1 10A NCAC 70E .0602 is amended <u>with changes</u> as published in 31:14 NCR 1379 as follows:

2 10A NCAC 70E .0602 DEFINITIONS

3 Except when the context of the Rule indicates that the term has a different meaning the The following definitions shall 4 apply to the rules in Subchapter 70E: 5 "Agency" means a child placing agency as defined in G.S. 131D-10.2 that is authorized by law to (1)6 receive children for purposes of placement in foster homes or adoptive homes. 7 "Family Foster Home" has the meaning as defined in G.S. 131D-10.2(8). (2)8 "Family Foster Care" means a planned, goal directed service in which the temporary protection and (3) 9 care of children take place in a family foster home. Family foster care is a child welfare service for 10 children and their parents who must live apart from each other for a period of time due to abuse, neglect, dependency, or other circumstances necessitating out of home care. "Family Foster Care" 11 12 means foster care, as defined in G.S. 131D-10.2(9), that is provided in a family foster home. 13 (4) "Licensing Authority" means the North Carolina Division of Social Services. 14 "Owner" means any person who holds an ownership interest of five percent or more of the an (5) 15 applicant. A person includes a sole proprietor, co-owner, partner or shareholder, principal or 16 affiliate, or any person who is the applicant or any owner of the applicant. 17 (6) "Supervising Agency" means a county department of social services or a private child-placing 18 agency that is authorized by law to receive children for purposes of placement in foster homes or 19 adoptive homes. Supervising agencies are responsible for recruiting, training, and supporting foster 20 parents. Supervising agencies recommend the licensure of foster homes to the licensing authority. 21 (7) "Therapeutic Foster Care" means a foster home where the foster parent has received additional 22 training in providing care to children with behavioral mental health or substance abuse problems. 23 The "reasonable and prudent parent [standard", as defined in G.S.131D 10.2.] standard has the (8) meaning set forth in 131D-10.2A 24 25 26 Authority G.S 131D-10.1; [131D-10.2;] 131D-10.2A; 131D-10.3; 131D-10.5; 143B-153; History Note: 27 Amended Eff. August 1, 2017; September 1, 2007.

1	10A NCAC 70E .0702 is amended with changes as published in 31:14 NCR 1379 as follows:
2	
3	10A NCAC 70E .0702 RESPONSIBILITY
4	(a) Each supervising agency providing foster care services shall assess its applicants and licensees. licensees in
5	accordance with 10A NCAC 70E .0802 through .0805. Supervising agencies shall submit to the licensing authority

6 information and reports that are used as the basis of either issuing or continuing to issue licenses. basis of either issuing

7 <u>or renewing a license.</u>

- 8 (b) The supervising agency shall submit [data] the following information to the licensing authority within 30 days [of
- 9 the following events to report:] after any of the following events occur:
- 10 (1) [significant] changes in household income;
- 11 (2) criminal charges of any household member;
- 12 (3) changes in the [composition] membership of the household;
- 13 (4) change of address; and
- 14 (5) [significant] changes in physical or mental health.
- 15

16 *History Note:* Authority G.S. 131D-10.1; 131D-10.3; 131D-10.5; 143B-153;

- 17 *Eff. September 1, 2007;*
- 18 Amended Eff. <u>August 1, 2017;</u> November 1, 2009.

10A NCAC 70E .0805 is amended with changes as published in 31:14 NCR 1379 as follows:

- 3
 10A NCAC 70E .0805
 PERIODIC REASSESSMENT OF HOME
 - 4 (a) A <u>family or therapeutic</u> foster home shall be reassessed <u>annually</u> [by the supervising agency] at least biennially.
- 5 [annually.] by the supervising agency.
- 6 (b) Reassessment shall include a mutual assessment with the foster parents of their strengths, skills, skills, and abilities
- 7 to provide care for children, including ways in which they have been able to meet met the needs of children placed in
- 8 their home and areas in which they need further development.
- 9 (c) Any changes in physical set up and in the foster parents' capacities for providing foster care since the original
- 10 home assessment or previous reassessments shall be documented in the family's record.
- 11 (d) Reassessments Reassessment shall be used as a tool for relicensing the home. [on a biennial basis.] tool for biennial
- 12 relicensing of the home.
- 13
- 14 *History Note:* Authority G.S. 131D-10.1; 131D-10.3; 131D-10.5; 143B-153.
- 15 *Amended Eff. <u>August 1, 2017</u>; September 1, 2007.*

