going to transition to our next scene.

TRADITIONAL IN-HOME CONSULTATION SIMULATION

Scene 2 Interview: Lisa & Emma Mitchell



TRADITIONAL IN-HOME CONSULTATION SCENE 2 – INTERVIEW: LISA & EMMA MITCHELL

Time: 10-15 minutes

Purpose: To provide participants with an opportunity to practice effective rapport-building strategies when engaging with families during an in-home consultation.

Characters: Resource Specialist (participant), Actors: Emma and Lisa Mitchell (children)

Type of interview: In-person

Location: Family home

Your Attitude: (Lisa, 8)

You are quiet and eager to have a sibling.

What You Know and Will Volunteer:

- "I have my own room, and I like playing with my toys or reading when I'm at home. I don't talk a whole lot, but I like being with my family. Sometimes we watch movies together or eat dinner at the table. I am looking forward to having another sibling."
- "My favorite thing to do is go fishing with my dad. Sometimes we don't catch anything, but it's still fun. We have a Labrador that likes to come with us when we play outside."

He's really friendly, and I like throwing the ball for him."

What You will Tell IF Asked:

IF asked: "I like school, okay. I go to Baker Elementary. My favorite part is recess because I get to play outside. I also like when my class goes to PE. My teacher is nice, and I like reading when it's about animals or being outside."

IF asked: "I was bitten by our family dog."

SCENE 2 Cont.

Your Attitude: (Emma, 11)

You are talkative and outgoing.

What You Know and Will Volunteer:

- I like school a lot. I'm in 5th grade at Baker Elementary. My favorite subject is reading, but I also like science because we sometimes get to do fun projects. I have a lot of friends, and I like talking with everyone at school.
- My little sister, Lisa, is quieter than I am. We sometimes play together, but he likes fishing more than soccer. I usually have to do the talking when we're around new people.
- I play soccer, and it's my favorite thing to do after school. I like practicing, playing games, and being part of a team. Sometimes my family comes to watch me play, and that makes me really happy.

What You Will Tell IF Asked:

IF asked: I'll tell them I like living here. We eat dinner together a lot, and my parents help us with homework when we need it. I think we'd make a good foster family because my mom and dad are kind, and they really want to help kids.

IF asked: I'm excited that my mom and dad want to become foster parents. I've always wanted another brother or sister. I think it would be fun to have another kid around the house to play games with, watch movies, and help them feel welcome. I know it might be different at first, but I think our family could help someone who needs a safe place to stay.

IF asked: Lisa was bitten by the family dog.

Begin simulation.



OBSERVATION FORM

Scene 2 Interview: Lisa & Emma Mitchell

OBSERVATION FORM SCENE 2 – INTERVIEW: LISA & EMMA MITCHELL

Time: 5 minutes

Purpose: To assess participant skill application during the completion of the Traditional In-Home Consultation.

After the scene: Facilitator Instructions

- Ask audience participants to complete their Observation Forms.
- Allow 1–2 minutes of quiet reflection.
- Instruct participants to submit their digital forms.
- Ask everyone to put away their phones or devices before beginning the discussion.

Say:

Before we debrief, please take a minute to complete your Observation Form by scanning the QR code on the slide. Rate what you observed based on the skills listed. You will have about one to two minutes.

Once you've submitted your digital form, place your phone or device down so we know you're ready to begin our group discussion.

Once all forms are completed, begin the discussion,

Role-Play Participant Debrief:

• **Facilitator Questions:**

- What was the goal you identified?
- Do you feel you accomplished your goal?
- Why or why not?
- If no, what could you have done to meet the goal?

Facilitator Answer: *(Responses may vary)*

Say:

I appreciate your willingness to participate. Let's give our role-play participant a round of applause.

Audience Participant Debrief: Paraphrase

- Now let's learn from what we observed together.

Facilitator Questions:

- How did the Resource Specialist adjust their introduction and explanation of their role to make the conversation understandable and comfortable for the children?
- What did you observe the Resource Specialist say or do to build rapport and help the children feel comfortable participating in the conversation?
- How effectively did the Resource Specialist use open-ended and follow-up questions to encourage the children to share information in their own words without leading their responses?

Facilitator Answer: *(Responses may vary)*

Paraphrase

Provide a brief professional assessment of the participant's performance, connecting feedback directly to the goals they identified.

Kudos

Recognize specific observable strengths.

Say:

Great job, everyone!

Including children in the conversation recognizes that they are part of the family's experience and provides them with an opportunity to be heard. In your role as a Resource Specialist, you must consider each child's age, developmental level, and ability to

understand when deciding how to communicate with them.

Using clear, child-friendly language and allowing children time to express themselves can provide valuable insight into how they experience the home and family relationships.

Your responsibility is not simply to ask questions, but to create an interaction that respects the child's voice while gathering information that contributes to your overall understanding of the family and home environment.

We're going to transition to our next scene.



TRADITIONAL IN-HOME CONSULTATION SIMULATION

Scene 3 Interview: Walkthrough

TRADITIONAL IN-HOME CONSULTATION SCENE 3 – INTERVIEW: WALKTHROUGH

Time: 10-15 minutes

Purpose: To provide participants with an opportunity to complete a home walkthrough, assess the home environment for safety and compliance with licensing standards, identify potential concerns, and determine appropriate next steps based on their observations.

Characters: Resource Specialist (participant), Actors: David and Sarah Mitchell (parents)

Type of interview: In-person

Location: Family home

Participant Manual: CFS-446: In-Home Consultation Contact Report, CFS-480 Alternate Compliance of Water Supply Agreement for Resource Homes, PUB-30: Resource Parent Handbook

Your Attitude:

You are warm, friendly, and genuinely excited to meet with the Resource Specialist. While you are a little nervous about the visit, your excitement outweighs your anxiety because you have been looking forward to learning more about becoming a resource family. You enjoy talking and naturally share information about your family, home, and experiences

without hesitation. You are curious about the process and ask thoughtful questions as they arise, wanting to understand what to expect and how you can be successful.

You are not trying to hide anything or avoid questions. Instead, you are open, honest, and eager to provide information that will help the Resource Specialist get to know your family. You appreciate guidance and reassurance and respond positively when participants explain the process or answer your questions. Your attitude reflects enthusiasm, cooperation, and a sincere desire to make visitors feel welcome while demonstrating your commitment to becoming a safe and supportive resource home.

Sample Prompt:

We're really glad you're here today. We've been looking forward to this visit because we want to make sure, we're doing everything we can to prepare our home. We know there's probably still a lot for us to learn, so if you see something that needs to be changed or improved, please don't hesitate to tell us. We'd rather know now so we can fix it.

One thing we've talked about a lot is whether we're emotionally ready for this. If we're being honest, our biggest concern is getting attached to a child and then having to say goodbye. We know reunification is the goal whenever it's safe, and we support that, but we also know it's probably going to be hard. We're hoping training and experience will help us prepare for that.

Overall, we've had a lot of support from family and friends. Our church has been incredibly encouraging throughout this process. (Laughs.) Although Sarah's mom still thinks we're a little crazy for taking this on. Please feel free to ask us anything you'd like to know or let us know if there's anything you'd like to look at around the house. We know this is all part of the process, and we appreciate any guidance you can give us.

What You will NOT do:

Do not point out concerns.

Do not watch where they are looking.

Only answer the questions they ask.

What You Know and Will Volunteer:

What you will volunteer – You will answer questions but not tell everything.

What You Will Tell IF Asked:

- **IF the firearms are discovered during the walkthrough:** David will respond with, “The kids don’t know the combination, and they are stored in a separate locked gun cabinet located in the garage”. Do not volunteer this information on your own. Participants must specifically ask whether there are any additional firearms in the home.
- **IF asked whether you have prepared a space for a child:** You will explain that Sarah has already started preparing a bedroom for a child. The room is nearly complete, and you

are excited to show it to them. If participants ask to see the room, gladly invite them to take a look.

- **IF asked about the PUB-30: Resource Parent Handbook:** You will tell them that your family has already read the PUB-30: Resource Parent Handbook. You understand the general expectations of becoming a resource family but may still have questions about the licensing process as you move forward.

Role Play Cues (Only if participants ask or notice):

- **IF participants notice the prescription medication:** Sarah says, "Oh goodness... I completely forgot that was sitting there." (*She picks it up.*) "Thank you for letting me know."
- **IF participants ask whether there are firearms in the home:** David says, "Yes, we have one." (*He walks to the gun safe and opens it. The handgun is inside, but the safe has been left unlocked.*) If asked why it is unlocked, David says, "The kids don't know the combination." If participants explain the licensing requirement respectfully, David responds, "That makes sense. I hadn't really thought about it that way."
- **IF participants never ask about firearms:** Do not mention them.

Begin simulation.



OBSERVATION FORM

Scene 3 Interview: Walkthrough

OBSERVATION FORM SCENE 3 – INTERVIEW: WALKTHROUGH

Time: 5 minutes

Purpose: To assess participant skill application during the completion of the Traditional In-Home Consultation.

After the scene: Facilitator Instructions

- Ask audience participants to complete their Observation Forms.
- Allow 1–2 minutes of quiet reflection.
- Instruct participants to submit their digital forms.
- Ask everyone to put away their phones or devices before beginning the discussion.

Say:

Before we debrief, please take a minute to complete your Observation Form by scanning the QR code on the slide. Rate what you observed based on the skills listed. You will have about one to two minutes.

Once you've submitted your digital form, place your phone or device down so we know you're ready to begin our group discussion.

Once all forms are completed, begin the discussion,

Role-Play Participant Debrief:

• **Facilitator Questions:**

- What was the goal you identified?
- Do you feel you accomplished your goal?
- Why or why not?
- If no, what could you have done to meet the goal?

Facilitator Answer: *(Responses may vary)*

Say:

I appreciate your willingness to participate. Let's give our role-play participant a round of applause.

Audience Participant Debrief: Paraphrase

- Now let's learn from what we observed together.

Facilitator Questions:

- How effectively did the Resource Specialist use and explain licensing standards while maintaining rapport with the family?
- What strengths and concerns did the Resource Specialist identify, and were there any important observations that were missed?
- How did the Resource Specialist use meaningful, open-ended questions and information from earlier conversations to deepen their understanding of the family?
- Based on the interaction and observations, what did the Resource Specialist learn about the family's readiness to move forward in the licensing process?

Facilitator Answer: *(Responses may vary)*

Paraphrase

Provide a brief professional assessment of the participant's performance, connecting feedback directly to the goals they identified.

Kudos

Recognize specific observable strengths.

Say:

Great job, everyone!

During the walk-through of the home, you practiced looking beyond whether a family

simply meets individual requirements and considering what your observations reveal about the home as a whole.

In your role as a Resource Specialist, you use licensing standards as a framework while remaining attentive to both strengths and areas that may require further discussion. You connect what you see to information the family has already shared, ask questions that deepen your understanding, and explain expectations in a way that supports the family's understanding of the licensing process.

Maintaining rapport while addressing concerns allows you to gather a fuller picture of the family's preparedness and determine what additional guidance, support, or follow-up may be needed as they move forward.

We're going to transition to our next scene.

TRADITIONAL IN-HOME CONSULTATION SIMULATION

Scene 4 Interview: Closing the Visit



TRADITIONAL IN-HOME CONSULTATION SCENE 4 – INTERVIEW: CLOSING THE VISIT

Time: 10-15 minutes

Purpose: To provide participants with an opportunity to strengthen their ability to conclude a home visit by reviewing what was observed, providing clear feedback to the family, and outlining what will occur following the assessment.

Characters: Resource Specialist (participant), Actors: David and Sarah Mitchell (parents)

Type of interview: In-person

Location: Family home

Participant Manual: CFS-446: In-Home Consultation Contact Report, CFS-480 Alternate Compliance of Water Supply Agreement for Resource Homes, PUB-30: Resource Parent Handbook

Your Attitude:

Now that the walk-through of your home is complete, you remain warm, friendly, and engaged as the Resource Specialist begins closing out the visit. You feel more comfortable than you did at the beginning and are interested in hearing the Specialist's overall impressions, any areas that may need attention, and what will happen next in the licensing

process.

You listen carefully as the Resource Specialist reviews the visit and are receptive to feedback about your home or any requirements that may require follow-up. If something is unclear, you ask questions to make sure you understand what is expected of your family. You may seek clarification about timelines, next steps, or whether there is anything you need to complete before moving forward.

You continue to be open and cooperative and do not become defensive if the Resource Specialist identifies an area that needs to be addressed. You appreciate clear explanations and practical guidance and are willing to make reasonable changes when needed. As the visit concludes, your responses reflect your continued interest in becoming a resource family and your desire to understand what you can expect after the in-home consultation.

*Sample Prompt: **(IF the Participants summarize the visit well state the following)***

Thank you both for coming out today and for taking the time to walk through everything with us. We know there's a lot to learn, and we really appreciate you helping us understand what we need to do next. This has been a helpful experience, and we're looking forward to moving ahead in the licensing process.

What You Will Tell IF Asked:

- **IF asked about any final concerns:** You do not have any major concerns, but you want to make sure you have not overlooked anything that could delay the process.
- **IF asked about what support you may need:** You appreciate having someone you can contact if questions come up after the visit and would like to know who to reach out to and how follow-up will occur.
- **IF asked whether you still want to move forward:** You remain interested in becoming a resource family and feel that the visit helped you better understand the responsibilities involved.

Begin simulation



OBSERVATION FORM

Scene 4 Interview: Closing the Visit

OBSERVATION FORM SCENE 4 – INTERVIEW: CLOSING THE VISIT

Time: 5 minutes

Purpose: To assess participant skill application during the completion of the Traditional In-Home Consultation.

After the scene: Facilitator Instructions

- Ask audience participants to complete their Observation Forms.
- Allow 1–2 minutes of quiet reflection.
- Instruct participants to submit their digital forms.
- Ask everyone to put away their phones or devices before beginning the discussion.

Say:

Before we debrief, please take a minute to complete your Observation Form by scanning the QR code on the slide. Rate what you observed based on the skills listed. You will have about one to two minutes.

Once you've submitted your digital form, place your phone or device down so we know you're ready to begin our group discussion.

Once all forms are completed, begin the discussion,

Role-Play Participant Debrief:

• **Facilitator Questions:**

- What was the goal you identified?
- Do you feel you accomplished your goal?
- Why or why not?
- If no, what could you have done to meet the goal?

Facilitator Answer: *(Responses may vary)*

Say:

I appreciate your willingness to participate. Let's give our role-play participant a round of applause.

Audience Participant Debrief: Paraphrase

- Now let's learn from what we observed together.

Facilitator Questions:

- How did the Resource Specialist use meaningful, open-ended questions and information gathered earlier in the visit to clarify any remaining areas before concluding?
- How clearly did the Resource Specialist explain any licensing requirements or follow-up needs while maintaining rapport and ensuring the family understood what was expected?
- How effectively did the Resource Specialist explain next steps, provide encouragement, invite final questions, and bring the in-home consultation to a positive and professional close?

Facilitator Answer: *(Responses may vary)*

Paraphrase

Provide a brief professional assessment of the participant's performance, connecting feedback directly to the goals they identified.

Kudos

Recognize specific observable strengths.

Say:

Great job, everyone!

Bringing the in-home consultation to an end requires you to bring together what you have learned throughout your time with the family and help them leave the experience with a clear understanding of where they stand.

As a Resource Specialist, you are responsible for balancing regulatory responsibilities with thoughtful engagement, recognizing areas of promise, identifying matters requiring attention, and preparing applicants for what comes after the visit.

The way you conclude the interaction can strengthen the working relationship and reinforce the family's confidence in navigating the licensing process.

With the full visit now complete, you will move into the post-visit debrief to reflect on your decisions, consider the information gathered, and evaluate your overall approach.

FINAL TRADITIONAL SIMULATION DEBRIEF

1. Self-Reflection
2. Family Perspective
3. Licensing & Assessment
4. Practice Transfer



FINAL TRADITIONAL SIMULATION DEBRIEF

Time: 10 Minutes

Purpose: To give participants the chance to reflect, reinforce effective practices, and identify opportunities for growth.

Participant Manual: IHC Reflection Worksheet

Facilitator Note:

Participants need to complete the IHC Reflection Worksheet prior to the remainder of the Debrief. Allow 15-20 minutes to do so.

Say:

Let's take some time to debrief and reflect on your experience, and remember the goal of this simulation was not to find every licensing concern, but to strengthen your assessment, communication, and professional judgment. This will be conducted in four phases: Self-Reflection, Family Perspective, Licensing & Assessment, and Communication.

Phase 1 Self-Reflection Questions

Facilitator Question(s):

- What went well?
- What challenges did you face?
- What would you do differently during your next consultation? At what point did you feel most confident?
- At what point did you feel uncertain?

Facilitator Answer(s): *(Responses may vary)***Facilitator Note:**

Allow participants to reflect before providing feedback and avoid immediately correcting responses.

Phase 2 Family Perspective (ask these questions to the role-players) –**Facilitator Question(s):**

- Did you feel welcomed?
- Did you understand why the Resource Specialist was visiting?
- Did you feel comfortable asking questions?
- Did you feel respected throughout the visit?
- Did you leave understanding the next steps?
- Would you want this Resource Specialists to continue working with your family?

Facilitator Answer(s): *(Responses may vary)***Facilitator Note:**

Ask participants the following questions after the Family Perspective Questions:

- What did you hear from the family's feedback that surprised you?
- What behaviors helped you build trust?
- Was there anything that unintentionally created anxiety?

