PROCEDURES

The BCAL-3130, Initial Foster Home/Adoption Evaluation, must be used to license foster homes and provide preliminary approval of foster and recruited parents for adoption. The evaluation provides documentation of the assessment by the licensing and/or adoption worker of the applicant’s ability to parent and provide a stable home for children but does not provide adoption approval for a specific child/children. In all cases, the DHS-612, Adoptive Family Assessment Addendum, must also be completed for approval of adoption when a specific child has been identified for a family.

Licensed Foster Parent Applicants

If a prospective adoptive parent is licensed for foster care and preliminarily approved for adoption on the BCAL-3130, the BCAL-3130 meets the requirements for a dual assessment for preliminary approval of the applicant(s) to adopt. If a prospective adoptive parent is only licensed for foster care and not preliminarily approved for adoption a BCAL-3130, must be completed for adoption purposes. If a licensing assessment was completed prior to the use of the BCAL-3130, any updates to the licensing assessment must be included with the original assessment for approval of the applicant for adoption.

When a specific child has been identified for adoption by a licensed foster parent, the DHS-612, Adoptive Family Assessment Addendum, must be completed to further document adoption specific information and the parent’s ability to meet the identified child’s needs. Assessments may be supplemented with additional information beyond the requirements in the BCAL-3130 and DHS-612.

Unlicensed Applicants

For adoptive applicants who are not licensed for foster care, the BCAL-3130 must be used by adoption workers for assessment of the adoptive family. All health and safety areas of the BCAL-3130 must be addressed in the assessment of an adoptive family. If the family does not meet all licensing standards, each area of noncompliance must be described in the BCAL-3130. When an adoptive child has been identified for the family, the DHS-612, Adoptive Family Assessment Addendum, must be completed.
Note: If an adoptive family assessment or foster home licensing assessment was completed and approved on a different form, it will be accepted with the appropriate required addendum that includes all elements of the BCAL-3130.

Married Individuals Adopting Without Their Spouse

If the prospective adoptive parent is a married individual and he/she is planning on adopting without their spouse, the worker is required to consult the MCI office prior to approval. The worker must document in the narrative of the family assessment the reasons why the individual is requesting to adopt without his/her spouse, and why it is in the child's best interest. It is not appropriate for a married individual to be approved to adopt without their spouse when the spouse will be involved in the care of the child, especially if the spouse resides in the adoptive home and/or if it has been determined that the spouse could not be approved for adoption.

Note: The court where the adoption petition is filed will have the final approval in this matter.

Access to Adoption Services

State law prohibits refusal to provide adoption services to prospective adoptive parents based solely on race, religious affiliation, disability, age or income level (MCL 722.957). This law applies to all applications for DHHS adoptions.

Assessment Time Frames

When a prospective adoptive family has been identified for a specific child, the BCAL-3130, Initial Foster Home/Adoption Evaluation, must begin within 7 calendar days of the acceptance date of the referral to adoption or identification of the prospective adoptive family, whichever is later. The evaluation and DHS-612, Adoptive Family Assessment Addendum, for a family that did not have a previously approved DHS-3130, must be completed within 90 calendar days from the date of assignment of the case to an adoption worker. The DHS-612 must be completed within 60 calendar days from the date of assignment of the case to an adoption worker for a family who has a previously approved BCAL-3130. Exceptions must be:
• Documented in the DHS-614, Quarterly Adoption Progress Report.

• Approved at the next permanency hearing. A copy of the report must be submitted to the DHHS adoption program office for any exceptions.

Unlicensed persons with a significant relationship to a child, who are interested in adopting the child from foster care, must be assessed within a reasonable time to ensure the adoption process is not delayed. The DHS-1926, Preliminary Adoptive Family Assessment, may be used to determine whether a full adoptive family assessment should be completed; see ADM 0500, Preliminary Adoptive Family Assessment.

Social Work Contacts

Adoption workers must maintain regular (at least monthly) contact with applicants throughout the adoption assessment process in order to apprise them of progress towards completion.