10A NCAC 70E .0902 is amended with changes as published in 31:14 NCR 1379 as follows:

2 3 10A NCAC 70E .0902 **AGENCY FOSTER PARENTS' AGREEMENT** 4 (a) Foster parents shall sign an agreement under pursuant to which the foster parents shall: 5 allow the representative a representative of the supervising agency to visit the home in conjunction (1)6 with licensing procedures, foster care planning, and placement; 7 accept children into the home only through the supervising agency and not through other individuals, (2)8 agencies, or institutions; 9 treat a child placed in the home as a member of the family, and when so advised by the supervising (3) 10 agency, make every effort to support, the family and, when so advised by the supervising agency, 11 support encourage, and enhance the child's relationship with the child's parents or guardian; 12 (4) maintain continuous contact and exchange of information between with the supervising agency and 13 the foster parents about matters affecting the adjustment of any child placed in the home. The foster 14 parents shall agree to keep these matters confidential and discuss them only with the supervising 15 agency staff members, member or with other professional people professionals designated by the 16 agency; 17 obtain the permission of the supervising agency if the child is to be out of the home for a period (5) 18 exceeding two nights 72 hours; report to the supervising agency any [planned] changes in the composition of the household, 19 (6) 20 change of address [before they occur, report changes in physical or mental health, criminal charges 21 of any household member, or change in the employment status of any adult member of the 22 household [and changes in the financial resources or income of the household within 72 hours;] 23 report to the supervising agency any change of address before it occurs and any of the following 24 within 72 hours of its occurrence: 25 changes in the [composition] membership of the household; (A) changes in physical or mental health of any household member; 26 (B) 27 criminal charges against any household member; and (C)28 (D)changes in the financial resources or income of the household; 29 (7) make no independent plans for a child to visit the home of the child's parents, guardian, or relatives 30 without prior consent from the supervising agency; 31 (8) adhere to the supervising agency's plan of medical care, both for routine care and treatment, 32 treatment and for emergency care and hospitalization; and 33 (9) provide any child placed in the home with supervision that is appropriate for the [childs] child's age, 34 intelligence, emotional make up, and past [experience] experiences at all times while the child is in 35 the home, not leave the child unsupervised, and adhere to the supervision requirements specified in 36 the out-of-home family services agreement or person-centered plan; and

1	<u>(10)</u>	agree to comply with [all applicable State and Federal laws pertaining to nondiscrimination.] Title
2		VI Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Americans with
3		Disabilities Act, the Multiethnic Placement Act, which are incorporated by reference including
4		subsequent amendments and editions.
5	(b) The supervi	sing agency shall sign an agreement under which the supervising agency shall:
6	(1)	assume responsibility for the overall planning for the child and assist the foster parents in meeting
7		their day-to-day responsibility towards the child;
8	(2)	inform the foster parents concerning the agency's procedures and financial responsibility
9		responsibilities for obtaining medical care and hospitalization;
10	(3)	pay the foster parents a monthly room and board payment, <mark>and</mark> payment and, if applicable, a respite
11		care payment for children placed in the home;
12	(4)	discuss with the foster parents any plans to remove a child from the foster home;
13	(5)	give the foster parents notice before removing a child from the foster home;
14	(6)	visit the foster home and child according to the out-of-home family services agreement or person-
15		centered plan and be available to give needed services and consultation concerning the child's
16		welfare;
17	(7)	respect the foster parents' preferences in terms of sex, age range, and number of children placed in
18		the home;
19	(8)	provide or arrange for training for the foster parents;
20	(9)	include foster parents as part of the decision-making team for a child; and
21	(10)	allow foster parents to review and receive copies of their licensing record. record; and
22	<u>(11)</u>	notify foster parents of their right to obtain personal liability insurance in accordance with G.S. 58-
23		<u>36-44</u> .
24	(c) The agreeme	ent shall also contain any all other provisions mutually agreed by the parties.
25	(d) The foster p	parents and a representative of the supervising agency shall sign and date the agreement initially and
26	at each relicensu	are. The foster parents and the supervising agency shall retain copies of the agreements.
27		
28	History Note:	Authority G.S. 131D-10.1; <u>131D-10.2A</u> ; 131D-10.3; 131D-10.5; 143B-153;
29		<u>Amended Eff.</u> August 1, 2017; September 1, 2007.