Say:

Families often remember how they were treated more than the specific licensing requirements discussed during the visit. As a Resource Specialist, you set the tone for the family's experience with the licensing process. Your presence, professionalism, responsiveness, and ability to listen can influence whether families feel respected and comfortable seeking assistance when they need it.

Each interaction is an opportunity to demonstrate that the process is not only about determining compliance, but also about establishing a productive partnership with individuals who may eventually care for children in foster care.

The relationships you establish early can support future communication, create greater openness when challenges arise, and help families recognize you as a source of

information and support throughout their journey as a resource family.

Phase 3 Licensing & Assessment

Facilitator Question(s):

- What strengths did you identify?
- What licensing concerns did you identify?
- Were any concerns missed?
- Did anyone identify something another participant overlooked?
- How did you determine whether concerns required immediate correction or coaching?

Facilitator Answer(s): *(Responses may vary)*

Facilitator Notes:

Use the following as teaching points:

- Emphasize professional judgment, consistency, using the licensing standards, avoiding assumptions, asking following-up questions, and recognizing strengths

Phase 4 Communication

Facilitator Question(s):

- How were licensing concerns explained?
- Did participants educate or lecture?
- How could difficult conversations be handled differently?
- How can we maintain positive relationships while enforcing licensing standards?

Say:

The goal is never simply compliance. The goal is to help families understand why standards exist, how to meet them, and that DCFS is partnering with them throughout the licensing process.

Based on today's visit, would you recommend this family continue toward pre-service training? Why or why not? What corrective actions would you require first? Would any concerns prevent moving forward? What follow-up would you schedule?

Facilitator Answer(s): *(Responses may vary)*

Facilitator Note:

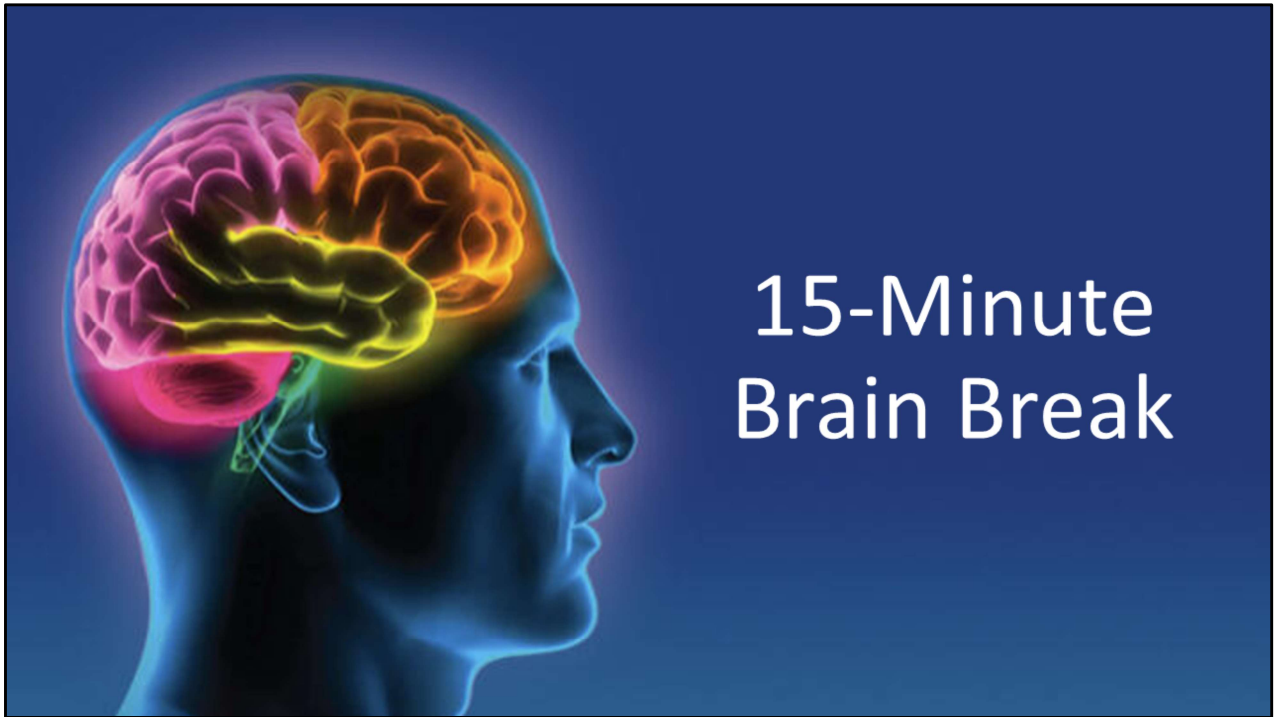
- There may be more than one reasonable recommendation.
- Participants should support their decisions using: Observations, Licensing Standards, and Professional Judgment

Paraphrase:

As you continue to think about today's visit, would it have been different if this family had

been a relative placement? Was the family caring for siblings? A child needs placement tomorrow?

These are situations that will be explored next during the kinship portion of the training.



15-Minute Brain Break

BRAIN BREAK

New Staff Training
Simulation Role Play Instructions

IN-HOME CONSULTATION KINSHIP SIMULATION

IN-HOME CONSULTATION KINSHIP SIMULATION

YOUR ROLE IN TODAY'S KINSHIP SIMULATION



- Introduce yourself
- Explain the licensing process
- Build rapport with the family
- Assess the home using the Arkansas Minimum Licensing Standards
- Determine whether the family appears appropriate to continue in the licensing process

YOUR ROLE IN TODAY'S KINSHIP SIMULATION

Time: 5 minutes

Purpose: To provide participants with an opportunity to conduct an initial In-Home Consultation with a provisional placement in a realistic home environment.

Say:

As in the traditional in-home consultation simulation, you are expected to apply licensing standards, communicate professionally, establish rapport, identify family strengths and areas requiring attention, and use professional judgment to determine appropriate next steps.

In this simulation, however, you will apply those same expectations within the context of a kinship placement involving Shirley Owens, the grandmother and kinship caregiver, and Tamela Boyers, the 15-year-old currently placed in her home.

You should consider the unique circumstances of kinship care while integrating policy knowledge, observation, critical thinking, and engagement skills throughout the visit. Because Tamela is already living in the home, you will also briefly engage her during the consultation. Be mindful of her experiences and use a developmentally appropriate,

trauma-informed approach that allows her perspective to be included without placing unnecessary pressure on her.

With these expectations in mind, you are ready to begin the kinship in-home consultation. Approach the caregiver, teenager, and home as you would in practice, allowing the information you gather throughout the visit to inform your questions, responses, and professional judgment.

Facilitator Note:

- The kinship simulation house should not pose any immediate safety concerns, as this is Tamela's current placement, and we want her to remain there. Therefore, any deficiencies should be corrected through Alternate Compliance or a Policy Waiver.
- Stage the simulation house (3-5 deficiencies if possible))
- Place all simulation materials in the home
- Review the role-player scenes (scripts) with anyone who is playing the family
- Ensure all participant materials are available
- Verify that all staged licensing concerns can be safely used during the simulation

Avoid making the home appear intentionally unsafe or unrealistic. The goal is to encourage participants to observe, ask questions, and verify information rather than make assumptions.

Participants should encounter a mixture of:

- Home strengths
- Minor licensing deficiencies
- Items that require additional questioning but cannot be determined through observation alone

Examples of Correctable Licensing Deficiencies:

- Smoke detector missing batteries
- Missing outlet covers
- Cleaning supplies stored improperly
- Emergency evacuation plan not posted
- No fire extinguisher

Meet Shirley Owens & Tamela Boyers

Kinship Resource Home



MEET SHIRLEY OWENS AND TAMELA BOYERS - OPENING A KINSHIP HOME

Time: 5 minutes

Purpose: To set the stage by providing participants with background information about the family before the simulation begins and to signal that they are now entering a realistic scenario where they will interact with a family as they would during an actual DCFS home visit.

Facilitator Resource: Provisional Simulation Prep Checklist, CFS-450: Prospective Provisional Resource Parent Information and Questionnaire (Boyers)

Say:

Today we are going to spend time with Shirley Owens and Tamela Boyers. Before we get into the simulation scene, we want to make sure everyone has a full picture of who this family is, how we got here, and what the Resource Specialist role will be today.

Background: Tamela Boyers provides care for the children with her parents, Shirley and the Father Boyers, due to sexual abuse allegations.

- Tamela has one half-sibling named Angelina, who lives with her father; they do not share the same father.

- Angelina is 17 years old.
- Tamela has been in the care of Shirley Owens ever since she was removed on April 6th.

Say:

Meeting with a kinship family provides an opportunity to understand how the caregiver is responding to the responsibilities of caring for a relative and how the placement is affecting the household. As you begin the visit, consider the family's existing relationships, current circumstances, and familiarity with the child while creating space for both the caregiver and child to participate. Your engagement should help you gain a clearer picture of the family's situation while supporting a respectful and collaborative interaction.

With an understanding of the family's background and current circumstances, you are ready to continue the kinship in-home consultation. As you move through the visit, use what you know about the placement to guide your conversations, observations, assessment, and decision-making as a Resource Specialist.

Facilitator Note:

This slide is intentionally brief. Its job is to signal a shift in tone — participants should feel they are interacting with a provision resource parent, not a classroom exercise. Pause after you say this and let the room settle before advancing.

KINSHIP SIMULATION PREP CHECKLIST

- ☐ CFS-450
- ☐ PUB-30
- ☐ Clipboard
- ☐ Participant Instructions
- ☐ Role Play Cards
- ☐ Observation Guide
- ☐ Internal Procedure 805



Arkansas Department of Human Services

Division of Children and Family Services

Prospective Provisional Resource Parent Information and Questionnaire

Section I: To be completed by Specialist overseeing or assisting with removal and initial placement during initial interview with prospective provisional resource parents prior to forwarding to resource staff.

Applicants are relatives or fictive kin? ☒ Relatives ☐ Fictive Kin

Prospective Provisional Applicants: Shirley Owens

Prospective Provisional Applicant Relationship to Children: Maternal Grandmother

Address: 808 Palm Street City: Pine Bluff Zip Code: 71603

Phone: (870)537 - 1983 Work: () - Cell: () -

Email 1: Email 2:

County of Residence: Jefferson PROVIDER ID: 2240803

Same day placement requested? YES ☒ NO ☐

List ALL persons in the Perspective Provisional Resource Home (attach another page as needed):

Name	SSN	Relationship to Provisional Resource Parent Applicant	Date of Birth	Age
Shirley Owens	000-285-6450	Self	10/09/1953	65

County of Removal: Jefferson Date: April / 06 / 2017

Referral/Case Number: : Specialist Name:

Contact name/Number for Placement:

CHILDREN NEEDING PLACEMENT				
Name	Sex	Age	Relationship to Applicant	Date Child Placed
Tamela Boyers	Female	15	Granddaughter	04/06/2017

1. Do you or any other household members have a criminal history? If yes, when and what were the charges?
YES ☐ NO ☒

2. Have you or any other household member ever been the subject of a child or adult maltreatment investigation? YES ☐ NO ☒

3. How many people live in the home? One

4. How many bedrooms (including number and size of beds as well as description of bedding for each) are in the home? **Two Bedrooms, Two Beds. One bedroom is 200 sq feet and the master is 250 sq feet**

5. Will you be able to support the children financially without DCFS assistance? YES ☒ NO ☐

6. What is your primary source of income? Social Security (Retirement)

7. If employed, where do you work? Retired Registered Nurse

8. What is your household income (monthly take home)? \$4,500

9. Do you have any savings for emergencies? If yes, how much? YES ☒ NO ☐ \$ 50,000

10. What do you estimate your overall monthly expenses (rent, utilities, insurance, food) are? \$ 1,500

11. What are your working hours and childcare plans while you are working?
Retired

12. Do your minor biological or adopted children who live in the home attend their regular well child visits or otherwise have regular medical checkups? YES ☒ NO ☐

13. Do all minor biological and adopted children living in the home have up-to-date immunizations per the CDC's immunization schedule or have an immunization exemption from the Arkansas Department of Health?
YES ☒ NO ☐

14. Do any of your current household members have a chronic medical condition that they receive regular treatment for? YES ☐ NO ☒ If yes, please list the diagnosis and frequency of medical visits.

15. Will you be able to take the child to and from school, doctor's appointments, and other activities (this is not only a time consideration; you must also have a valid driver's license, valid auto insurance, access to a reliable vehicle and possibly car seats/booster seats depending on the age of the child)? YES ☒ NO ☐

16. Are you willing to follow all protection protocols including but not limited to, court orders and family case plans? This includes instructions regarding family time with the child's parents. ☒ YES ☐ NO

17. Are you willing to attend resource parent training (it is a 7.5-hour training)?

Yes ☒ No ☐

18. Do you understand that within six months of opening as a provisional resource parent, you must meet all other resource home requirements (complete training) because, if you do not, the children could be moved from your home?

Yes ☒ No ☐

19. Do you reside in the same school district of the school that the child attended prior to coming into care?

Yes ☒ No ☐

20. If no, in what school district do you reside? _____

21. How do you know the children? Yes

22. When was the last time you saw the children? April 6, 2017

23. Generally speaking, how often do you see the child? Tamela is currently residing in the home.

24. Please describe your interactions and activities with the children when you spend time together?

She and I enjoy thifting on the weekends when she is not spending time wirh her sister Angela.

25. Please describe the children (personality, interest, hobbies, school performance, friends)

She and I enjoy thifting on the weekends when she is not spending time with her sister Anegla.

26. Other Notes, Comments, and Questions: Include information provided by the child, if age appropriate, to DCFS regarding how the child knows the prospective provisional applicant, how the child described their feelings about living with the provisional applicant.

Tamlea anjoy sending time with her sister and doing art work.

Section II: To be completed by Specialist overseeing or assisting with removal and initial placement prior to forwarding to resource staff for consideration.

1. What are the circumstances surrounding the removal of the child from the family home?

2. Are there any previous or current court orders potentially affecting the placement of the children in the relative home? YES ☐ NO ☐

3. Do any children or potential provisional placement have medical or mental health conditions which should be considered in evaluating the potential placement? YES ☐ NO ☐

4. Do any children to be placed have sexually aggressive behaviors or a history of sexual abuse?
YES ☐ NO ☐

Section III: To be completed by resource specialist only.

1. What are the details of the sleeping arrangements for all members of the household?

2. Do these sleeping arrangements meet the following minimum Licensing standards:

Sleeping Arrangements		YES	NO	N/A
A.	Will children sleep in a bedroom? (not in a living room or dining room where others are passing through)	☐	☐	☐
B.	Does each bedroom have at least 50 square feet of floor space per occupant?	☐	☐	☐
C.	Does each bedroom to be used for children experiencing foster care have a window to the outside which is capable of serving as an emergency escape (no bars, grates, and also provides natural light and ventilation)?	☐	☐	☐
D.	Will any child under the age of 6 occupy a top bunk?	☐	☐	☐
E.	Will any children who share a bed all be under the age of four and of the same gender?	☐	☐	☐
F.	Will any child experiencing foster care, except an infant under age 2, share a sleeping room with adults? In the case of a grandparent to the child, the age would increase through age 4.	☐	☐	☐

3. Describe the family's support system (extended family, neighbors, friends, church community.)

4. Please list any medications you are currently taking and the conditions of the medications are prescribed to treat (this includes medical marijuana).

Name of Person	Name of Medication	Dosage(mg)	Conditions of Treatment

A. If medical marijuana is listed above, do you possess a medical marijuana registry identification card issued by the Arkansas Department of Health? YES ☐ NO ☐

B. What is the name listed on the medical marijuana registry identification card? _____

Home Safety Requirements: Interior		YES	NO	N/A
A.	Is the interior of the home clean and free of physical health hazards?	☐	☐	☐
B.	Are heating devices such as radiators, fireplaces, wood stoves, gas or electric heaters, and steam and hot water pipes within reach of children screened or otherwise protected?	☐	☐	☐
C.	Are cleaning supplies, insecticides, gasoline, hazardous tools, knives or similarly dangerous objects stored out of reach of children or kept in locked closes or drawers?	☐	☐	☐
D.	Are all firearms unloaded; maintained in a secure, locked location and stored separately from ammunition?	☐	☐	☐
E.	Are there operational smoke on each level of occupancy of the home and in each bedroom and carbon monoxide detectors on each level and near all sleeping areas?	☐	☐	☐
F.	Does the home have an operational telephone or working cellular phone that is accessible to all children?	☐	☐	☐
Home Safety Requirements: Exterior				
A.	Are the premises of the house, including the yard, garage, carport, any storage areas, and the basement and attic (if applicable), free from physical hazards which would endanger the safety of children?	☐	☐	☐
B.	Is the yard free of dangerous debris, trash, uncovered cisterns, etc.?	☐	☐	☐
C.	Is there a fence or barrier to prevent a child's access to a busy street or highway, body of water or dangerous area?	☐	☐	☐
Home Safety Requirements: Other				
A.	Does family have a plan for evacuating the house in the event of fire and plan for seeking shelter during a storm or tornado?	☐	☐	☐
B.	If yes, is the escape plan posted within the home?	☐	☐	☐
C.	Is there a safety plan for any noted hazards in place? If yes, please identify which type:	☐	☐	☐
Home Safety Requirements: Medications				
A.	Are all over-the-counter medications stored in an area not readily accessible to children, and are all prescription medications locked (excluding Epi-pens, inhalers, and glucagon kits)?	☐	☐	☐
B.	Will applicants log all medications at the time the medication is administered and include the child's name; time and date; medication and dosage; and initials of the person administering the medication?	☐	☐	☐
Home Safety Requirements: Water				
A.	Do you have well water?	☐	☐	☐
B.	If yes, do you agree to use bottled water until the water is tested?	☐	☐	☐

Checklist for Effective Group Zoom Training

Resource home applicants have an option to attend class in a traditional classroom or via Zoom in a virtual classroom. Before selecting Zoom, assess the family's capability to actively participate in training on Zoom. This checklist is designed to help Resource Specialists make that determination. Since families have options, it is strongly recommended that any family that answers "No" to any of these questions be referred to a traditional classroom setting. Due to limitations on functionality of people attending a 3-hour training on their phones, it is also strongly recommended that families attending via Zoom do so on a computer.