The family assessment must include dates and places of contacts and persons interviewed or observed.

Distribution

An agency must provide the applicants for adoption with a signed and dated copy of the assessment, including the DHS-612, Adoptive Family Assessment Addendum, when completed.

The prospective adoptive parent(s) must sign the assessment or an acknowledgment form to document the receipt and review of the assessment.

A copy of the completed assessment must be sent to the local DHHS monitor for inclusion in the child’s permanent record.

ADOPTIVE FAMILY ASSESSMENT ADDENDUM

The DHS-612, Adoptive Family Assessment Addendum, serves two purposes.

1. To address adoption-specific/child-specific information for a family whose initial evaluation was completed using the BCAL-
3130. The DHS-612, Adoptive Family Assessment Addendum, must be used to document adoption-specific information when a child has been identified for adoption by the prospective adoptive family.

2. To update information for a previously approved adoptive family when:
   - A change in circumstances (for example, change in household membership, and change in health concerns) warrants the original assessment to be updated.
   - One calendar year has elapsed and finalization of an adoption for the approved family has not occurred.
   - The family is applying to adopt additional child(ren).

The addendum must be approved by the adoption supervisor prior to making an adoptive placement. Prospective adoptive parents must be given a copy of their adoptive family assessment addendum and sign an acknowledgement that they received a copy.

### ADDITIONAL DOCUMENTS

#### Personal and Professional References

For both licensed and unlicensed applicants:

- The applicant(s) must provide a minimum of three references from persons not related to the applicant(s). For assessment of unlicensed families, the DHS-608, Personal Reference form, must be used to document personal references provided by the applicant(s).

- The DHS-611, Adult Child Reference form, must be used to gather information from any adult child(ren) no longer residing in the home. If an adult child refuses or is not able to provide the information on the form, the efforts to contact the adult child and obtain the information must be documented in the case record.

Reference forms are to be mailed directly from the adoption worker to the identified reference and returned directly to the adoption worker.
Updated references are required for each application and/or each subsequent adoption.

**Note:** If a reference is the only delay in processing an assessment, the adoption worker may obtain references verbally. The verbal reference must be based on the questions on the appropriate DHHS reference form and responses must be documented on the form. The worker’s attempts to obtain written references must also be documented on the form as well as the date of the verbal contact. It must be noted on the form that the reference was obtained by phone, interview, etc., and signed by the worker completing it.

**Clearances**

Record clearances as described in ADM 0520.

**Health and Medical Status**

The DHS-3190, Medical Statement for Foster Home Licensing/Adoption, must be used for the medical statement requirement. The adoption worker must request a physical or psychological examination (at the applicant’s expense) if there are concerns about the physical or mental health of any household member. The second page of the DHS-3190 should be used for documentation of the physical or psychological examination report. All medical statements/reports must be current and dated within one year of the supervisor’s approval date of the assessment.

**Note:** Local courts may have individual requirements for physicals for the prospective adoptive family. Workers should clarify these requirements with the court prior to filing the PCA 301, Petition for Adoption.

**CIRCUMSTANCES REQUIRING ADDITIONAL EVALUATION/DOCUMENTATION**

Expedited consents from the Michigan Children’s Institute (MCI) office or designee will not be approved in any cases requiring additional documentation; see ADM 0850, Expeditied Consent.
MCI Superintendent Consultation

If the current placement for the child is requesting to be considered for adoption but is not recommended for adoption, the MCI superintendent’s office must be consulted prior to making an adoptive placement recommendation.

Requirements

The BCAL-3130, Initial Foster Home/Adoption Evaluation, or DHS-612, Adoptive Family Assessment Addendum, must have additional evaluation/documentation included in the following situations:

Number and Age of Children in the Home

A more extensive assessment of the family’s ability to meet the needs of the children must be completed when any of the following apply:

- The total number of children who will be placed in the home will result in more than four adopted children in the home.
- Placement of a child will result in more than three children under the age of 3 in the home.
- Placement of a child will result in more than six children in the home.