1	10A NCAC 70E	.1101 is amended with changes as published in 31:14 NCR 1380 as follows:
2 3	10A NCAC 70E	C.1101 CLIENT RIGHTS
4		ts shall ensure that each foster child:
5	(u) 1 obter paren (1)	has clothing to wear that is appropriate to the weather;
6	(2)	is allowed to have personal property;
7	(3)	is encouraged to express opinions on issues concerning care;
8	(4)	is provided care in a manner that recognizes variations in the child's cultural values and traditions;
9	(5)	is provided the opportunity for spiritual development and is not denied the right to practice his or
10	(-)	her religious beliefs;
11	(6)	is not identified in connection with the supervising agency in any way that would bring the child or
12		the child's family embarrassment; as a foster child in any way;
13	(7)	is not forced to acknowledge dependency on or gratitude to the foster parents;
14	(8)	is encouraged to contact and have telephone conversations with family members, when not members
15		unless contraindicated in the child's visitation and contact plan;
16	(9)	is provided training and discipline that is appropriate for the child's age, intelligence, emotional
17		makeup, and past experience;
18	(10)	is not subjected to cruel or abusive punishment; punishment, as established in G.S. 7B 101(1) and
19		<u>(15):</u>
20	(11)	is not subjected to corporal punishment;
21	(12)	is not deprived of a meal or contacts with family for punishment or placed in isolation time-out
22		except when isolation time-out means the removal of a child to an unlocked room or area from
23		which the child is not physically prevented from leaving. The foster parent may use isolation time-
24		out as a behavioral control measure when the foster parent provides it within hearing distance of a
25		foster parent. The length of time alone the isolation time-out shall be appropriate to the child's age
26		and development; for the child's age, intelligence, emotional makeup, and past experiences;
27	(13)	is not subjected to verbal abuse, threats, or humiliating remarks about himself/herself or his/her
28		families; himself or herself or his or her family:
29	(14)	is provided a daily routine in the home that promotes a positive mental health environment and
30		provides an opportunity for normal activities with time for rest and play;
31	(15)	is provided training in good health habits, including proper eating, frequent bathing, and good
32		grooming. is provided training in nutrition and personal hygiene. Each child shall be provided food
33		with nutritional content for normal growth and health. Any diets Diets prescribed by a licensed
34		medical provider shall be provided;
35	(16)	is provided medical care in accordance with the treatment prescribed for the child;
36	(17)	of mandatory school age age, as established in G.S.115C-378(a), maintains regular school
37		attendance unless the child has been excused by the authorities;

1	(18)	is encouraged to participate in neighborhood and group activities, to have friends visit the home
2		home, and to visit in the homes of friends;
3	(19)	assumes responsibility for <mark>himself/herself</mark> <u>himself or herself</u> and <u>for</u> household duties in accordance
4		with his/her age, health, and ability. that are appropriate for the child's age intelligence, emotional
5		makeup, and past experiences. Household tasks shall not interfere with school, sleep, or study
6		periods;
7	<mark>(20)</mark>	is provided opportunities to participate in recreational activities;
8	<mark>(21)</mark> (2	2 <mark>0)</mark> is not permitted to do any task which is in violation of child labor laws <u>task that violates child</u>
9		labor laws, as established in G.S. 95-25.5 and Fair Labor Standards Act (FLSA), incorporated by
10		reference including subsequent amendments and editions, or not appropriate for a child of that
11		age; appropriate for the child's age, intelligence, emotional makeup, and past experiences;
12	<mark>(22)</mark> (2	21) is provided supervision in accordance with that is appropriate for the child's age, intelligence,
13		emotional makeup, and experience; and
14	<mark>(23)</mark> (2	2) if less than eight years of age and or weighs less than 80 pounds pounds, is properly secured in a
15		child passenger restraint system that is approved and installed in a manner authorized by the
16		Commissioner of Motor Vehicles. [Vehicles.] in accordance with the manufacturer's instructions;
17	<mark>(24)</mark> (2	3)[receives appropriate protection of confidential information about the child or the child's family and
18		that confidential information will not be shared unless properly authorized; and] is protected from
19		disclosure of confidential information about the child or the child's family. Such confidential
20		information shall not be shared unless lawfully authorized; and
21	<mark>(25)</mark> (2	2 <u>5){is encouraged to participate in extracurricular, enrichment, cultural, and social activities as</u>
22		appropriate and in accordance with 131D 10.2.] is encouraged to participate in extracurricular,
23		recreational, enrichment, cultural, and social activities in accordance with 131D-10.2A.
24	(b) Foster paren	nts shall initially and at relicensure sign a Discipline Agreement that specifically acknowledges their
25	agreement as s	pecified in Subparagraphs (a)(9), (10), (11), (12), and (13) of this Rule, as well as discipline
26	requirements ou	tlined in the out-of-home family services agreement or person-centered plan. The foster parents and
27	the supervising	agency shall retain copies of these agreements.
28		
29	History Note:	Authority G.S. 131D-10.1; <mark>131D-10.2;</mark> <u>131D-10.2A</u> ; 131D-10.3; 131D-10.5; 143B-153;
30		<u>Amended Eff.</u> August 1, 2017; September 1, 2007.