Capacity		YES	NO
A.	Do you have a computer/laptop with a working camera and microphone?	☐	☐
B.	Have you ever attended an interactive online class or meeting?	☐	☐
C.	Do you know how to download an app? (for example, ZOOM.exe.)	☐	☐
D.	Do you have an area in your home that is free from distractions where you can attend and participate in an online training?	☐	☐
E.	Do you have someone who can care for the children in your home while you attend an online training? (3-6 hours)	☐	☐
F.	Do you have a stable internet connection that allows you to stream video and participate in video conferencing for up to 3 hours?	☐	☐

Preferred Training Timeframe *(note: marking a selection does not guarantee that preference is available):*

Week Nights ☐ Weekends ☐ No preference ☐

Preferred Training Modality *(note: marking a selection does not guarantee that preference is available):*

In-person ☐ Zoom ☐ No preference ☐

DISCIPLINE

Methods of discipline which are unacceptable for use by resource parents with the child include but are limited to:

- 1 Cruel, severe, or humiliating actions, such as washing the mouth with soap.
- 2 Taping or obstructing the child’s mouth.
- 3 Placing painful or unpleasant tasting or hot substances on the child’s body (e.g.,mouth, lips).
- 4 Placing the child in dark areas (closet).
- 5 Public humiliation.
- 6 Physical punishment-inflicted in any manner (hitting, slapping, pinching, pulling hair, kicking, twisting the arms, forced fixed body positions).
- 7 Denial of meals, clothes, or shelter.
- 8 Withholding implementation of the family case plan or any denial of rights.
- 9 Denial of contact with family members (family time, telephone calls, mail).
- 10 Assignments of extremely strenuous exercise or work.
- 11 Locked isolation of any kind.
- 12 Punishment of any kind for poor toilet habits.
- 13 Use of derogatory comments about the child, the child's family or friends.
- 14 Mechanical or chemical restraints.
- 15 Threats or insinuations of physical punishment or harm.

DCFS or resource parents shall never give permission for the school to use corporal punishment, (spanking the child). The school may elect to spank, but we can never give permission for them to do so.

Please leave a signed copy of this document with the resource parents and have the resource parents sign another copy for the Resource Specialist to maintain with the provider record.

Signature Resource Parent #1

____/____/____
Date

Signature Resource Parent #2

____/____/____
Date



Arkansas Department of Human Services Division of Children & Family Services

Confidentiality and Use of Social Media in Resource Homes

The Division of Children and Family Services (DCFS) takes the confidentiality of children experiencing the Arkansas foster care system very seriously. As such, resource parents are prohibited from posting pictures of children placed in their homes (even if the face is blocked or blurred when posted). In addition, any information about the circumstances of the child experiencing foster care is prohibited from being posted online.

DCFS acknowledges and understands that social media is a norm in today's society. However, the common usage of social media makes it neither safe nor secure even if the image of a child experiencing foster care is blocked or otherwise blurred when posted. The division, its resource parents, and its other stakeholders and volunteers must assure the privacy and confidentiality of the children and families involved in the child welfare system.

In regards to older youth who have a Facebook page or other social media accounts choose to post "selfies" or other information, resource parents must monitor to some extent that use of social media. Just as you would with your own children, nieces, nephews, godchildren, etc., please assess how appropriate and safe a particular posting may be—not only for the youth but for your family as well.

The division recognizes that many youth contact siblings or other family members using social media. Please be aware of such communication and conference with the youth's caseworker if you have questions regarding whether contact between the youth and their families is safe and appropriate. There may need to be some action taken if there is a conflict with a court order or other issues.

This monitoring of social media also extends to other forms of screen time. The American Academy of Pediatrics (AAP) recommends "screen-free" zones at home by making sure there are no television, computer or video games in children's bedrooms, and by turning off the TV during dinner. Children and teens should engage with entertainment media for no more than one or two hours per day. It is important for kids to spend time on outdoor play, reading, hobbies, and using their imaginations in free play.

Television and other entertainment media should be avoided for infants and children under age 2. A child's brain develops rapidly during these first years, and young children learn best by interacting with people, not screens.

DCFS appreciates your assistance in ensuring the safety of children in an environment that has many risk factors to be considered. If you have any questions regarding the use of social media in resource homes, please contact your Resource Specialist.

Please leave a signed copy of this document with the resource parents and have the resource parents sign another copy for the Resource Specialist to maintain with the provider record.

Resource Parent #1 Signature

_____/_____/_____
Date

Resource Parent #2 Signature

_____/_____/_____
Date

Resource Specialist Signature

_____/_____/_____
Date



Arkansas Department of Human Services
Division of Children & Family Services

RESOURCE PARENT SMOKING CERTIFICATION

Resource Parents or Applicants: _____
Names: _____
Address: _____
County: _____ Telephone Number(____)_____-_____

I. ARKANSAS AND DIVISION OF CHILDREN AND FAMILY SERVICES (DCFS) REQUIREMENTS

A resource parent may not smoke or permit anyone else to smoke in the presence of a child experiencing foster care unless it is in the child's best interest to be placed in or remain in the resource home. This includes the use of vaping and e-cigarettes. All resource parents and resource parent applicants being re-evaluated shall sign this form that certifies if the resource parents agree to comply with all state and DCFS requirements.

II. CERTIFICATION

I have read and fully understand the above identified requirements and restrictions regarding not smoking in the presence of a child experiencing foster care. By my selection and signature below, I indicate whether I agree or disagree to comply.

Resource Parent/Applicant (Print) Agrees to Comply ☐ Does Not Agree to Comply ☐

Resource Parent/Applicant (Print) Agrees to Comply ☐ Does Not Agree to Comply ☐

III. SIGNATURES

Resource Parent/Applicant _____
Date

Resource Parent/Applicant _____
Date

DCFS Resource Specialist Name (Print) _____
Date

DCFS Resource Specialist Signature

☐ Refer to PLPA

Alternative Compliance:

☐ Needed

☐ Temporary Approval Given, Board Action Needed

Policy Waiver:

☐ Approved

☐ Temporary Approval Given

Comments:

RECOMMENDATIONS

Resource Specialist recommends approval of applicants to attend training? YES ☐ NO ☐

Name

_____/_____/_____
Date

Signature

Resource Supervisor/Designee approves applicants to attend training? YES ☐ NO ☐

Name

_____/_____/_____
Date

Signature

Date submitted to MidSOUTH: ____/____/____

IN-HOME CONSULTATION

Date: _____ Time In: _____ Time Out: _____

Worker: _____ Location: _____

Family: _____ Case #: _____

PURPOSE OF VISIT

☐ In-Home Consultation ☐ Follow-Up ☐ Other (specify): _____

HOUSEHOLD MEMBERS PRESENT

Name	Relationship	Age

AREAS DISCUSSED / TOPICS COVERED

OBSERVATIONS

STRENGTHS IDENTIFIED

SAFETY CONCERNS

PLAN / NEXT STEPS

IN-HOME CONSULTATION KINSHIP SIMULATION

- CHRIS History Search
- Family Strengths
- Family Concerns

IN-HOME CONSULTATION KINSHIP SIMULATION

Time: 10 Minutes

Purpose: To provide participants the opportunity to apply the kinship approval process by completing a realistic provisional home assessment, exercising professional judgment, and documenting recommendations using the CFS-450.

Say:

Everything we covered in Day Two (2) has been to prepare you for this activity. You were introduced and reviewed the CFS-450.

Facilitator Question:

- What do you remember about the CFS-450 and how it is used during the provisional approval process?

Facilitator Answer:

- It is more than an application; it serves as a working document throughout the provisional approval process.
- It includes information gathered by both the case-carrying Specialist and the Resource Specialist.

- It contains safety checklists used to assess the home and family.
- It documents decisions related to training requirements.
- It helps organize and track information as the family moves through the approval process.
- Information documented in the CFS-450 helps support the Resource Specialist's final recommendation.

Paraphrase:

This simulation is designed to feel like the work you'll perform in the field. Not every situation will have one obvious answer, and you won't have every piece of information immediately. Just like real practice, you'll need to gather information, ask questions, consult the forms and procedures you've been given, and use professional judgment.

Remember, you're not expected to know every policy from memory. Use your resources, work with your team, and focus on child safety while preserving family connections whenever safely possible.

After the simulation, we'll come back together to debrief your decisions, discuss what went well, and explore how the approval process continues after the initial home visit.

With the simulation experience and brief overview complete, the focus now shifts to the information-gathering responsibilities that support your assessment of the family. Next, you will explore expectations for conducting interviews, reviewing CHRIS history, and identifying family strengths and concerns to develop a more complete understanding of the family and inform your decisions as a Resource Specialist.

Paraphrase:

Interviews should:

- Be conducted in a way that allows the family to speak freely, establish rapport, and build relationships by using the family-centered approach, identify strengths and areas requiring corrective action.
- Distinguish between immediate safety concerns and correctable licensing deficiencies, clear explanation of the licensing standards that encourage prospective resource families.
- Demonstrating professional judgment when determining whether a family is ready to proceed to pre-service training and complete the recommendation portion of the CFS-450 based on observations made during the consultation.

CHRIS History Review

What History tells us! Conducting a quality CHRIS History search for the Owens/Boyers family provides a record of any reports, investigations, or services provided to the family.

Family Strengths

These strengths should naturally be discovered by the participants; do not volunteer them unless the participants ask the appropriate questions.

- Financially secure

- Clean Home
- Appropriate space Available
- Positive parenting approach
- Strong support from the church
- Retired and is able to be available
- Nearby close friends
- Willing to learn
- Wanting the best interest of the grandchild

Family Concerns - Deficiencies (The Family should NOT appear difficult)

Shirley is genuinely concerned about her granddaughter's well-being.

Staged Deficiencies Checklist:

- **Concern 1: (Medication)** Prescription medication Lisinopril placed on the kitchen table and the couch
Required action: Immediate Correction/ Secured Storage
- **Concern 2: (Fire Safety)** The smoke detector is beeping and requires batteries.
(Arkansas Minimum Licensing Standard 200.4)
Required Action: Immediate battery replacement.
- **Concern 3: (Equipment)** Fire extinguisher is corroded on the handle and expired.
(Arkansas Minimum Licensing Standard 208 Physical Requirements of the Home)
Require Action: Replacement required for Final approval

Facilitator Note:

Sections 1 and 2 of the CFS-450 have been completed for the participants. They will need to interview Shirley to gather the remaining information on the remaining sections, explain the resource parent responsibilities, and assess the home using the minimum licensing standards.

The following information has not been verified and should be explored during the consultation, as appropriate:

- Household routines
- Home safety
- Sleeping arrangements
- Transportation
- Firearms or weapons
- Medication storage
- Emergency preparedness
- Understanding of foster care and reunification
- Questions or concerns about the licensing process

Say:

Now that you have reviewed the key information that informs your work with kinship families, let's shift the focus to how you will apply that knowledge during the simulation. Before you enter the scene, we will review your role as the Resource Specialist, including what you will be responsible for throughout the kinship in-home consultation and how you will use the information available to guide your interactions and decisions.

YOUR GOALS IN THE KINSHIP SIMULATION



- Rapport building
- Recognize family strengths
- Exercise professional judgment
- Explain why licensing standards exist
- Post-visit debrief

THE RESOURCE SPECIALIST GOALS IN KINSHIP SIMULATION

Time: 5 minutes

Purpose: Clarify the structure of this simulation, goals, and the flow before participants enter the scene.

Participant Manual: CFS-450: Prospective Provisional Resource Parent Information and Questionnaire, CFS-480 Alternate Compliance of Water Supply Agreement for Resource Homes, PUB-30: Resource Parent Handbook, CFS-509-B: Request For Alternative Compliance or Policy Waiver, and Internal Procedure 805: Alternate Compliance or Policy Waiver Protocol

Say:

Before we begin, you will be working in phases that will allow you to engage the family, assess the home, and determine appropriate next steps. You begin by introducing yourself, explaining your role and the purpose of the visit, establishing rapport, and learning about the family's circumstances, supports, expectations, and concerns related to caring for Tamela.

You then assess the home using minimum licensing standards, recognize strengths, address safety or licensing concerns, provide guidance, and consider whether alternate compliance or a policy waiver may be appropriate.

Finally, you close the consultation by reviewing the family's strengths, discussing the CFS-450: Prospective Provisional Resource Parent Information and Questionnaire and your recommendations, explaining pre-service training and any required follow-up, and ensuring the family understands what happens next.

Facilitator Note:

- **PHASE 1: RAPPORT BUILDING:** The Resource Specialist introduces themselves professionally, explains their role, and describes the purpose of today's visit. They review what the family can expect throughout the visit, begin establishing rapport, and invite any questions the family may have. Through conversation, the Resource Specialist also begins learning about the family composition, support system, expectations, and any concerns they may have about the licensing process for caring for Tamela while she is experiencing Foster Care.
- **PHASE 2: HOME ASSESSMENT:** During the home assessment, the Resource Specialist uses the minimum licensing standards to evaluate the safety and suitability of the home environment. They observe the storage of medications, assess the general condition of the home, utilize identify family strengths, and respectfully discuss any safety concerns or licensing deficiencies with the family. Throughout the visit, the Resource Specialist maintains a supportive, family-centered approach while determining whether the home meets licensing requirements, providing coaching on any areas that need improvement, and utilizing the alternate compliance or policy waiver.
- **PHASE 3: POST-VISIT DEBRIEF:** The Resource Specialist will end the consultation by summarizing the family's strengths, explaining the CFS-450: Prospection Provisional Resource Parent Information and Questionnaire, their recommendations, the pre-service training process, areas that require follow-up, and the next steps in the process.

Throughout the simulation, participants should demonstrate the behaviors expected during an actual In-Home Consultation. Resist the urge to coach participants during the exercise. Instead, document observations and reserve feedback for the debrief.

Say:

You are about to step into the role of the Resource Specialist and apply what you have learned throughout the in-home consultation. You will use the information available to guide your interactions, observations, questions, and decisions while considering the circumstances of the kinship family and carrying out your professional responsibilities.

Key Points: (ensure these are covered)

- The interview will be completed in three phases: Rapport Building, Home Assessment, and Post-Visit Debrief.
- Conclude by summarizing the families' review of the CFS-450, Alternate Compliance, or Policy waivers, and discussing recommendations

THE RESOURCE SPECIALIST ROLE IN KINSHIP SIMULATION

Time: 10 minutes

Purpose: To prepare participants for the simulation by introducing its unique structure and explaining how they will move through each of the three phases.

Participant Manual: CFS-446 In-Home Consultation Report, CFS-480 Alternate Compliance of Water Supply Agreement for Resource Homes, PUB-30 Resource Parent Handbook

Say:

Before we begin, you will be working in phases. The simulation is organized into three phases that reflect the progression of an In-Home Consultation from the initial interaction through the conclusion of the visit.

You will begin with Rapport Building, which focuses on engaging the family and establishing a foundation for the consultation.

You will then move into the Home Assessment, where you will gather information, observe the home environment, and address relevant requirements and concerns.

The simulation concludes with a Post-Visit Debrief, providing an opportunity to reflect on the information gathered, discuss observations, and consider the decisions and next steps that should follow the visit.

Facilitator Note:

- PHASE 1: RAPPORT BUILDING:
 - The Resource Specialist introduces themselves professionally, explains their role, and describes the purpose of today's visit.
 - They review what the family can expect throughout the visit, begin establishing rapport, and invite any questions the family may have.
 - Through conversation, the Resource Specialist also begins learning about the family's motivation for becoming a resource family, family composition, parenting experience, support system, expectations, and any concerns they may have about the licensing process or caring for children in foster care.
- PHASE 2: HOME ASSESSMENT:
 - During the home assessment, the Resource Specialist uses the minimum licensing standards to evaluate the safety and suitability of the home environment.
 - They observe the storage of medications and firearms, assess the general condition of the home, identify family strengths, and respectfully discuss any safety concerns or licensing deficiencies with the family.
 - Throughout the visit, the Resource Specialist maintains a supportive, family-centered approach while determining whether the home meets licensing requirements and providing coaching on any areas that need improvement.
- PHASE 3: POST-VISIT DEBRIEF:

- The Resource Specialist will end the consultation by summarizing the family's strengths, explaining the CFS-446 In-Home Consultation Visit Report, their recommendations, pre-service training process, discussing areas that require follow-up, and what the next steps are in the process.

Throughout the simulation, participants should demonstrate the behaviors expected during an actual In-Home Consultation. Resist the urge to coach participants during the exercise. Instead, document observations and reserve feedback for the debrief.