This assessment is to determine if the family has a thorough understanding of and capacity to meet the children’s individual needs. The following must be included:

- An assessment of the family’s demonstrated ability to advocate for and participate in identified services for their children based on references from professionals and service providers who have worked directly with the family to meet the needs of the children already placed in the home, such as teachers, therapists, day care and assisted care providers, medical professionals, etc. These additional references must have direct experience working with the family and provide information about the family’s ability to meet the physical and emotional needs of additional adoptees.
Absent written references from professionals or service providers, the worker must document verbal references with professionals or service providers in the record.

The DHS-610, Professional Reference form, must be used for the above references.

**Note:** Current or former foster care workers are not acceptable professional references for this purpose.

- A review of the level and extent of extraordinary care required by other children and any adults in the household who have continuing care needs, including a review of any determination of care (DOC) (DHS 470, DHS 470A, or DHS 1945) rates being paid through adoption support subsidy.

- Identification and review of the family’s current support systems. This should include individuals or organizations that provide support to the family in meeting the ongoing needs of the children on a permanent basis and may include other household members, extended family, neighbors, friends, church, school, community groups, day care and respite care providers and other sources of support. It must also include a plan for guardianship of the child or children in the event of the parent or parents’ death or permanent disability preventing continuation of parental responsibility.

- An assessment of the impact of adoption on the family’s ability to care for all children based on the children’s changing needs.

- An assessment of the training needs of the family.

- An interview of each child currently living in the home and children no longer in the home, including foster children and any adult children, if available. The assessment of the prospective adoptive family’s ability to nurture and safely care for all the children in the home must be clearly documented.

**Health or Age Concerns for Prospective Adoptive Parents**

If the age or health of a prospective adoptive parent raises concerns about the ability of the parent to provide permanency for a child, the adoption worker must determine if the child’s best interests will be met through this adoption.

The family’s designated alternate care provider, should the applicant(s) become unable to provide care for the child(ren), must be
documented. Contact must be made with the alternate care provider to evaluate the extent of his or her relationship with the child and willingness to provide permanent care for the child. The contact must be documented in the BCAL-3130, Initial Foster Home/Adoption Evaluation, or DHS-612, Adoptive Family Assessment Addendum.

The age and/or health of the prospective adoptive parent should be given heightened consideration if:

- The prospective adoptive parent is under the age of 21.
- The youngest child to be adopted is less than 10 years of age and there is more than 50 years age difference between the child and the youngest prospective adoptive parent.

**DHHS Central Registry**

If any applicant family has a household member who is listed on the Central Registry for child abuse or neglect, the circumstances must be fully documented in the BCAL-3130, Initial Foster Home/Adoption Evaluation, or DHS-612, Adoptive Family Assessment Addendum. The reasons for placement consideration must include a full explanation as to reasons the family is being recommended for adoption of a specific child.

**MCI Superintendent Review**

For MCI wards, the consent request to the MCI superintendent must include a copy of the CPS investigation report for the complaint(s) that resulted in the person being placed on Central Registry and a detailed explanation of the reason(s) for recommending the adoptive placement.

A thorough review by the Michigan Children’s Institute (MCI) of the circumstances surrounding the placement with the individual on Central Registry must be completed. Following this review, a written determination, using the DHS-96, MCI Determination For Individuals Placed On Central Registry Requesting Consent, must be completed by the Michigan Children’s Institute (MCI) office and will be sent to the adoption worker. If the MCI superintendent consents to adoption, a copy of the written determination of the review must be included in the documentation provided to the court for their review prior to the adoptive placement.

For children who are not yet placed in the prospective adoptive home, the MCI superintendent review and court review of the case must be completed prior to placing the child in the prospective
adoptive home. For a child who is already placed in the prospective adoptive home as a foster child, refer to policy in FOM 722-3, Foster Care Placement/Replacement.