1 10A NCAC 70E .1103 is amended with changes as published in 31:14 NCR 1381 as follows:

3 10A NCAC 70E .1103 PHYSICAL RESTRAINTS

4 (a) Foster parents who utilize physical restraint holds shall not engage in discipline or behavior management that5 includes:

- 6 (1) protective or mechanical restraints;
- 7 (2) <u>a</u> drug used as a restraint, except as outlined in Paragraph (b) of this Rule;
- 8 (3) <u>the</u> seclusion of a child in a locked room; or
- 9 (4) physical restraint holds except for a child who is at imminent risk of harm to himself/herself himself,
 10 herself, or others until the child is calm, there is no longer any risk of imminent harm to any party.
- 11 (b) Foster parents shall not administer drugs to a foster child for the purpose of punishment, foster parent convenience,
- 12 substitution for adequate supervision supervision, or for the purpose of restraining the child. A drug used as a restraint

13 means a medication used only to control behavior or to restrict a child's freedom of movement, movement and is not

14 a standard <u>medication</u> to treat a psychiatric condition.

(c) Before a foster parent shall administer <u>administers</u> physical restraint holds, each foster parent shall complete
 training that includes at least 16 hours of initial training in behavior management, including techniques for de escalating problem behavior, the appropriate use of physical restraint holds, monitoring of vital indicators, and

- 18 debriefing children and foster parents involved in physical restraint holds. Foster parents authorized to use physical
- 19 restraint holds shall annually complete at least eight hours of behavior management training training, including
- 20 techniques for de-escalating problem behavior. This training shall count toward the training requirements as set forth
- 21 in 10A NCAC 70E .1117(6). Only foster parents trained in the use of physical restraint holds shall may administer
- 22 physical restraint holds.

23 (d) Foster parents shall be trained by instructors who have met the following qualifications and training requirements:

- 24 Instructors who train foster parents shall have met the following qualifications and training requirements:
- (1) instructors shall demonstrate competence by scoring 100 percent on testing in a training program
 aimed at preventing, reducing, and eliminating the need for restrictive interventions;
- 27 (2) instructors shall demonstrate competence by scoring 100 percent on testing in a training program
 28 teaching the use of physical restraint;
- (3) instructors shall demonstrate competence by scoring a passing grade on testing in an instructor
 training program as determined by the North Carolina Division of Mental Health, Developmental
 Disabilities and Substance Abuse <u>Services</u>;
- 32 (4) the instructors' training shall be competency based, competency-based and shall include measurable
 33 learning objectives, measurable testing (written and by observation of behavior) on those objectives,
 34 and measurable methods to determine passing or failing the course;
- 35 (5) the content of the instructor training shall be approved by the Division of Mental Health,
 36 Developmental Disabilities and Substance Abuse Services; Services; and shall include presentation