Say:

Each scene builds on the one before it, allowing you to practice how an In-Home Consultation develops from your first interaction with the family through your assessment and post-visit decision-making.

As you move through the simulation, consider how your communication, observations, and responses influence the information you are able to gather.

With the simulation structure established, you are ready to begin Scene One, where your first task is to engage the family and set the tone for the visit.

Key Points:

- The interview will be completed in three phases: Rapport Building, Home Assessment, and Post-Visit Debrief.
- Conclude by summarizing the families' review of the CFS-446, discussing recommendations



RESOURCE SPECIALITY SIMULATION

Scene 1 Interview: Shirley Owens

KINSHIP SIMULATION SCENE 1 – INTERVIEW: SHIRLEY OWENS

Time: 10-15 minutes

Purpose: To provide participants with an opportunity to practice the initial introduction and effectively engage kinship families while establishing a respectful foundation for the in-home consultation.

Characters: Resource Specialist (participant), Actors: Shirley Owens (grandmother)

Type of interview: In-person

Location: Family home

Participant Manual: CFS-450: Prospective Provisional Resource Parent Information and Questionnaire, CFS-480: Alternate Compliance of Water Supply Agreement for Resource Homes, PUB-30: Resource Parent Handbook, CFS-509-B: Request For Alternative Compliance or Policy Waiver, and Internal Procedure 805: Alternate Compliance or Policy Waiver Protocol

Your Attitude:

You are warm, honest, dependable, eager to provide information, and deeply invested in Tamela's well-being. You love your granddaughter and take your role as her placement

provider seriously. You are extremely happy that Tamela is safe and living with you, and you want to be as helpful to the agency, but you are not always sure exactly what they need at this point. Since Tamela was previously placed in your home, you thought that DCFS was finished with coming over to the home, since it was determined that you were the best placement for her.

Sample Prompt: I have never been a resource parent before. I don't know the first thing about it, actually. I just know that I wanted my granddaughter in a safe environment away from that man. I would love for my granddaughter to remain here in the home with me, where I know she is safe, and I can look after her. I have also been supervising the visits with Tamela and her mother, and have observed that during the visits, Esther comes across as not present, so I definitely feel like this is the best place for her until her mother can get her act together.

What You Will Tell IF Asked:

- **IF the Resource Specialist asks if you are familiar with the PUB-30: Resource Parent Handbook:** You will explain that another specialist mentioned it to you briefly, but due to all of the chaos going on during the removal, you did not fully understand what they were talking about. If asked about paperwork for verifying the use of clean water, you will say that you have not signed any such form or paperwork. Do not volunteer this information on your own. Participants must specifically ask.
- **IF asked about the sleeping arrangements or space you have prepared for the child:** You will explain that Tamela has her own 200 square foot bedroom with her own bathroom right outside of her door, and you are excited to show it to them. If participants ask to see the room, gladly invite them to take a look.
- **IF asked about the PUB-30: Resource Parent Handbook:** You will tell them that you have read over the PUB-30 family has already read the PUB-30: Resource Parent Handbook. You understand the general expectations, but still need clarity on what that has to do with you now since Tamela is currently and has been living with you since the removal.

Facilitator Note:

Role-play reminders

- Your job is not to test participants or to make the simulation difficult. Instead, portray a concerned grandmother who is interested in becoming a long-term provisional placement for her grandchild and is participating in an In-Home Consultation.
- Respond naturally to participants' questions.
- Do not volunteer information unless participants ask an appropriate question.
- Avoid leading participants towards licensing concerns; allow them to discover concerns through observation, conversation, and application of the licensing standards.
- If participants do not introduce themselves, do not help them, simply ask, "I'm sorry, what was your name again?" If they fail to explain the purpose of their visit, respond with, "What is the purpose of this visit?"

- During your interviews, remember to provide any information when techniques that are taught in PM are used correctly:
 - open-ended questions
 - silence
 - empathy
 - genuineness

Begin simulation



KINSHIP OBSERVATION FORM

Scene 1 Interview: Shirley Owens

KINSHIP OBSERVATION FORM SCENE 1 – INTERVIEW: SHIRLEY OWENS

Time: 5 minutes

Purpose: To assess participant skill application during the completion of the Kinship In-Home Consultation.

After the scene: Facilitator Instructions

- Ask audience participants to complete their Observation Forms.
- Allow 1–2 minutes of quiet reflection.
- Instruct participants to submit their digital forms.
- Ask everyone to put away their phones or devices before beginning the discussion.

Say:

Before we debrief, please take a minute to complete your Observation Form by scanning the QR code on the slide. Rate what you observed based on the skills listed. You will have about one to two minutes.

Once you've submitted your digital form, place your phone or device down so we know you're ready to begin our group discussion.

Once all forms are completed, begin the discussion,

Role-Play Participant Debrief:

• **Facilitator Questions:**

- What was the goal you identified?
- Do you feel you accomplished your goal?
- Why or why not?
- If no, what could you have done to meet the goal?

Facilitator Answer: *(Responses may vary)*

Say:

I appreciate your willingness to participate. Let's give our role-play participant a round of applause.

Audience Participant Debrief: Paraphrase

- Now let's learn from what we observed together.

Facilitator Questions:

- What specific behaviors or statements did you observe that helped build rapport with the family?
- Was there an opportunity where an open-ended question could have gathered more meaningful information? What might you have asked?
- What behaviors from the Observation Form were demonstrated effectively?

Facilitator Answer: *(Responses may vary)*

Paraphrase

Provide a brief professional assessment of the participant's performance, connecting feedback directly to the goals they identified.

Kudos

Recognize specific observable strengths.

Say:

Great job, everyone!

In this scene, you focused on the unique considerations involved in engaging a kinship family at the beginning of the placement process. Kinship caregivers may be navigating an unexpected change in family roles while also learning about agency expectations and their responsibilities as caregivers.

Your role as a Resource Specialist is to approach these conversations with sensitivity, recognize the family's existing relationships and knowledge of the child, and help

caregivers understand how the kinship placement process affects their family.

Through thoughtful communication and purposeful engagement, you begin developing the partnership needed to understand the family's circumstances, recognize available supports and potential challenges, and determine how to best support the placement moving forward.

We're going to transition to our next scene.

RESOURCE SPECIALITY SIMULATION

Scene 2 Interview: Tamela Boyers



KINSHIP SIMULATION SCENE 2 – INTERVIEW: TAMELA BOYERS

Time: 10-15 minutes

Purpose: To provide participants with an opportunity to practice the initial introduction and effectively engage kinship families while establishing a respectful foundation for the in-home consultation.

Characters: Resource Specialist (participant), Actors: Tamela Boyers (granddaughter)

Type of interview: In-person

Location: Family home

Your Attitude:

You are quiet, curious, nervous, and do not want to answer many questions because you have already been through enough, yet you still answer the questions with hesitation. You light up when you are asked about your sister Angelina and living with your grandmother.

Sample prompt: I have to talk to you guys again? I hope it's not for a long time this time, I have already spoken to so many people. I have already told you guys that I want to stay here with my grandmother, she is and has always been there for me, and this is where I feel the safest.

What You Know and Will Volunteer:

I have my own room, and my grandmother and I go thrifting on the weekends. Sometimes, I get to bring my sister Angelina with me. One of the things that I have been able to enjoy more since living here with my grandmother has been art; she allows me to stay after school since I am now president of the art club, and I am making new friends.

What you will tell IF asked:

- **IF the Resource Specialist asks how is life living with your grandmother:** I would love it if my mom could be more present in my life. I love living with my grandmother, but one thing that does really annoy me is the smoke alarm because it is always beeping and sometimes wakes me up in the middle of the night. She always says that she needs to change the batteries.

Begin simulation.



KINSHIP OBSERVATION FORM

Scene 2

Interview: Tamela Boyers

KINSHIP OBSERVATION FORM SCENE 2 – INTERVIEW: TAMELA BOYERS

Time: 5 minutes

Purpose: To assess participant skill application during the completion of the Kinship In-Home Consultation.

After the scene: Facilitator Instructions

- Ask audience participants to complete their Observation Forms.
- Allow 1–2 minutes of quiet reflection.
- Instruct participants to submit their digital forms.
- Ask everyone to put away their phones or devices before beginning the discussion.

Say:

Before we debrief, please take a minute to complete your Observation Form by scanning the QR code on the slide. Rate what you observed based on the skills listed. You will have about one to two minutes.

Once you've submitted your digital form, place your phone or device down so we know you're ready to begin our group discussion.

Once all forms are completed, begin the discussion,

Role-Play Participant Debrief:

• **Facilitator Questions:**

- What was the goal you identified?
- Do you feel you accomplished your goal?
- Why or why not?
- If no, what could you have done to meet the goal?

Facilitator Answer: *(Responses may vary)*

Say:

I appreciate your willingness to participate. Let's give our role-play participant a round of applause.

Audience Participant Debrief: Paraphrase

- Now let's learn from what we observed together.

Facilitator Questions:

- How did the Resource Specialist approach the 15-year-old in a way that acknowledged her age, perspective, and role within the kinship family?
- How effectively did the Resource Specialist use age-appropriate, open-ended questions that allowed her to respond in her own words without feeling pressured or led?
- How did the Resource Specialist respond to her verbal and nonverbal cues and adjust the conversation based on her level of comfort and willingness to engage?

Facilitator Answer: *(Responses may vary)*

Paraphrase

Provide a brief professional assessment of the participant's performance, connecting feedback directly to the goals they identified.

Kudos

Recognize specific observable strengths.

Say:

Great job, everyone!

In a kinship placement involving a teenager, it is important to recognize that the young person has their own perspective on the family relationships, changes occurring in the home, and what the placement means for them. Giving the teenager space to participate demonstrates that their experiences and opinions matter and can offer important insight into how they are adjusting to the placement. At the same time, your engagement should extend to all children living in the home, not only the child being placed. Each child may

experience the addition of a relative differently.

As a Resource Specialist, you consider their ages, developmental abilities, relationships with one another, and understanding of the changes taking place when determining how to engage them. Whether speaking with a teenager or a younger child, your approach should allow each child to communicate in a way that feels natural and appropriate for them. Listening to their perspectives helps you better understand household dynamics, how family members are responding to the placement, and what support may be needed to promote stability for everyone in the home.

We're going to transition to our next scene.



RESOURCE SPECIALITY SIMULATION

Scene 3 Interview: Walkthrough

KINSHIP SIMULATION SCENE 3 – INTERVIEW: WALKTHROUGH

Time: 10-15 minutes

Purpose: To provide participants with an opportunity to complete a walkthrough of a kinship home, assess the home environment for child safety and licensing requirements, identify strengths and potential concerns, and determine appropriate next steps to support a safe kinship placement.

Characters: Resource Specialist (participant), Actors: Shirley Owens (grandmother), Tamela Boyers (granddaughter)

Type of interview: In-person

Location: Family home

Participant Manual: CFS-450: Prospective Provisional Resource Parent Information and Questionnaire, CFS-480 Alternate Compliance of Water Supply Agreement for Resource Homes, PUB-30: Resource Parent Handbook, CFS-509-B: Request For Alternative Compliance or Policy Waiver, and Internal Procedure 805: Alternate Compliance or Policy Waiver Protocol

Your Attitude:

You enjoy talking and naturally share information about your family, home, and experiences without hesitation. You are curious about the process and ask thoughtful questions as they arise, wanting to understand what to expect and how you can be successful in caring for your granddaughter.

You are not trying to hide anything or avoid questions. Instead, you are open, honest, and eager to provide information that will help the Resource Specialist. You appreciate guidance and reassurance and respond positively when participants explain the process or answer your questions.

Your attitude reflects cooperation and a sincere desire to make visitors feel welcome while demonstrating your commitment to becoming a safe and supportive home.

Sample Prompt:

I have enjoyed having Tamela live with me ever since my husband passed away 5 years ago. It has been nice having someone around the house to keep me company. I have received an outpouring of support from my friends and her teachers. Our church has been incredibly encouraging throughout this process.

What You will NOT do:

- Do not point out concerns.
- Do not watch where they are looking.
- Only answer questions they ask.

What You Know and Will Volunteer:

What you will volunteer – You will answer questions, but not tell everything.

What You Will Tell IF Asked:

- **IF the during the walkthrough:** If asked about the smoke detector, you will respond with, “Yeah, I really have to get those batteries changed”. Do not volunteer this information on your own. Participants must specifically ask. The fire extinguisher in the home has expired and needs to be replaced due to corrosion. If asked about the medications, lisinopril- (on the kitchen table) and the metformin- (on the couch) you will say that you forgot to put those away this morning. The lisinopril is for my high blood pressure, and the metformin is because you are a type 2 diabetic.
- **IF asked whether you have prepared a space for a child:** You will explain that Tamela has her own room. If asked about the size of Tamela’s room, you will share that she has her own 200 square feet with a bathroom outside of her door. If participants ask to see the room, gladly invite them to take a look.

Begin simulation.



KINSHIP OBSERVATION FORM

Scene 3 Interview: Walkthrough

KINSHIP OBSERVATION FORM SCENE 3 – INTERVIEW: WALKTHROUGH

Time: 5 minutes

Purpose: To assess participant skill application during the completion of the Kinship In-Home Consultation.

After the scene: Facilitator Instructions

- Ask audience participants to complete their Observation Forms.
- Allow 1–2 minutes of quiet reflection.
- Instruct participants to submit their digital forms.
- Ask everyone to put away their phones or devices before beginning the discussion.

Say:

Before we debrief, please take a minute to complete your Observation Form by scanning the QR code on the slide. Rate what you observed based on the skills listed. You will have about one to two minutes.

Once you've submitted your digital form, place your phone or device down so we know you're ready to begin our group discussion.

Once all forms are completed, begin the discussion,

Role-Play Participant Debrief:

• **Facilitator Questions:**

- What was the goal you identified?
- Do you feel you accomplished your goal?
- Why or why not?
- If no, what could you have done to meet the goal?

Facilitator Answer: *(Responses may vary)*

Say:

I appreciate your willingness to participate. Let's give our role-play participant a round of applause.

Audience Participant Debrief: Paraphrase

- Now let's learn from what we observed together.

Facilitator Questions:

- How effectively did the Resource Specialist explain licensing expectations in the context of a kinship placement while maintaining a supportive relationship with the family?
- What strengths and concerns did the Resource Specialist identify within the kinship family and home, and were any important areas overlooked?
- How did the Resource Specialist build on earlier conversations and use open-ended questions to better understand the family's circumstances and ability to support the child?
- Did the Resource Specialist identify any circumstances where alternative requirements may need to be considered? What information would be needed to determine whether an alternative requirement is appropriate?
- Based on the overall visit, what did the Resource Specialist learn about the kinship family's preparedness and what support may be needed moving forward?

Facilitator Answer: *(Responses may vary)*

Paraphrase

Provide a brief professional assessment of the participant's performance, connecting feedback directly to the goals they identified.

Kudos

Recognize specific observable strengths.

Say:

Great job, everyone!

During a kinship placement, your role as a Resource Specialist requires you to understand that relatives may be assuming caregiving responsibilities quickly and under circumstances they did not anticipate.

You help the family navigate the transition from being a relative to becoming an approved caregiver while considering what is necessary to maintain the child's connection to people who are already significant in their life.

This includes determining where flexibility may be appropriate, identifying barriers that could affect the placement, and helping the family work through those barriers without losing sight of the child's well-being. Your involvement helps ensure that decisions are responsive to the realities of the kinship family while supporting a stable and sustainable caregiving arrangement.

We're going to transition to our final scene.

RESOURCE SPECIALITY KINSHIP SIMULATION

Scene 4 Interview: Visit Closure



KINSHIP SIMULATION SCENE 4 – INTERVIEW: VISIT CLOSURE

Time: 10-15 minutes

Purpose: To provide participants with an opportunity to close the kinship home visit by clearly communicating assessment findings, addressing identified strengths and concerns, and explaining the next steps in the licensing and placement process.

Characters: Resource Specialist (participant), Actors: Shirley Owens (grandmother)

Type of interview: In-person

Location: Family home

Participant Manual: CFS-450: Prospective Provisional Resource Parent Information and Questionnaire, CFS-480 Alternate Compliance of Water Supply Agreement for Resource Homes, PUB-30: Resource Parent Handbook, CFS-509-B: Request For Alternative Compliance or Policy Waiver, and Internal Procedure 805: Alternate Compliance or Policy Waiver Protocol

Your Attitude:

You enjoy talking and naturally share information about your family, home, and experiences without hesitation. You are curious about the process and ask thoughtful

questions as they arise, wanting to understand what to expect and how you can be successful in caring for your granddaughter.

You are not trying to hide anything or avoid questions. Instead, you are open, honest, and eager to provide information that will help the Resource Specialist. You appreciate guidance and reassurance and respond positively when participants explain the process or answer your questions.

Your attitude reflects cooperation and a sincere desire to make visitors feel welcome while demonstrating your commitment to becoming a safe and supportive home.

Sample Prompt:

I have enjoyed having Tamela live with me ever since my husband passed away 5 years ago. It has been nice having someone around the house to keep me company. I have received an outpouring of support from my friends and her teachers. Our church has been incredibly encouraging throughout this process.

What You Know and Will Volunteer:

What you will volunteer – You will answer questions, but not tell everything.

What You Will Tell IF Asked:

- **IF asked about any final concerns:** You want to be sure you understand anything that still needs to be completed so there are no unnecessary barriers to keeping your relative safely in your home.
- **IF asked about what support you may need:** You would like to know who you can contact when questions arise and what assistance may be available as your family adjusts to caring for your relative.
- **IF asked about moving forward:** You are committed to providing care for your relative and are willing to complete the remaining steps necessary to support the kinship placement.

Begin simulation.



KINSHIP OBSERVATION FORM

Scene 4 Interview: Visit Closure

KINSHIP OBSERVATION FORM SCENE 4 – INTERVIEW: VISIT CLOSURE

Time: 5 minutes

Purpose: To assess participant skill application during the completion of the Traditional In-Home Consultation.

After the scene: Facilitator Instructions

- Ask audience participants to complete their Observation Forms.
- Allow 1–2 minutes of quiet reflection.
- Instruct participants to submit their digital forms.
- Ask everyone to put away their phones or devices before beginning the discussion.

Say:

Before we debrief, please take a minute to complete your Observation Form by scanning the QR code on the slide. Rate what you observed based on the skills listed. You will have about one to two minutes.

Once you've submitted your digital form, place your phone or device down so we know you're ready to begin our group discussion.

Once all forms are completed, begin the discussion,

Role-Play Participant Debrief:

• **Facilitator Questions:**

- What was the goal you identified?
- Do you feel you accomplished your goal?
- Why or why not?
- If no, what could you have done to meet the goal?

Facilitator Answer: *(Responses may vary)*

Say:

I appreciate your willingness to participate. Let's give our role-play participant a round of applause.

Audience Participant Debrief: Paraphrase

- Now let's learn from what we observed together.

Facilitator Questions:

- How did the Resource Specialist bring together information gathered throughout the visit and address any remaining questions or uncertainties before leaving the kinship home?
- How effectively did the Resource Specialist communicate what the kinship caregiver still needed to complete, including any areas requiring additional review, while being sensitive to the family's circumstances?
- How did the Resource Specialist prepare the kinship caregiver for what would happen after the visit, confirm understanding, offer reassurance and support, and conclude the interaction in a way that strengthened the ongoing working relationship?

Facilitator Answer: *(Responses may vary)*

Paraphrase

Provide a brief professional assessment of the participant's performance, connecting feedback directly to the goals they identified.

Kudos

Recognize specific observable strengths.

Say:

Great job, everyone!

Closing a kinship visit is an important part of helping relatives understand how the work completed during the visit connects to their continued ability to care for the child. As a

Resource Specialist, you help caregivers leave the interaction knowing what requires their attention, where they can turn for assistance, and how you will remain involved as the placement progresses. This requires critical thinking as you consider the information gathered, distinguish between immediate needs and matters requiring further review, and determine what guidance or action is appropriate based on the family's individual circumstances.

Your role also requires you to consider the family as a whole, recognize factors that may strengthen or challenge the placement, and avoid making decisions based on a single interaction or observation. A thoughtful closure acknowledges the relatives who have stepped into a caregiving role while reinforcing the shared responsibility for promoting stability and well-being for the child.

With both the traditional and kinship simulation experiences complete, you will now move into the overall simulation debrief. This discussion provides an opportunity to examine your choices across the simulations, reflecting on your own approach and decision-making, considering how the family may have experienced your interactions, examining how licensing and assessment responsibilities shaped your responses, and identifying how you will transfer what you learned into your day-to-day practice as a Resource Specialist.

FINAL KINSHIP SIMULATION DEBRIEF

1. Self-Reflection
2. Family Perspective
3. Licensing & Assessment
4. Practice Transfer



FINAL KINSHIP SIMULATION DEBRIEF

Time: 10 Minutes

Purpose: To give participants the chance to reflect, reinforce effective practices, and identify opportunities for growth.

Participant Manual: IHC Reflection Worksheet

Facilitator Note:

Participants need to complete the IHC Reflection Worksheet prior to the remainder of the Debrief. Allow 15-20 minutes to do so.

Say:

Let's take some time to debrief and reflect on your experience. Remember the goal of this simulation was not to find every licensing concern, but to strengthen your assessment, communication, and professional judgment. This will be conducted in four phases: Self-Reflection, Family Perspective, Licensing & Assessment, and Communication.

Phase 1: Self-Reflection Questions

Facilitator Question(s):

- What went well?
- What challenges did you face?
- What would you do differently during your next consultation? At what point did you feel most confident?
- At what point did you feel uncertain?

Facilitator Answer(s): *(Responses may vary)*

Facilitator Note:

Allow participants to reflect before providing feedback and avoid immediately correcting responses.

Phase 2: Family Perspective (ask these questions to the role-players)**Facilitator Question(s):**

- Did you feel welcomed?
- Did you understand why the Resource Specialist was visiting?
- Did you feel comfortable asking questions?
- Did you feel respected throughout the visit?
- Did you leave understanding the next steps?
- Would you want this Resource Specialists to continue working with your family?

Facilitator Answer(s): *(Responses may vary)*

Facilitator Note:

Ask participants the following questions after the Family Perspective Questions:

- What did you hear from the family's feedback that surprised you?
- What behaviors helped you build trust?
- Was there anything that unintentionally created anxiety?

Say:

Kinship work calls for an approach that honors the family's history while recognizing that familiar relationships are taking on new meaning. The Resource Specialist enters an established family system where roles, routines, loyalties, and expectations may already be deeply rooted. Effective interaction requires awareness of these dynamics and an understanding that each relative may experience the placement differently.

The Resource Specialist creates space for caregivers to describe what this change means for their household, including how responsibilities may affect everyday life and relationships. Purposeful engagement can uncover perspectives that might not emerge through formal assessment questions alone. By remaining attentive to what is said and what may require further exploration, the Resource Specialist gains a more complete picture of how the family is adapting and what factors should be considered as the kinship

arrangement continues.

Phase 3: Licensing & Assessment

Facilitator Question(s):

- What strengths did you identify?
- What licensing concerns did you identify?
- Were any concerns missed?
- Did anyone identify something another participant overlooked?
- How did you determine whether concerns required immediate correction or coaching?

Facilitator Answer(s): *(Responses may vary)*

Say:

As a Resource Specialist, you should apply professional judgment consistently, use licensing standards to guide your decisions, avoid making assumptions, ask follow-up questions when additional information is needed, and recognize family strengths throughout the assessment process.

Phase 4: Communication

Facilitator Question(s):

- How were licensing concerns explained?
- Did participants educate or lecture?
- How could difficult conversations be handled differently?
- How can we maintain positive relationships while enforcing licensing standards?

Say:

With kinship families, the focus extends beyond meeting requirements. You help relatives understand how expectations connect to the child's care, identify workable ways to address requirements within their unique circumstances, and navigate the approval process with guidance and support from DCFS.

Based on today's visit, would you recommend this family continue toward pre-service training? Why or why not? What corrective actions would you require first? Would any concerns prevent moving forward? What follow-up would you schedule?

Facilitator Answer(s): *(Responses may vary)*

Say:

You may determine that more than one recommendation could reasonably address the circumstances presented. You should be prepared to explain and support your decision using your observations, applicable licensing standards, and professional judgment.

Paraphrase:

The kinship simulation provided an opportunity to consider the complexities that can arise when relatives step into a formal caregiving role. You were challenged to consider existing family dynamics, the needs of the child and others in the household, applicable requirements, and circumstances that may call for additional consideration. The experience required you to gather information from multiple perspectives, think critically about what you observed, and determine how your professional judgment informs the recommendations you make as a Resource Specialist.

Taken together, the traditional and kinship simulations allowed you to experience how the same core responsibilities may look different depending on the family and circumstances. Across both experiences, you moved from initial contact through conversations with household members, assessment of the home, decision-making, and closure. You were asked to interpret information rather than simply collect it, connect observations across different parts of the visit, and consider how your actions and decisions may affect the family's experience as well as the safety and well-being of children.

This concludes the morning's simulation-based learning. The experiences you practiced provide a foundation for applying the knowledge, critical thinking, and professional judgment expected in your day-to-day work. As you transition back to the classroom for the final learning portion of the day, carry forward the perspectives gained through the simulations and consider how the remaining content can further strengthen your practice as a Resource Specialist.



Lunch Break & Transition

LUNCH BREAK & TRANSITION

Say:

At this time, we are going to close out the simulation portion of today's training and transition from the Learning Lab to our lunch break. Following your lunch hour, we will meet back up at the Plaza West Training room for the remainder of our learning day.



Monitoring, Support, and Other Responsibilities

MONITORING, SUPPORT, AND OTHER RESPONSIBILITIES

Routine Resource Specialist Responsibilities



ROUTINE RESOURCE SPECIALIST RESPONSIBILITIES

Time: 2 Minutes

Purpose: To strengthen Resource Specialists' ability to provide ongoing oversight and support to resource homes by building collaborative relationships, assessing changing needs and family functioning, monitoring the safety and well-being of children, and connecting resource families with the guidance and resources needed to maintain a stable and supportive home environment.

Say:

Once a resource home is approved, the Resource Specialist's involvement continues through regular contact, assessment, and support. Ongoing oversight provides opportunities to understand how the household is functioning over time, recognize changes that may affect the family or children in the home, and respond when additional guidance or resources are needed. Maintaining a collaborative relationship with resource families helps create an environment where concerns can be addressed early and successes can be reinforced, contributing to a safe, stable, and supportive placement.

Quarterly visits are one way Resource Specialists carry out their ongoing responsibilities after a home is approved, but the role extends beyond these scheduled contacts. With

this foundation established, the focus will now shift to additional Resource Specialist responsibilities that support continued oversight, accountability, and effective management of resource homes.

Quarterly Visits: Looking Beyond What is Presented



QUARTERLY VISITS

Time: 5 Minutes

Purpose: To strengthen Resource Specialists' ability to conduct quarterly visits by assessing household changes, child well-being, emerging needs, and necessary follow-up to support placement stability.

Say:

Quarterly visits provide Resource Specialists with an intentional opportunity to see beyond individual events and identify patterns in how the resource home is functioning over time. These visits allow Resource Specialists to understand how the family is adjusting to the realities of providing care, how household dynamics may be changing, and whether previously identified needs have improved, remained the same, or require additional attention.

They also create space for resource parents to raise questions or concerns that may not surface through routine communication and for the Resource Specialist to reinforce practices that contribute to a stable placement. Information gathered during each visit helps inform future decisions and establishes continuity from one visit to the next.

Before we look at the expectations for quarterly visits, take a moment to think about

what you already know or have experienced.

Facilitator Questions:

- What is one thing you believe a Resource Specialist should learn about a resource family during a quarterly visit that might not be captured by simply reviewing the case record?

Facilitator Answers: *(Responses may vary)*

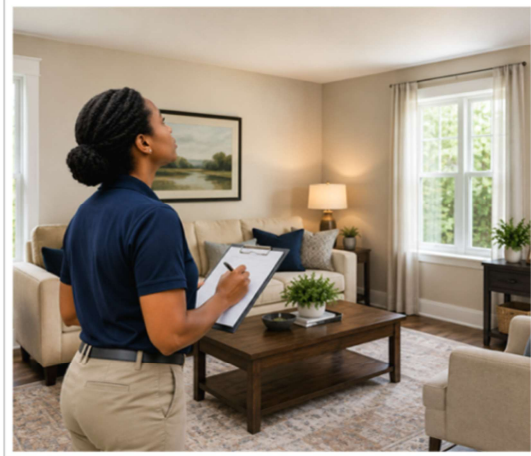
- Invite a few participants to share their responses and briefly connect their ideas to the importance of purposeful observation, conversation, and assessment.

Paraphrase:

With this purpose in mind, let's look more closely at what is expected during a quarterly visit and how those expectations guide what Resource Specialists should observe, discuss, assess, and document.

During Quarterly Visits

- Assess child safety and well-being.
- Observe the home environment.
- Engage with children and caregivers.
- Identify concerns requiring follow-up.
- Document observations objectively.



DURING QUARTERLY VISITS

Time: 15 Minutes

Purpose: To help Resource Specialists apply the quarterly visit requirement by identifying safety concerns, engaging with resource families, and determining follow-up actions during realistic home visit scenarios.

Say:

Quarterly visits are more than a checklist. They are an opportunity to assess child safety, strengthen relationships with resource families, and identify concerns before they become a crisis. During every visit, you're observing much more than whether the home meets standards. You are assessing how the caregiver is coping, and whether additional support may be needed to maintain stability.

Facilitator Questions:

Imagine you arrive for a quarterly visit, and everything initially appears to be going well.

1. What would you need to observe, ask, and listen for before you could confidently determine that the child is safe, the placement is stable, and the family's needs are being addressed?
2. What might you learn from speaking with the child that you would not learn from the caregiver alone?
3. What could you observe in the home or interactions that might cause you to ask additional questions—even if no one reports a concern?

4. How would you distinguish between an observation that should simply be documented and one that requires follow-up or immediate action?
5. What would objective documentation look like if what you observed differed from what the caregiver reported?

Facilitator Answers: *(Responses may vary)*

What would you need to observe, ask, and listen for before you could confidently determine that the child is safe, the placement is stable, and the family's needs are being addressed?

- Observe the child's appearance, behavior, comfort level, and interactions with caregivers and others in the home.
- Observe the physical home environment for changes or conditions that could affect safety, supervision, or the child's daily care.
- Ask the child how things are going in the home, how they feel about the placement, whether they feel safe, and who they can talk to when they need help.
- Ask caregivers about changes in the child's behavior, routines, school, health, family connections, and adjustment to the placement.
- Ask about the caregiver's experience, including stressors, challenges, successes, support needs, and changes within the household.
- Listen for inconsistencies between what the child and caregiver report and what is observed during the visit.
- Listen for changes that could signal emerging needs, caregiver stress, placement instability, or potential safety concerns.
- Consider patterns over time by comparing information from the current visit with previous visits, concerns, and supports provided.
- Identify what may require follow-up, including additional information, services, resources, consultation, or action.

What might you learn from speaking with the child that you would not learn from the caregiver alone?

- How the child actually feels about living in the home.
- Whether the child feels safe, comfortable, and included.
- How household rules and discipline are experienced by the child.
- Whether the child feels comfortable asking the caregivers for help.
- Concerns about relationships with other children or adults in the home.
- Changes in school, behavior, sleep, eating, relationships, or daily routines.
- Whether the child feels supported in maintaining important family and community connections.

What could you observe in the home or interactions that might cause you to ask additional questions—even if no one reports a concern?

- Changes in the physical condition or safety of the home.

- Tension, limited communication, or unusual interactions between the child and caregiver.
- A child becoming noticeably quiet, anxious, withdrawn, or watchful around a particular person.
- Caregiver frustration, exhaustion, or difficulty responding to the child's needs.
- Changes in who is living in or regularly spending time in the home.
- Medication, supervision, sleeping arrangements, or other conditions that raise questions.
- Differences between what is being reported and what the Resource Specialist observes.

How would you distinguish between an observation that should simply be documented and one that requires follow-up or immediate action?

- Consider whether the situation affects or could affect the child's immediate safety or well-being.
- Determine whether the concern represents a change from previous visits or an ongoing pattern.
- Consider whether a policy, licensing standard, or requirement may not be met.
- Gather additional information rather than making assumptions based on one observation.
- Determine whether the concern can be addressed through support or follow-up or requires consultation or immediate action.
- Follow applicable policy and supervisory guidance when the appropriate response is unclear.

What would objective documentation look like if what you observed differed from what the caregiver reported?

- Document what the caregiver stated and what was directly observed as separate pieces of information.
- Describe specific behaviors, conditions, statements, and interactions rather than conclusions or opinions.
- Use direct quotes when they provide important context.
- Avoid labels such as “uncooperative,” “unsafe,” or “angry” without describing the observable behavior supporting the description.
- Document additional questions asked, information received, actions taken, and any required follow-up.

Paraphrase:

A quarterly visit requires Resource Specialists to bring several responsibilities together at the same time. They are observing, engaging, gathering information, assessing what that information means, determining whether follow-up is necessary, and creating an objective record of what occurred.

The goal is not simply to determine whether everything “looks okay” during the visit.

Resource Specialists should leave with enough information to answer: Is the child safe? Is this placement meeting the child's needs? What does this family need to continue providing safe and stable care?

Quarterly visits are an important part of your ongoing responsibility as a Resource Specialist to monitor the resource home. These visits provide opportunities for you to maintain engagement with the family, assess the home environment, and ensure continued compliance with licensing requirements.

Internal Procedure 806.1 requires that at least one quarterly contact be unannounced. When you complete an unannounced contact, you must document in the Division's Information Management System that the contact was unannounced. For each quarterly contact, you will complete the CFS-475-B Quarterly Monitoring Checklist and file it in the resource home record. Remember that quarterly monitoring is separate from the annual re-evaluation process, which will be addressed shortly. The annual re-evaluation, which will be discussed shortly, is documented using the CFS-451 Resource Parent Reevaluation and the CFS-475-C Reevaluation Checklist for Resource Home.

As you complete these contacts, remember that your role extends beyond monitoring compliance. Use each visit as an opportunity to recognize the family's strengths, identify changes within the household, address concerns as they emerge, and help promote the continued safety and stability of children placed in the home.