1		of understanding the adult learner, methods of teaching content of the course, evaluation of trainee
2		performance and documentation procedures;
3	(6)	instructors shall be retrained at least annually and demonstrate competence in the use of physical
4		restraint restraints; to the North Carolina Interventions (NCI) Quality Assurance Committee;
5	(7)	instructors shall be trained in CPR; CPR such as those provided by the American Red Cross,
6		American Heart Association, or equivalent organizations. Division staff shall determine that an
7		organization is substantially equivalent if the organization is already approved by the Department
8		or meets the same standard of care as the American Heart Association or American Red Cross. The
9		Division shall not accept web-based trainings for certification in CPR;
10	(8)	instructors shall have coached experience been coached in teaching the use of restrictive
11		interventions at least two times with a positive review by the coach, and trainers instructors shall
12		teach a program on the use of physical restraints at least once annually; and
13	(9)	instructors shall complete a refresher instructor training at least every two years, years;
14	(e) In administe	ering physical restraints, the following shall apply:
15	(1)	foster parents shall use only those physical restraint holds approved by the North Carolina
16		Interventions (NCI) Quality Assurance Committee. Division of Mental Health, Developmental
17		Disabilites, and Substance Abuse Services, pursuant to 10A NCAC 27E .0108. Approved physical
18		restraint holds can be found at the following web site:
19		http://www.dhhs.state.nc.us/mhddsas/training/rscurricula/agencylist10-18-06web.pdf
20		{ <mark>https://www2.ncdhhs.gov/mhddsas/providers/trainingandconferences/restraints.htm</mark> }
21		https://www2.ncdhhs.gov/mhddsas/providers/trainingandconferences/restraints.htm; (Reviewed
22		Restrictive and Physical Interventions Curricula by Name) which are hereby incorporated by
23		reference including subsequent amendments and editions;
24	(2)	before employing a physical restraint hold, the foster parent shall take into consideration the child's
25		medical condition and any medications the child may be taking; a foster parent shall not use physical
26		restraints that will cause a child harm, given their medical condition or any medications that they
27		are taking;
28	(3)	no child shall be restrained <mark>utilizing</mark> using a protective or mechanical device; physical object;
29	(4)	no child or group of children shall be allowed to participate in the physical restraint of another child;
30	(5)	physical restraint holds shall:
31		(A) not be used for purposes of discipline or convenience;
32		(B) be used only when there is imminent risk of harm to the child or others and less restrictive
33		approaches have failed;
34		(C) be administered in the least restrictive manner possible to protect the child or others from
35		imminent risk of harm; and
36		(D) end when the child becomes calm. when there is no longer any risk of imminent harm to
37		any party;

 2 (A) ensure that any physical restraint hold utilized used on a child is administed 3 foster parent with a second trained foster parent or with a second tr	tered by a trained
3 foster parent with a second trained foster parent or with a second	
	trained adult in
4 attendance. Concurrent with the administration of a physical restraint	t hold and for a
5 minimum of 15 minutes subsequent to the termination of the hold, a fo	oster parent shall
6 monitor the child's breathing, ascertain the child is verbally responsive an	nd motorically in
7 control, has motor control and ensure the child remains conscious without	it any complaints
8 of pain. The supervising agency may seek a waiver from the licensing auth	hority for a foster
9 parent to administer a physical restraint hold without a second trained adu	ult in attendance,
10 and completion of the waiver request form. Attendance. The licensing auth	hority shall grant
11 the waiver if it receives <u>a written waiver request</u> ; written approval from the	he child's parent,
12 guardian, or custodian that the administering of a physical restraint hold w	without a second
13 trained person present is acceptable, <u>acceptable</u> , written approval from	the supervising
14 agency that the foster parent is authorized to administer a physical restrain	nt hold without a
15 second trained person present, and present; documentation that there is	approval by the
16 child and family team team; and documented documentation in the personal child and family team team; and the personal child and family team team team team team team team team	on-centered plan
17 or out-of-home family services agreement that it is acceptable for the	foster parent to
18 administer a physical restraint hold without a second trained person preserved	ent;
19 (B) immediately terminate the physical restraint hold or adjust the position to	to ensure that the
20 child's breathing and motor control are not restricted, restricted if at any	y time during the
21 administration of a physical restraint hold the child complains of being u	unable to breathe
22 or loses motor control;	
23 (C) immediately seek medical attention for the child, child if at any time the	<mark>child appears to</mark>
24 be in distress; and it appears to be necessary;	
25 (D) conduct an interview with the foster child about the incident following the	use of a physical
26 restraint hold. hold;	
27 (7) The supervising agency shall interview the foster parent administering the physic	cal restraint <mark>hold</mark>
28 about the incident following the use of a physical restraint hold by the supervising -	agency. restraint
29 and shall document the incident in a report. Each report shall include:	
30 (8) The supervising agency shall document each incident of a child being subjected	<mark>ed to a physical</mark>
31 restraint hold on an incident report provided by the licensing authority. The incident	<mark>ident report shall</mark>
32 include:	
33 (A) the child's name, age, height, and weight;	
34 (B) the type of hold utilized;	
35 (C) the duration of the hold;	
36 (D) the trained foster parent administering the hold;	
37 (E) the trained foster parent or trained adult witnessing the hold;	