Because each visit provides a different view of the family and home environment, you must be prepared to respond to what you observe and learn during the contact. Quarterly visits do not always unfold exactly as expected. What begins as a routine visit may reveal new information, a family need, a change in household functioning, or a concern that requires further assessment. In our next activity, you will have an opportunity to think through what might actually happen during a quarterly visit and determine what you notice, what you need to know, and what you would do next as the Resource Specialist.

Key Points:

- Quarterly visits assess both safety and placement stability
- Observe, ask questions, and engage with both children and caregivers
- Address concerns early whenever possible
- Objective documentation supports sound decision-making



Activity: What Do You Do Next?

ACTIVITY: WHAT DO YOU DO NEXT?

Time: 15 Minutes

Facilitator Resources: Quarterly Visit Scenarios

Say:

Today, we are going to practice thinking through what you might encounter during a quarterly visit.

Activity Instructions:

- Give each table one scenario- available in facilitator resources to cut out.
- Ask groups who had the corresponding scenarios the questions below.

Scenario 1: What do you do?

During a scheduled quarterly visit with a traditional resource family, the Resource Specialist meets with Mr. and Mrs. Carter, who are caring for 9-year-old Jordan. The caregivers report that things are “going pretty well,” but explain that Jordan has recently become more argumentative and has difficulty settling down at bedtime. Mrs. Carter says, “We’ve had to get stricter with him because he just doesn’t listen.” During the visit, the Resource Specialist notices Jordan becomes quiet when discipline is discussed and avoids looking at the caregivers. When asked how things are going, Jordan responds, “It’s okay. I just try not to get in trouble.” The Resource Specialist also notices that a previously approved bedroom is now being used for storage, and Jordan reports that he has been

sleeping on the couch for the past two weeks because relatives are temporarily staying in the home.

Facilitator Questions:

- What additional information would you gather?
- Does this require immediate action?
- How would you document this?
- What follow-up would you complete?

Facilitator Answers: (Responses may vary)

Paraphrase:

A quarterly visit can begin as a routine contact and quickly present information that requires the Resource Specialist to look more closely. As you work through this scenario, avoid jumping immediately to a conclusion. Consider what you know, what you observed, what you still need to learn, and what policy or standards may guide your next steps.

Scenario 2: What do you notice?

During a quarterly visit with a kinship resource family, the Resource Specialist visits Ms. Taylor, who is caring for her 7-year-old niece, Ava. Ms. Taylor reports that Ava is doing well and that there have been no major concerns. While walking through the home, the Resource Specialist notices that the smoke detector in the hallway has been removed because, according to Ms. Taylor, “it kept beeping.” The Specialist also observes several cleaning products stored in an unlocked cabinet under the kitchen sink. Ms. Taylor states that she has been meaning to replace the smoke detector batteries and usually reminds Ava not to get into the cabinet.

Facilitator Questions:

- What concerns do you identify?
- Can these be corrected today?
- What documentation is needed?
- Would additional follow-up be required?

Facilitator Answers: (Responses may vary)

Paraphrase:

As you can see, not every concern identified during a quarterly visit requires the same response. Some concerns may be corrected while you are still in the home, while others may require additional follow-up or continued monitoring. Remember, even when a concern is corrected during the visit, your responsibility does not end there. You still need to document what you observed, how the concern was addressed, and whether any additional follow-up is needed

Scenario 3: Supporting Placement Stability

During a quarterly visit with a traditional resource family, Mr. and Mrs. Lewis share that caring for 13-year-old Malik has become more challenging over the past several weeks. Malik has begun refusing household routines, arguing about limits, and asking frequently when he will be able to return home. Mrs. Lewis says, “We care about him, but we’re exhausted and starting to wonder if we can keep doing this.” Malik tells the Resource Specialist that he likes the family but feels that “nobody understands why I’m upset.” The caregivers have not requested that Malik be removed from the home but say they need help.

Facilitator Questions:

- What do you explore?
- What support could you offer?
- How might this affect placement stability?

Facilitator Answers: (Responses may vary)

Paraphrase:

It is important to pay attention to what both the child and the resource family are communicating. In this scenario, the caregivers are expressing that they are becoming overwhelmed, while Malik is sharing that he does not feel understood. These are opportunities for you to ask additional questions, better understand what is contributing to the challenges, and identify supports that may be helpful. Quarterly visits allow you to recognize changing needs, address concerns as they emerge, and work with the family to support the child and maintain placement stability.

Debrief Facilitator Questions:

- Which concern required immediate action?
- Which required coaching?
- Which required documentation?
- How would you prioritize your next steps?

Facilitator Answers: (Responses may vary)

Which concern required immediate action?

- The safety concerns in the home, such as the missing smoke detector and unsecured cleaning products, require the most immediate attention. The Resource Specialist should address conditions that could pose a direct safety risk and determine whether they can be corrected during the visit.

Which required coaching?

- The resource family experiencing difficulty responding to Malik’s behaviors and emotions presents an opportunity for coaching and support. The Resource Specialist could help the caregivers consider what may be contributing to Malik’s behavior, identify strategies for responding to his needs, and explore additional supports that could reduce caregiver stress and strengthen placement stability.

Which required documentation?

- Each situation requires documentation. The Resource Specialist should objectively document what was observed, what the child and caregivers reported, concerns identified, actions taken during the visit, supports or guidance provided, and any follow-up that is needed. Documentation should clearly distinguish between direct observations and information reported by others.

How would you prioritize your next steps?

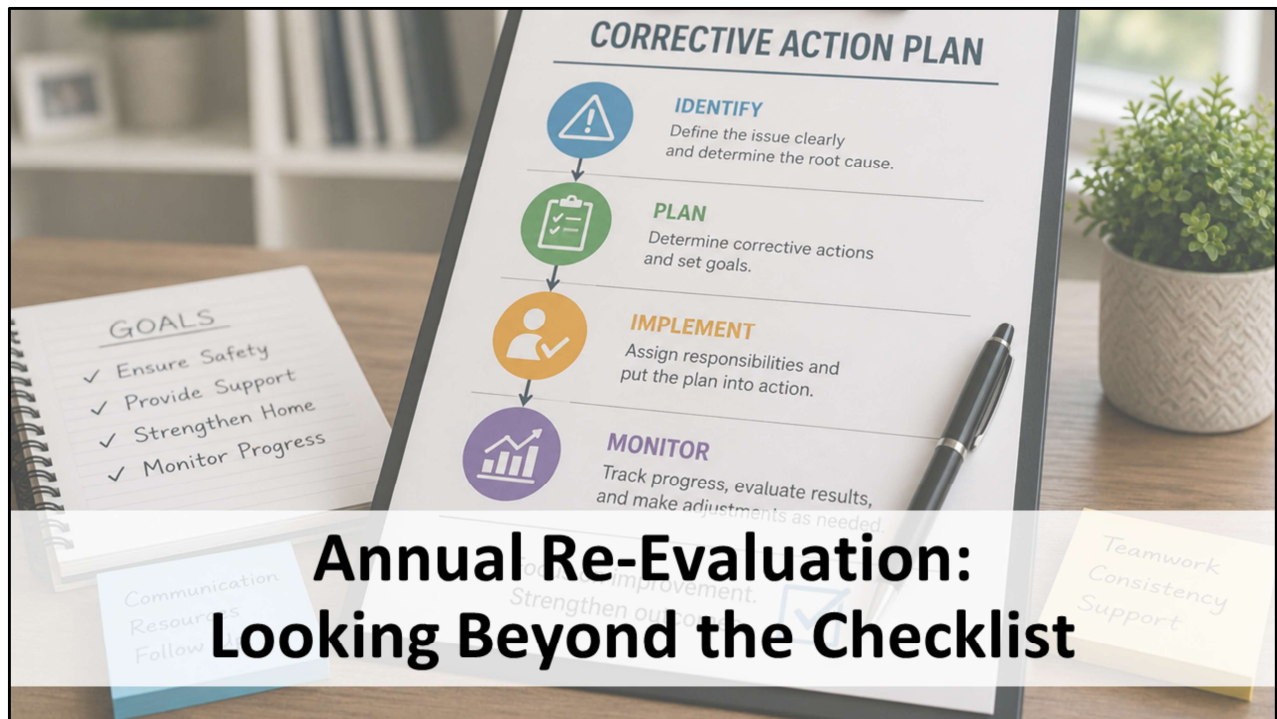
- Begin with anything that affects the child's **immediate safety**. Once immediate safety concerns have been addressed, determine whether there are other policy or standards-related concerns requiring action. Next, address emerging child or caregiver needs that could affect the child's well-being or placement stability. Finally, ensure that actions, decisions, and required follow-up are documented and completed within appropriate timeframes.

Paraphrase:

As you worked through these situations, you probably noticed that a quarterly visit could present several different needs at the same time. Your job is to determine what requires your attention first and what response is appropriate. Safety comes first, but your assessment does not stop once an immediate concern has been corrected. You may also need to coach the family, connect them with support, gather additional information, document what occurred, and follow up to make sure concerns have been resolved. The goal is to leave the visit with a clear understanding of what is happening in the home, what the child and family need, and what you need to do next.

Say:

Quarterly visits provide Resource Specialists with ongoing information about how the family is functioning throughout the year. Those observations and conversations become especially important when it is time to step back and complete a more comprehensive review of the resource home.



ANNUAL RE-EVALUATION

Time: 5 Minutes

Purpose: To view the resource family's continued ability to meet requirements, identify changes in the household, assess strengths and needs, and complete required documentation.

Say:

Annual re-evaluations provide an opportunity to step back from the ongoing monitoring that occurs during quarterly visits and take a more comprehensive look at the resource family's continued readiness to provide care.

As the Resource Specialist, you are bringing together information gathered throughout the year to determine what has changed, what has remained consistent, and whether those changes affect the family's ability to meet the needs of children placed in the home.

The re-evaluation also allows you to identify areas of growth, recognize new or emerging needs, verify that requirements continue to be met, and address issues that may require additional support or attention. Rather than viewing the annual re-evaluation as simply renewing a resource home, think of it as an opportunity to consider

the full picture of the family and their continued capacity to provide safe, stable, and appropriate care.

Facilitator Question:

A resource family has met the required items for their annual re-evaluation, what else would you want to know before determining that the family continues to be able to provide safe and stable care?

Facilitator Answers: *(Responses may vary)*

- Invite participants to share a few responses. Possible areas they may identify include:
 - Changes in family relationships or household composition
 - Caregiver stress
 - The family's experience with placements over the past year
 - New support needs
 - Changes in the home environment
 - Training needs
 - The family's willingness and ability to continue meeting the needs of children in care.

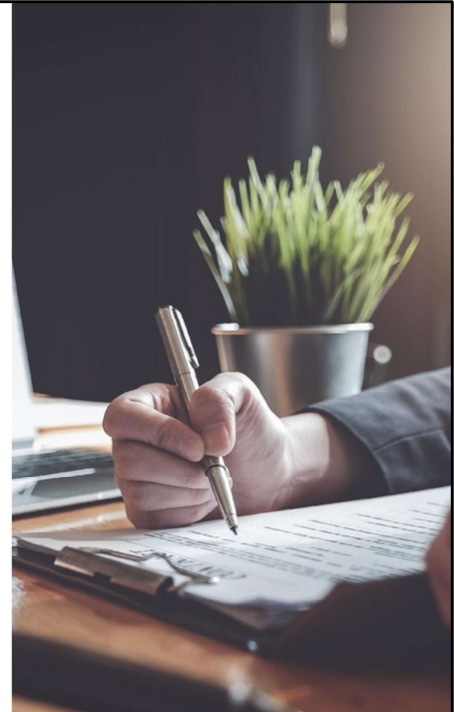
Paraphrase:

Completing the required items is an important part of the annual re-evaluation, but the process should also help you understand how the family has changed and grown over the past year. As we review the expectations for annual re-evaluations, think about how each requirement helps you build a more complete picture of the family's continued ability to serve as a resource home

With that purpose in mind, let's take a closer look at the expectations of the annual re-evaluation and what Resource Specialists are responsible for reviewing, assessing, and documenting as part of that process.

Annual Re-evaluation

- Review ongoing licensing compliance.
- Complete required background checks.
- Update household information.
- Identify training needs.
- Address deficiencies promptly.



ANNUAL RE-EVALUATION

Time: 5 Minutes

Purpose: Help participants recognize common issues identified during annual re-evaluations and determine appropriate follow-up actions to maintain compliance and child safety

Say:

Annual re-evaluations require Resource Specialists to use attention to detail and professional judgment to ensure that important changes or concerns are identified and appropriately addressed.

As part of the process, Resource Specialists must review ongoing licensing compliance, ensure required background checks are completed, update household information, identify training needs, and promptly address any deficiencies that are discovered.

You must also recognize when changes within a resource family require you to take a closer look at the home. A reevaluation is required when a major life change occurs, including the death or serious illness of someone in the resource family; marriage, separation, or divorce; loss of or change in employment; a change in residence; suspected child maltreatment involving any child in the resource home; or the addition of a family member through birth, adoption, or circumstances such as an aging relative moving into the home. When you become aware of one of these changes, consider how

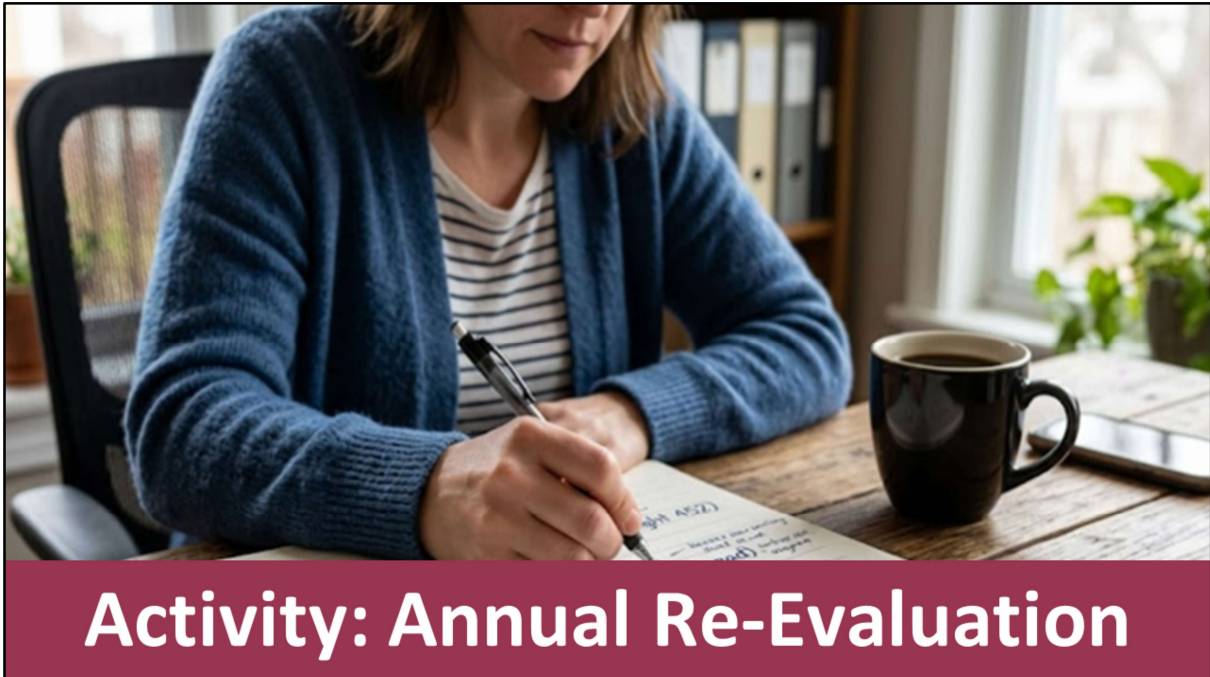
it may affect the family's circumstances, household functioning, and ability to continue meeting the needs of children in their care, and take the appropriate steps to complete the required reevaluation.

In addition, it is important that everything is documented. If a re-evaluation is not completed and documented annually CHRIS, any Title IV-E eligible child placed in that home could lose claim ability until the family's evaluation and all required documentation are completed. The annual re-evaluation is documented using the CFS-451 Resource Parent Reevaluation and the CFS-475-C Reevaluation Checklist for Resource Home.

Now, we will apply these expectations to several re-evaluation scenarios.

Key Points:

- Annual re-evaluations ensure resource homes continue meeting minimum licensing standards, similar to quarterly visit expectations
- Household changes must be assessed promptly
- Required updates during reevaluation include checks of the child maltreatment registry and state criminal background checks
- Thorough documentation protects children and the Division



Activity: Annual Re-Evaluation

ACTIVITY: ANNUAL RE-EVALUATION CHALLENGE

Time: 15 Minutes

Facilitator Resource: Annual Re-evaluation Scenarios

Say:

Today, we are going to practice thinking through what you might encounter during a re-evaluation.

Activity Instructions:

- Give each table one scenario- available in facilitator resources to cut out.
- Ask groups who had the corresponding scenarios the questions below.

Scenario 1: A Change in the Household?

During an annual re-evaluation of a kinship resource home, the Resource Specialist learns that Ms. Green's adult son, Marcus, moved into the home approximately six weeks ago. Marcus was not previously a member of the household and has not completed the required background checks. Ms. Green is currently caring for her 6-year-old granddaughter and reports that Marcus helps with transportation and occasionally supervises the child when she works late. She explains that she did not realize she needed to notify the Resource Specialist because Marcus is her son and

had lived in the home in the past.

Facilitator Questions:

- What must happen?
- What documentation is required?
- Can placements remain in the home?