1		(F)	the less restrictive alternatives that were attempted prior to utilizing physical restraint;
2		(G)	the child's behavior that-necessitated the use of physical restraint; and
3		(H)	whether the child's condition necessitated required medical attention. attention; and
4	<mark>(9)</mark> (8)	Physica	l restraints where a person ends up in a prone or face down position <mark>{are</mark> } shall be prohibited.
5	(f) Foster paren	its shall	annually receive written approval from the executive director or his/her designee of the
6	supervising agen	<mark>cy before</mark>	administering director of the supervising agency or his or her designee before administering
7	physical restrain	t holds.	This written approval shall be based upon the executive director's evaluation of the foster
8	parent's historica	al use of	physical restraints. The foster parent shall retain a copy of the written approval and a copy
9	shall be placed in	n the fost	er home record.
10			
11	History Note:	Authori	ty G.S. 131D-10.1; 131D-10.3; 131D-10.5; 143B-153;
12		Amende	e <u>d Eff. August 1, 2017;</u> September 1, 2007.

1	10A NCAC 70E	2.1107 is amended with changes as published in 31:14 NCR 1383 as follows:
2		
3	10A NCAC 701	E .1107 RELATIONSHIP TO SUPERVISING AGENCY
4	(a) Foster parer	nts shall agree to work with the supervising agency in the following ways:
5	(1)	work with the child and the child's <mark>parent(s)</mark> parent or guardian(s) guardian in the placement process,
6		reunification process, adoption process, or and any change of placement process;
7	(2)	consult with social workers, mental health personnel, licensed medical providers, and other persons
8		authorized by the child's parent(s), <mark>guardian(s)</mark> parent, guardian, or custodian who are involved with
9		the child;
10	(3)	maintain confidentiality regarding children and their <mark>parent(s)</mark> parent or guardian(s); guardian
11	(4)	keep records regarding the child's illnesses, behaviors, social needs, educational needs, and family
12		visits and contacts; and
13	(5)	report to the supervising agency any changes as required by 10A NCAC 70E .0902.
14	(b) In addition	to <mark>Subparagraphs (a)(1) through (5)</mark> Paragraph (a) of this Rule, foster parents who provide therapeutic
15	foster care servi	ces shall:
16	(1)	be trained as set out in 10A NCAC 70E .1117; and
17	(2)	allow weekly supervision and support from a qualified professional as defined in 10A NCAC 27G
18		<mark>.0104</mark> . <u>0104(19);</u> and <mark>.0203. ;</mark> [and]
19	(3)	allow weekly supervision and support from a qualified professional as outlined in 10A NCAC 70G
20		<u>.0503(r)</u> .
21		
22	History Note:	Authority G.S. 131D-10.1; 131D-10.3; 131D-10.5; 143B-153;
23		Eff. September 1, 2007;
24		Amended Eff. <u>August 1, 2017;</u> November 1, 2009.

10A NCAC 70E .1116 is amended with changes as published in 31:14 NCR 1383 as follows:

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3	10A NCAC 70E	C.1116 CRI	MINAL HISTORY CHECKS
4	(a) The supervis	ing agency sha	Il complete the following activities at initial licensure for new foster parent applicants
5	and any member	of the prospec	tive foster parents' household who is 18 years of age or older:
6	(1)	furnish the w	itten notice as required by G.S. 131D-10.3A(e);
7	(2)	obtain a signe	d consent form for a criminal history check and submit the signed consent form to the
8		Department o	f Health and Human Services, Criminal Records Check Unit;
9	(3)	obtain two se	ts of fingerprints on SBI identification cards and forward both sets of fingerprints to
10		the Departme	nt of Health and Human Services, Criminal Records Check Unit. Once an individual's
11		fingerprints h	ave been submitted to the Department of Health and Human Services, Criminal
12		Records Chec	k Unit, additional fingerprints shall not be required; and
13	(4)	conduct a loc	al criminal history check through accessing the Administrative Office of the Courts
14		and the Depa	rtment of Corrections Offender Population Unified System and submit the results of
15		the criminal	history checks to the licensing authority on the Foster Home Application form. ;
16		authority;	
17	<u>(5)</u>	[obtain a sign	ed statement that the individual has no criminal, social or medical history which would
18		<mark>adversely affe</mark>	ect their capacity to work with children and adults; obtain a signed statement that the
19		<mark>individual ha</mark>	not abused or neglected a child or been a respondent in a juvenile court proceeding
20		<mark>that resulted i</mark>	n the removal of a child or had child protective services involvement that resulted in
21		<mark>the removal c</mark>	f a child; and obtain a signed statement that the applicant has not abused, neglected,
22		or exploited a	disabled adult, and has not been a domestic violence perpetrator;
23		<mark>obtain a signe</mark>	d statement that
24		<u>(A)</u>	the individual has no criminal, social or medical history which would adversely
25			affect their capacity to work with children and adults;
26		<u>(B)</u>	obtain a signed statement that the individual has not abused or neglected a child,
27			been a respondent in a juvenile court proceeding that resulted in the removal of a
28			child, or had child protective services involvement that resulted in the removal of
29			a child; and
30		<u>(C)</u>	obtain a signed statement that the applicant has not abused, neglected, or
31			exploited a disabled adult and has never committed an act of domestic violence
32			upon another person;
33	<u>(6)</u>	conduct a sea	rch of the North Carolina Sex Offender and Public Protection Registry; and
34	(7)	conduct a sea	rch of the North Carolina Health Care Personnel [Registry (pursuant to G.S. 131E-
35			y pursuant to G.S. 131E-256.
36	(b) The supervis		Il conduct a local criminal history check through accessing the Administrative Office
37	of the Courts and	d the Departme	nt of Corrections Offender Population Unified System North Carolina Department of

1	Public Safety, D	ivision of Adult Correction, Offender Information and submit the results of the criminal history checks
2	to the licensing	authority on the Foster Home Relicensure, Termination and Change Request Application form at
3	relicensure for f	oster parents and any member of the prospective foster parents' household 18 years of age or older.
4	[(c) Every two	years, the supervising agency shall require that foster parents and any adult member of the household
5	<mark>provide a signec</mark>	l statement that the individual has no criminal, social, or medical history which would adversely affect
6	their capacity to	o work with children and adults; obtain a signed statement that the individual has not abused or
7	neglected a chil	d or been a respondent in a juvenile court proceeding that resulted in the removal of a child or had
8	<mark>child protective</mark>	services involvement that resulted in the removal of a child; obtain a signed statement that the
9	<mark>applicant has no</mark>	t abused, neglected, or exploited a disabled adult, and has not been a domestic violence perpetrator;
10	<mark>and obtain a sig</mark>	ned statement that the applicant is not listed on the North Carolina Health Care Personnel Registry
11	<mark>(pursuant to G.S</mark>	3. 131E-256).]
12	(C) Every two	years, the supervising agency shall require that foster parents and any adult member of the household
13	provide:	
14	<u>(1)</u>	a signed statement that the individual has no criminal, social, or medical history which would
15		adversely affect their capacity to work with children and adults;
16	<u>(2)</u>	a signed statement that the individual has not abused or neglected a child, been a respondent in a
17		juvenile court proceeding that resulted in the removal of a child, or had child protective services
18		involvement that resulted in the removal of a child;
19	<u>(3)</u>	a signed statement that the applicant has not abused, neglected, or exploited a disabled adult and
20		has never committed an act of domestic violence upon another person; and
21	<u>(4)</u>	a signed statement that the applicant is not listed on the North Carolina Health Care Personnel
22		Registry pursuant to G.S. 131E-256.
23	History Note:	Authority G.S. 131D-10.1; 131D-10.3; <u>131D-10.3A</u> ; 131D-10.5; 143B-153;
23	1113101 y 1401c.	<u>Amended Eff. August 1, 2017;</u> September 1, 2007.
<u>-</u>		<u>Amenucu Djj, August 1, 2017,</u> September 1, 2007.