Facilitator Answers: (Responses may vary)

Paraphrase:

This scenario reminds us that a re-evaluation may uncover a change that requires more than updating information on a form. As the Resource Specialist, you must recognize how that change connects to requirements, determine what needs to happen next, and consider whether there are implications for the child currently placed in the home. When the answer is not immediately clear, avoid making assumptions and identify the requirement, gather the necessary information, and follow the appropriate policy and consultation process before determining the next step.

Scenario 2: Looking Beyond the Change?

During an annual re-evaluation of a traditional resource home, the Resource Specialist learns that Mr. and Mrs. Davis have experienced several changes during the past year. Mrs. Davis recently changed jobs and now works evenings, while Mr. Davis has assumed more responsibility for caring for the two children placed in the home. The family reports that the new schedule is working well. However, the Resource Specialist notices that the children's transportation arrangements have changed and learns that a family friend has regularly been helping with transportation and after-school care.

Facilitator Questions:

- What do you review?
- Who do you consult?
- What additional information is needed?

Facilitator Answers: (Responses may vary)

Paraphrase:

This situation demonstrates why a change that initially appears routine may require you to look a little deeper. During a re-evaluation, your responsibility is to understand how changes within the family affect the day-to-day care of children in the home. Review what you already know, identify what you still need to learn, and consult the appropriate individuals when additional guidance is needed before completing the re-evaluation.

Scenario 3: An Unmet Requirement

During an annual re-evaluation of a kinship resource home, the Resource Specialist reviews the record and discovers that Ms. Jackson has not completed all required training hours for

the current approval period. Ms. Jackson explains that she missed two scheduled trainings because of changes in the child's appointments and her work schedule. She remains willing to complete the training and asks whether she can make up the missing hours. No other concerns have been identified during the re-evaluation.

Facilitator Questions:

- What action is required?
- Can this be corrected?
- What timeline applies?

Facilitator Answers:

What action is required?

- Notify Ms. Jackson that she has not met the annual in-service training requirement and must complete the missing training hours.
- No additional children may be placed in the home while the training requirement remains incomplete.

Can this be corrected?

- Yes. Ms. Jackson may complete the missing training hours to correct the deficiency.
- Since no other concerns were identified, the focus should be on bringing her training requirements into compliance.

What timeline applies?

- Ms. Jackson has 60 calendar days from the date of notification to complete the missing training hours.
- If additional time is needed, an exception of up to 60 additional calendar days may be requested from the Area Manager.
- If the training becomes more than 60 calendar days overdue without an approved extension, a reevaluation is required.

Paraphrase:

Resource parents are required to maintain current CPR and standard first aid certifications and to complete the required annual in-service training. Hours used to obtain or maintain CPR and first aid certification cannot be counted toward the six hours of required annual in-service training. When circumstances prevent a resource parent from completing the required training within the initial 60-calendar-day period, Internal Procedure 806.2(G) allows the Area Manager to approve an exception of up to 60 additional calendar days. Extensions should be reserved for circumstances that warrant additional time and should be the exception rather than the standard practice.

This is where knowing the requirement is only the beginning. Once you identify a deficiency, you must determine whether it can be corrected, what action is required, and how much time is allowed to address it. Avoid creating a timeline based on what seems reasonable.

Use the applicable policy or standard to guide your response, clearly communicate the expectation to the family, and document both the deficiency and the steps required to resolve it.

Debrief Facilitator Questions:

- Which concerns affect safety?
- Which affects compliance?
- Which require immediate follow-up?

Facilitator Answers: *(Responses may vary)*

Which concerns affect safety?

The household and caregiving changes may have potential safety implications because an adult who had not completed required background checks was living in the home and providing supervision. The regular involvement of a family friend in transportation and after-school care also requires further exploration to determine whether the arrangement meets requirements and whether appropriate safeguards are in place.

Which concerns affect compliance?

Compliance concerns include the unreported change in household composition, incomplete background checks, changes in caregiving arrangements that may require approval or additional documentation, and incomplete required training hours. Each should be reviewed against the applicable policy or licensing standard to determine what is required.

Which concerns require immediate follow-up?

The highest priority is information that could affect a child's current safety, including the presence of an adult household member without completed background checks and any unverified supervision or caregiving arrangements. These concerns should be addressed promptly using applicable policy and supervisory consultation. Training deficiencies also require follow-up, but the required response and timeframe should be based on the applicable standard.

Paraphrase:

In reviewing these scenarios, you saw that not every issue discovered during a re-evaluation carries the same level of concern or requires the same response. Your responsibility is to determine what affects safety, what affects compliance, and what requires immediate attention. Some issues may be corrected through additional documentation, training, or updates, while others may require consultation or further assessment before you can move forward. The important piece is not simply identifying that something has changed or is missing, it is recognizing what that information means, what requirement applies, and what needs to happen next before completing the re-evaluation.

Say:

Most re-evaluations will confirm that a family continues to meet expectations. At times, however, a visit or re-evaluation may identify an area that requires improvement. When a concern can be addressed while safely maintaining the home, the Resource Specialist may need to move from assessment to corrective action.

Annual Re-evaluation Scenarios

Scenario 1

The resource parent is recently married. The new spouse has lived in the home for one month. No one notified DCFS.

Scenario 2

Background checks return with new information.

Scenario 3

The home remains safe; however, the required annual CEU hours have not been completed.

Scenario 1

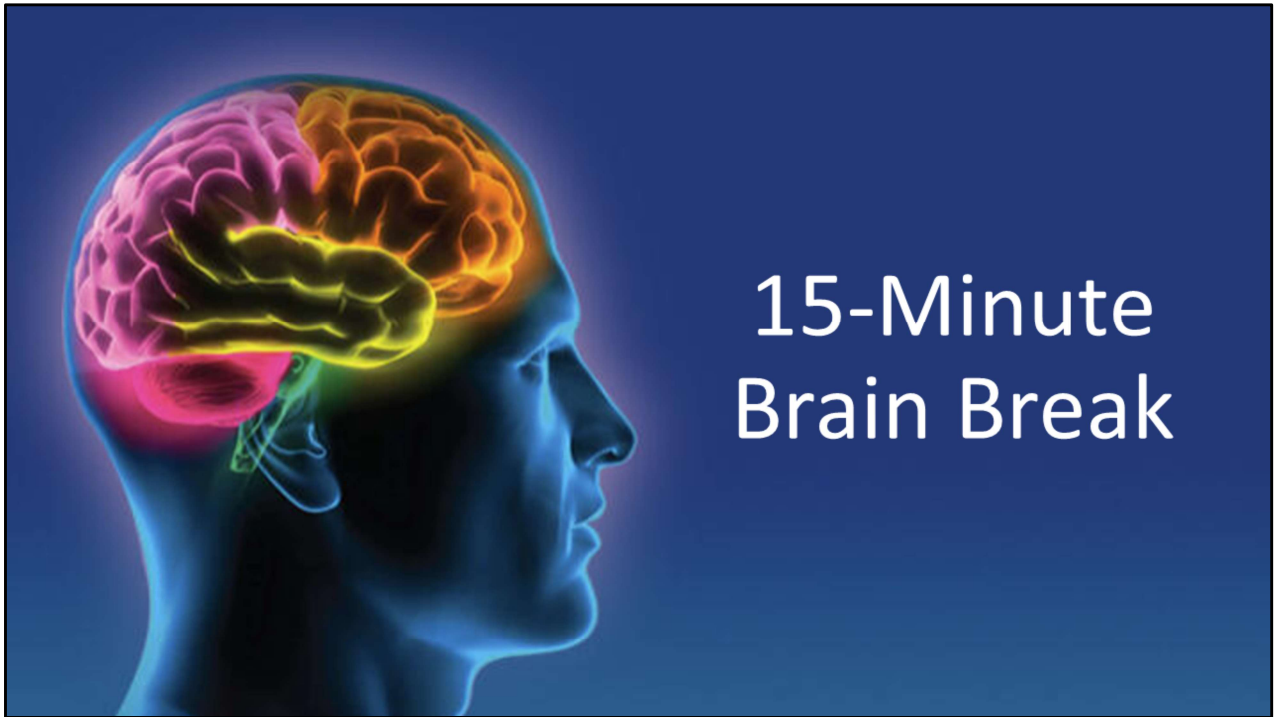
The resource parent is recently married. The new spouse has lived in the home for one month. No one notified DCFS.

Scenario 2

Background checks return with new information.

Scenario 3

The home remains safe; however, the required annual CEU hours have not been completed.



15-Minute Brain Break

BRAIN BREAK



Corrective Action Plan

CORRECTIVE ACTION PLAN

Time: 5 Minutes

Purpose: To assist Resource Specialist with identifying concerns, establishing clear expectations, developing measurable actions, monitoring progress, and documenting outcomes.

Say:

Corrective action provides a structured way for Resource Specialists to move from identifying a concern to establishing a clear path toward resolution.

In this role, the Resource Specialist must

- *Determine the nature and significance of the concern*
- *Clearly communicate what must change*
- *Ensure expectations are specific and achievable*
- *Maintain accountability as the family works toward correction.*

This includes distinguishing between concerns that can be addressed through planned corrective action and circumstances that may require a more immediate response to protect a child.

Effective corrective action is not simply about identifying noncompliance; it is about ensuring concerns are addressed in a way that supports the resource family's ability to provide safe, consistent care while preventing unresolved issues from jeopardizing placement stability.

Paraphrase:

Think about a time when you identified a concern and had to help someone make a change.

Facilitator Question:

- How did you decide what needed to change?
- How did you communicate your expectations?
- How did you determine whether the concern had been resolved?

Facilitator Answer: *(Responses may vary)*

Next, we will examine when a corrective action plan may be necessary in a resource home and how it supports child safety and placement stability.

Corrective Action Plan

- Not every concern is a safety threat.
- Match the response to the concern.
- Prioritize child safety.
- Follow required approval processes.
- Document all actions thoroughly.

A sample 'CORRECTIVE ACTION PLAN' form is shown on a wooden desk. The form is white with blue headers and footers. It includes sections for: 1. IDENTIFIED CONCERN (Describe the concern or issue), 2. PLAN OF CORRECTION (Actions the Resource Home will take to address the concern, Target Date), 3. SUPPORT/RESOURCES PROVIDED (Describe the support, resources, or referrals provided), 4. FOLLOW-UP AND MONITORING (How progress will be monitored, Review Date(s)), and 5. OUTCOMES (Expected outcomes). At the bottom, there are lines for Resource Home Signature, Date, Resource Specialist Signature, and Date. The form is surrounded by a blue folder, a small potted plant, a black pen, and a yellow notepad.

CORRECTIVE ACTION PLAN

Time: 10 Minutes

Purpose: To explain when corrective action plans may be necessary in a resource home and how it supports child safety and placement stability.

Say:

Not every concern in a resource home requires the same response. Some concerns can be corrected immediately, but some require a corrective action plan. Your responsibility is to assess the concern, gather information, consult appropriately, and determine the correct next step.

Paraphrase:

- If, during the re-evaluation process or at any other point, a resource home is found to be out of compliance with licensing standards or division policies and does not return to compliance within the required timeframe, a corrective action plan must be implemented.
- Failure to comply with the corrective action plan can result in the closure of the resource home.
- Corrective action plans should not exceed sixty days. If closure of the home becomes necessary, written notice must be provided, including information on

the internal review process.

Key Points:

- Not every incident in a resource home results in an immediate safety threat, but concerns may still require intervention
- Concerns involving resource parents or household members may lead to a corrective action plan or an immediate safety plan to help the child remain safely in the home
- All unsubstantiated reports involving resource homes must be reviewed by the Resource Family Review Committee

1. No Action
2. Corrective Action Plan



ACTIVITY: You Make The Call

ACTIVITY: YOU MAKE THE CALL

Time: 10 Minutes

Purpose: To strengthen participants' ability to recognize concerns within a resource home, evaluate the information presented, and determine whether a corrective action plan is necessary based on the nature of the concern, its impact on child safety and well-being, and applicable requirements.

Say:

I am going to read 5 brief scenarios, and you will determine if it requires no-action or a corrective action plan.

Activity Instructions:

- Read each of the following Scenarios and ask participants as a group if they would recommend either of the actions listed on the slide.
- For each scenario, would you recommend:
 - No action
 - Corrective action plan

Facilitator Questions:

1. During a re-evaluation, you discover that a resource parent is missing several required training hours. The caregiver acknowledges the requirement and is

- willing to complete the training.
2. During a quarterly visit, you notice medication sitting on a kitchen counter accessible to a young child. The caregiver immediately secures the medication when you point it out.
 3. During a home visit, you observe an unsecured firearm in a location accessible to the children in the home.
 4. You notice that the resource home is cluttered with laundry, toys, and household items. Walkways and exits are clear, food is available, utilities are working, and you observe no immediate hazards to the children.
 5. An allegation of child maltreatment involving a resource parent has been accepted for investigation. Two children remain placed in the home while the investigation is pending.

Facilitator Answers:

1. During a re-evaluation, you discover that a resource parent is missing several required training hours. The caregiver acknowledges the requirement and is willing to complete the training.
 - **Corrective Action: The resource parent is not meeting an established requirement. A plan can identify the deficiency, required training, timeframe for completion, and follow-up.**
2. During a quarterly visit, you notice medication sitting on a kitchen counter accessible to a young child. The caregiver immediately secures the medication when you point it out.
 - **No Action: The concern was identified and corrected immediately. The Resource Specialist should still document the observation, correction, and any needed follow-up. A repeated pattern could change the response.**
3. During a home visit, you observe an unsecured firearm in a location accessible to the children in the home.
 - **Corrective Action: The condition presents an immediate safety concern. Securing the firearm takes priority. Once immediate safety is addressed, required procedures should be followed to address the violation and prevent recurrence.**
4. You notice that the resource home is cluttered with laundry, toys, and household items. Walkways and exits are clear, food is available, utilities are working, and you observe no immediate hazards to the children.
 - **No Action: Clutter alone does not necessarily constitute a safety or compliance concern. Continue to observe and assess rather than imposing corrective action based on housekeeping preferences.**
5. An allegation of child maltreatment involving a resource parent has been

accepted for investigation. Two children remain placed in the home while the investigation is pending.

- **No Action:** An accepted allegation does not establish that maltreatment occurred and does not, by itself, require a Corrective Action Plan (CAP). However, immediate action is still required while the allegation is investigated. In accordance with Internal Procedure 404.1, at the direction of the Area Manager or designee, the Resource Specialist must classify the resource home as “unavailable” in the Division’s Information Management System immediately, but no later than the next business day. This prevents additional children from being placed in the home while the investigation is pending. The Resource Specialist must follow required investigative and child-safety procedures, assist in monitoring any Immediate Safety Plan, consult as required, and document actions taken. A CAP is not required solely because an allegation has been accepted; however, the investigation's findings may later support corrective action. If minimum licensing noncompliance is identified, the Resource Specialist develops a CAP to address the identified deficiency.

Facilitator Debrief Questions:

- Why did you choose that response?
- What additional information would you gather?
- Which situations require immediate action?
- When should a supervisor be involved?

Facilitator Debrief Answers: *(Responses may vary)*

Say:

Developing a corrective action plan is only part of the process. Resource Specialists must also be prepared to communicate concerns clearly while preserving a productive working relationship with the family. This often requires navigating conversations that may be uncomfortable or difficult.



DIFFICULT CONVERSATIONS

Time: 2 Minutes

Purpose: To help Resource Specialist communicate concerns professionally, use strengths-based language, set expectations, respond to resistance, and maintain boundaries.

Say:

Difficult conversations are an important part of the Resource Specialist's responsibility to both support resource families and maintain expectations for the care of children placed in their homes.

At times, Resource Specialists must address concerns related to policy, licensing standards, caregiving practices, household changes, or other situations that may affect a child's safety, well-being, or placement stability. Avoiding or delaying these conversations can allow concerns to continue or become more difficult to resolve.

The goal is not to create conflict, but to communicate concerns clearly and respectfully, connect expectations to their purpose, listen to the family's perspective, and establish a shared understanding of what needs to happen next.

Addressing challenging issues directly gives resource families the opportunity to

understand the concern, consider its impact, and make necessary changes in their caregiving practices. These conversations also allow Resource Specialists to clarify expectations, reduce misunderstandings, and work toward solutions before concerns become more serious or interfere with the family's ability to provide appropriate care.

Paraphrase:

Think about a difficult conversation you have had.

Facilitator Question: What made you decide to address the issue rather than avoid it, and what influenced how you approached the conversation?

Facilitator Answer: *(Responses may vary)*

Difficult Conversations



Difficult conversations are not simply about pointing out what is wrong or reminding a family of a policy or standard.

It is about helping resource parents understand why those expectations matter to child safety and well-being.

DIFFICULT CONVERSATIONS

Time: 20 minutes

Purpose: To demonstrate how to have difficult conversations in an empathetic and clear way.

Participant Manual: Difficult Conversations Scenario, Pub-30: Resource Parent Handbook (Page 33 From Minimum Licensing Standard Sleeping Arrangement)

Say:

We may have approached our work with the assumption that the prospective family would move forward toward approval. However, not every family who begins the process will meet the requirements to become an approved resource home.

When concerns affect a family's ability to provide safe and appropriate care, Resource Specialists may need to communicate a decision the family does not want to hear. These conversations require us to be clear about the concerns and expectations while remaining respectful of the family and the relationship we have established.

Our responsibility is not to avoid disappointment or disagreement, but to ensure that

decisions remain grounded in the safety and needs of the children we serve.

Facilitator Note:

Have the Resource Specialist turn to the Difficult Conversations Scenario in their Participant Manual. Allow 2-3 minutes for the Resource Specialist to read through the scenario and answer the question.

Say:

Now that you have become more familiar with Glenda and her circumstances, let's put those skills into practice and consider how you would approach this difficult conversation with her.

Facilitator Questions:

- What are some of Glenda's strengths?
- Does Glenda have any identified support systems?
- How would you tell Glenda that she is not able to be a relative placement for her grandchild unless she moves herself into a smaller bedroom? (Allow 2-3 specialists to share)

Facilitator Answers: *(Responses may vary)*

- She has an existing relationship with all four children and is willing to provide care for them. She appears protective of her grandchildren and concerned about their well-being.
- Yes. Glenda has several identified support systems, including: her sisters Gail and Gladys, with whom she maintains regular contact. Gladys lives only a few blocks away and could provide nearby assistance.
- I appreciate your willingness to care for your grandchildren and the commitment you have shown to helping them during this difficult time. Based on the home's current bedroom arrangement and licensing requirements, there is not enough bedroom space to safely accommodate all four children while you remain in the larger bedroom. One option that would allow us to continue considering your home for placement would be for you to move into the smaller bedroom and make the larger bedroom available for the children. If you are willing to explore that option, we can discuss how the space might be arranged and what additional steps would be needed to move forward with the placement process.

Paraphrase:

As previously mentioned, difficult conversations can be uncomfortable to have, so here is an example of what one might say: Ms. Glenda, I want to first thank you for your willingness to step forward and care for your grandchildren. It's clear that you care deeply about them and want to support your family during this time. As part of our process, we have to carefully assess both the appropriateness of the placement and whether the home environment meets safety and space requirements for all children.

Based on our review, the current bedroom arrangement does not meet the necessary standards to safely accommodate all four children. Specifically, in order for the home to meet placement requirements, adjustments would need to be made to the sleeping arrangements, which would include you relocating to the smaller bedroom so the children can be appropriately housed. At this time, without those changes in place, we're unable to approve the home for placement.

I want to be transparent that this decision is not a reflection of your care or commitment to your grandchildren. If you are open to making the necessary changes, we would be happy to reassess the home. Additionally, we can continue to explore other ways for you to remain involved and supportive in their lives. Do you have any questions, or would you like to talk through what those next steps could look like?

Facilitator Note: Additionally, another route that could be taken is to request a from the licensing standard (209.1). Instruct participants to review page 33 titled Sleeping Arrangements for more detailed information.

Say:

Having a difficult conversation is not simply about pointing out what is wrong or reminding a family of a policy or standard. It is about helping resource parents understand why those expectations matter to child safety and well-being. Policies and standards provide the framework for safe care, but the conversation should connect those requirements to the child behind them. When concerns arise, Resource Specialists must communicate clearly, address the issue directly, and help families understand how their actions can affect a child's safety, stability, and overall well-being.

Strong communication skills are also essential when discussing specific caregiving responsibilities. One area where expectations, documentation, and child safety must be clearly understood is medication management



MEDICATION

Time: 3 Minutes

Purpose: To prepare Resource Specialists to guide resource parents in the safe management of medications and take appropriate steps when medication practices do not align with established requirements.

Say:

Medication management is an important area of oversight because errors in how medications are stored, administered, recorded, or monitored can directly affect a child's well-being. Resource Specialists play a key role in helping resource parents understand what is expected of them, recognizing practices that may create concerns, and determining when additional guidance or intervention is necessary.

This requires Resource Specialists to pay attention not only to whether medications are present in the home, but also to how families manage them as part of the child's daily care. When expectations are not met, the Resource Specialist must assess the circumstances, clarify requirements, and ensure that appropriate steps are taken to address the issue.

As we move into this section, we will look more closely at medication-related

responsibilities and what Resource Specialists should know, observe, and address when supporting resource families.

Medication Assessment

- Frequency and timing of use
- Use in the presence of children
- Storage and accessibility
- Presence of additional caregivers



MEDICATION ASSESSMENT

Time: 10 Minutes

Purpose: To help specialists understand how to assess medication use in the resource home.

Say:

When we discuss medication in a resource home, there are two perspectives to consider: medications used by the resource parent and those prescribed to a child who may be placed in the home. A resource parent's use of prescribed or over-the-counter medication, medical marijuana, alcohol, or other legal substances does not, by itself, determine whether that person can serve as a resource parent. The focus of your assessment is the effect on caregiving. You need to understand whether use could interfere with the caregiver's ability to provide appropriate supervision, recognize and respond to a child's needs, make sound decisions, or act effectively during an emergency. You should also consider how medications and other substances are stored, whether children could access or be exposed to them, and what plan is in place if the caregiver becomes unable to safely provide care.

Now consider medication from the child's perspective. A child entering the resource home may already take one or more medications and depend on the resource parent to manage them safely and consistently. The Resource Specialist should consider whether the caregiver understands the child's medication needs, knows how and when medications are to be administered, follows requirements for safe storage and documentation, and understands what to do if a dose is missed, a medication error occurs, or the child experiences a concerning reaction. The family may also need guidance in understanding that medication management is part of meeting the individual needs of the child, not simply another household task.

These two perspectives bring us back to the Resource Specialist's assessment role. Rather than focusing only on whether medication is present in the home, consider what you need to know about how medication could affect caregiving and how the family will safely manage a child's medication needs. As you conduct an in-home consultation or work with an approved resource family, assessment-focused questions can help you gather that information and identify areas that may require further discussion or support.

Paraphrase:

When assessing medication, Resource Specialists should consider the full context of the caregiver's use rather than focusing only on the medication or substance itself.

- Frequency and timing can help determine whether use occurs during periods when the caregiver is responsible for supervision or transportation.
- Use in the presence of children should be explored to understand whether children could be exposed or whether caregiving responsibilities could be affected.
- Storage and accessibility are important for determining whether medications are secured appropriately and kept out of children's reach.
- The presence of additional caregivers should also be considered, particularly when medication use could affect the primary caregiver's ability to respond to a child or an emergency.

Together, these areas help the Resource Specialist consider whether there are any circumstances that could affect the overall safety of the home. Think about these assessment areas.

Facilitator Questions:

- **What questions could you ask a potential or current resource parent that would help you gather the information you need without making assumptions or sounding judgmental?**

Facilitator Answers: *(Responses may vary)*

Facilitator Questions:

- How often do you take or use this, and at what times?

- How does it affect you after you take or use it?
- What is your plan for supervising children during that time?
- Where is it stored, and how is it secured from children?
- Who else is available to provide care if you are unable to safely supervise, transport, or respond to an emergency?
- Have you noticed any effects that could interfere with your ability to meet a child's needs?

Say:

The goal is not to determine whether a caregiver uses medication, but whether they can safely, consistently, and appropriately supervise and meet the needs of the children that are placed in their home.

Key Points: (ensure these are covered)

- Assessment-focused questions help gather information without making assumptions
- Applicants must disclose all prescriptions and OTC medications used in the home



Medication and Its Impact

- Child safety
- Supervision
- Caregiver functioning
- Ability to respond to the child's needs

MEDICATION AND IT'S IMPACT

Time: 5 Minutes

Purpose: To help specialists understand how to assess medication and substance use during home studies

Say:

When considering medication use in a resource home, the primary concern is how it may affect the caregiver's ability to provide safe and responsive care. Some medications may cause side effects such as drowsiness, slowed reaction time, dizziness, confusion, or changes in alertness that could affect supervision, transportation, decision-making, or the caregiver's response during an emergency.

Resource Specialists should consider whether the caregiver can remain attentive to the child's behavior and surroundings, recognize changes in the child's physical or emotional needs, and respond appropriately when support or intervention is needed. Additionally, when assessing, focus on the caregiver's actual functioning and the safeguards in place, rather than making assumptions based solely on the fact that a medication has been prescribed or taken.

Ultimately, the question is whether medication use, its effects, and the family's plan for managing those effects allow the caregiver to consistently meet the child's needs and maintain a safe environment. Making that determination is one example of how Resource Specialists must gather information, communicate with families, and work with others to support informed decisions.

That same need for coordination becomes especially important as a child's circumstances and permanency plan change. When adoption becomes part of the permanency process, collaboration between Resource Specialists and Adoption Specialists helps create continuity, clarify responsibilities, and provide families with consistent information and support throughout the transition.

Key Points:

- Assess caregiver functioning, not medication use alone.
- Consider the impact on supervision and responsiveness.
- Ensure safeguards are in place to protect the child.



COLLABORATION

Time: 4 Minutes

Purpose: To help Resource Specialists understand the importance of working collaboratively with other staff, such as Adoption Specialist staff to maintain continuity for children and resource families as they move toward permanency.

Say:

Collaboration can shape both the process and the outcome of our work. When people communicate effectively, share relevant information, and understand how their responsibilities connect, they can accomplish things that may be difficult to achieve independently. On the other hand, when communication breaks down, important information can be missed, responsibilities can become unclear, and families may receive inconsistent messages.

Facilitator Question:

Think about a time when you had to work with someone else to accomplish an important goal. What did effective collaboration make possible that would have been more difficult to accomplish on your own?

Facilitator Answer: *(Responses may vary)*

Facilitator Question:

Now consider the opposite: when communication or collaboration broke down between people working toward the same goal. What was the impact, and what could have been done differently?

Facilitator Answer: *(Responses may vary)*

Say:

As a child moves toward permanency, the work often extends beyond the responsibility of one Specialist or program area. Resource Specialists serve as an important connection between the resource family, the child's current placement experience, and the professionals who become involved as the permanency plan progresses.

Collaboration with Adoption Specialist staff helps ensure that important knowledge about the family and placement is carried forward, responsibilities are understood, and changes in the process do not create unnecessary gaps for the child or family.

Working together creates a more coordinated transition and allows each professional to contribute their knowledge and expertise toward the shared goal of permanency.

Collaboration

- Timeframes
- Staffings
- TPR (Termination of Parental Rights)
- Permanency Planning
- Family Team Meetings
- IHC (In-Home Consultation)



COLLABORATING WITH ADOPTIONS

Time: 10 Minutes

Purpose: To emphasize the importance of collaboration between Resource and Adoption Specialists and clarify their roles, responsibilities, and required timelines in support of permanency outcomes

Say:

"One team, one goal" reflects the partnership between Resource and Adoption Specialists. These roles are closely connected and rely on consistent collaboration to support children and families. If you are not already familiar with your counterpart, it is important to build that connection early. Ongoing communication and coordination between Resource and Adoption Specialists is critical to ensuring placements remain secure and stable and ultimately lead to permanency.

Let's look at the Resource Specialist's role in collaborating with the Adoption Specialist as a child moves toward permanency. Resource Specialists have responsibilities that include opening and assessing resource homes, supporting resource families and volunteers, and conducting community outreach to help meet the needs of children and

families. That outreach might include recruiting for a specific need, securing donated items, or identifying community services and resources.

Another important responsibility is recognizing when the Adoption Specialist needs to become part of the case planning process. Bringing the Adoption Specialist in at the appropriate time allows planning to begin before a change in permanency goal occurs and helps prevent gaps in communication and preparation.

Paraphrase:

As we review the key points in the case when collaboration should occur, let's do a quick "When Do You Bring Adoption In?" activity. I will read a case development, and you decide whether it is time to involve the Adoption Specialist and explain why.

Consider these points:

- When reunification services are not required, such as when an expedited TPR hearing is anticipated, the Adoption Specialist should be invited to the second staffing.
- They should also participate in the TPR staffing held 30 days before the TPR hearing, when the Family Case Plan is developed.
- Adoption Specialists should be invited to the 6-, 9-, and 11-month staffing when it appears the child is unlikely to return home or when adoption is the permanency goal.
- When a recommendation is being made to change the goal to adoption, the Adoption Specialist must be notified at least 14 days before the Permanency Planning staffing, so they are prepared to participate.

Activity Instructions:

- Present participants with each statement
- After each statement, ask, "Is it time to involve Adoptions?"

Facilitator Questions:

- The case is approaching the 9-month staffing, and the team believes reunification is becoming unlikely
- A TPR hearing is scheduled in 30 days
- The team plans to recommend changing the goal to adoption at the upcoming Permanency Planning staffing.
- The court determines that reunification services are not required, and the case is moving toward an expedited TPR hearing.
- The case is approaching the **6-month staffing**. Reunification remains the goal, but significant barriers make it increasingly unlikely that the child will return home.

Facilitator Answer:

- Yes. The Adoption Specialist should be invited to the 9-month staffing because there is a likelihood that the child will not return home.
- Yes. The Adoption Specialist should participate in the TPR staffing held 30 days

before the TPR hearing. A Family Case Plan will also be developed during this staffing.

- Yes. The Adoption Specialist must be notified at least 14 days before the Permanency Planning staffing so they can prepare to fully participate in the process.
- Yes. The Adoption Specialist should be invited to the second staffing so adoption planning can begin early in the process.
- Yes. The Adoption Specialist should be invited to the 6-month staffing when there is a likelihood that the child will not return home, even though the goal has not yet formally changed to adoption.

Activity Debriefing:

Say:

What do you notice about these situations? We do not wait until adoption is finalized or even until adoption officially becomes the goal to begin collaborating. Bringing the Adoption Specialist into the process at the required points allows planning to occur earlier, information to be shared, and everyone involved to be better prepared for possible changes in the child's permanency plan.

Key Points:(ensure these are covered)

- Resource Specialists must ensure Adoption Specialists are engaged early when adoptions may become the permanency goal
- Resource Specialists are responsible for opening and assessing homes and supporting resource families.



TRAVEL

Time: 4 Minutes

Purpose: To prepare Resource Specialists to coordinate out-of-state travel and placement requirements, obtain necessary approvals, complete required documentation, and communicate with appropriate parties to support the child's safety and continuity of care across state lines.

Say:

We just discussed collaboration among members of the child's team, but it also becomes important when a child's needs or circumstances require coordination. One situation where that coordination is especially important is when a child in an out-of-home placement will be traveling or placed outside of the state.

The Resource Specialist has a role in ensuring the appropriate parties are informed and required processes are completed before and after the travel occurs. Planning ahead helps prevent delays, ensures necessary approvals are obtained, and keeps everyone involved aware of the child's location and circumstances.

This includes ensuring all appropriate parties are notified, submitting the DHS-1010 at least two weeks in advance and receiving approval, coordinating with the ICPC Central

Office, which is responsible for obtaining travel approvals, and, when a child is placed in the receiving state, submitting the ICPC-100B to the ICPC Central Office for forwarding to the receiving state.

Let's take a closer look at these requirements and how they guide the Resource Specialist's responsibilities when out-of-state travel or placement is involved.

Application for Out-of-State Travel



- ✓ Ensure that all parties are made aware of the travel
- ✓ Submit DHS-1010 two weeks in advance and receive approval

APPLICATION FOR OUT-OF-STATE TRAVEL

Time: 5 Minutes

Purpose: To explain when and how to use the DHS-1010 form for out-of- state travel involving children in foster care or adoptive placements.

Say:

How many of you are familiar with the DHS-1010, known as the “Application for Out-of-State Travel”? It is a document to be used when a request for out-of-state travel is needed for a child in foster care or for any approved adoptive placement, even if it is across state lines. This is even the case in the event of reunification. The form must be completed and approved at least two weeks prior.

Paraphrase:

There are many reasons a trip may need to commence, including, but not limited to, vacationing with their resource family, an out-of-state visit to see a sibling, or attending a funeral. Any travel that promotes a sense of normalcy and connection for children in foster care is highly encouraged and appropriate.

As we close this section, remember that out-of-state travel requires more than knowing where a child is going. It requires advance planning, timely communication, appropriate approvals, and accurate documentation to ensure responsibilities are clear and requirements are met.



Target Outcomes Evaluation

TARGET OUTCOMES EVALUATION

Time: 2 minutes

Purpose: To assess the learning outcomes for this training day

Say:

Throughout today, we have explored responsibilities that Resource Specialists will encounter as they work with resource families from quarterly visits and annual re-evaluations to corrective action, difficult conversations, medication management, collaboration, and out-of-state travel. Over the past few days we have moved from discussing the Resource Specialist's responsibilities to seeing how the work is completed in practice. As we prepare to wrap up our training and complete our end of specialty evaluation and post test assessment let's take a few minutes to share two key takeaways from this week's training that will help you in your role as you transition into your role as a Resource Specialist.

Facilitator Note: Before ending the day, direct participants to the QR code on the slide. Participants will need to use their phones to scan the code to complete the section target outcomes evaluation in Qualtrics.



RESOURCE POST TEST KAHOOT REVIEW AND RECAP

Time: 15 Minutes

Purpose: To connect all of the Resource Specialty concepts and target outcomes

NST RESOURCE REVIEW LINK

https://kahoot.it/?pin=639144&refer_method=link

Game PIN: 639144

Facilitator Note: Before moving to the post test, use the Kahoot link on the MidSOUTH Staff Page to open the Kahoot Review activity.



Resource Post-Test Assessment

POST TEST ASSESSMENT

Time: 15 Minutes

Purpose: To assess the learning outcomes for this specialty training

Say:

Before we end our learning week lets take a final look at our learning outcomes for the week by completing our post-test assessment. Please open the assessment using the QR code on the screen