10A NCAC 70E .1117 is amended with changes as published in 31:14 NCR 1384 as follows:

2

3 10A NCAC 70E .1117 TRAINING REQUIREMENTS

4	Each supervising agency shall provide, or cause to be provided, preservice and in-service training for all prospective				
5	and licensed for	nd licensed foster parents as follows:			
6	(1)	Prior t	o licensure or within six months from the date a provisional license is issued, each applicant		
7		shall <mark>s</mark>	uccessfully complete 30 hours of preservice training. Preservice training shall include the		
8		<mark>follow</mark>	ing components: following:		
9		(a)	General Orientation to Foster Care and Adoption Process; general orientation to foster care		
10			adoption process:		
11		(b)	Communication Skills; communication skills:		
12		(c)	Understanding the Dynamics of Foster Care and Adoption Process; understanding the		
13			dynamics of foster care;		
14		(d)	Separation and Loss; separation and loss;		
15		(e)	Attachment and Trust; attachment and trust;		
16		(f)	Child and Adolescent Development; child and adolescent development:		
17		(g)	Behavior Management; behavior management:		
18		(h)	Working with Birth Families and Maintaining Connections; working with birth families		
19			and maintaining connections:		
20		(i)	Lifebook Preparation; lifebook preparation;		
21		(j)	Planned Moves and the Impact of Disruptions; planned moves and the impact of disruption;		
22		(k)	The Impact of Placement on Foster and Adoptive Families; the impact of placement on		
23			foster and adoptive families;		
24		(1)	Teamwork to Achieve Permanence; teamwork to achieve permanence		
25		(m)	Cultural Sensitivity; cultural sensitivity;		
26		(n)	Confidentiality; and confidentiality:		
27		(0)	Health and Safety; health and safety;		
28		<u>(p)</u>	[Trauma Informed Care; and] trauma informed care; and		
29		<u>(q)</u>	[Reasonable and Prudent Parent Standard as defined in 131D 10.2]. the Reasonable and		
30			Prudent Parent Standard as defined in 131D-10.2A.		
31	(2)	Prior t	o licensure or within six months from the date a provisional license is issued, therapeutic		
32		foster	parent applicants shall receive <mark>at least</mark> ten <mark>additional</mark> hours of preservice training in behavioral		
33		mental	health treatment services in addition to the training required by item (1) of this Rule,		
34		includ	ing the following:		
35		(a)	the role of the therapeutic foster parent;		
36		(b)	safety planning; and		
37		(c)	managing behaviors.		

1	(3)	During the initial two years of licensure, each therapeutic foster parent shall receive additional
2		training in the following areas:
3		(a) development of the person-centered plan;
4		(b) <u>the</u> dynamics of emotionally disturbed and substance abusing youth and families;
5		(c) <u>the</u> symptoms of substance abuse;
6		(d) the needs of emotionally disturbed and substance abusing youth and families; and
7		(e) crisis intervention.
8	(4)	Training in first aid, cardiopulmonary resuscitation (CPR) and universal precautions such as those
9		provided by the American Red Cross, the American Heart Association, or equivalent organizations
10		shall be provided to foster parents before a foster child is placed with the foster family. Training in
11		CPR shall be appropriate for the ages of children in care. First aid, CPR, and universal precautions
12		training shall be updated as required by the American Red Cross, the American Heart Association,
13		or equivalent organizations. The supervising agency shall ensure that family foster parents and
14		therapeutic foster parents are trained in medication administration before a child is placed with the
15		foster family.
16		Foster parents shall [successfully] complete certification in first-aid, cardiopulmonary resuscitation
17		(CPR) and universal precautions provided by either the American Heart Association or Association,
18		the American Red [Cross] Cross, or for the equivalent organizations [approved by the Division of
19		Social] Services before a foster child is placed with the foster family. [Other organizations shall be
20		approved if the Division of Social Services determines that courses offered are substantially
21		equivalent to those offered by the American Heart Association or the American Red Cross.]
22		staff shall determine that an organization is substantially equivalent if the organization is already
23		approved by the Department or meets the same standard of care as the American Heart Association
24		or American Red Cross. First-aid, [CPR] CPR, and universal precautions training shall be renewed
25		as required by the American Heart Association, the American Red [Cross] Cross, or equivalent
26		organizations. [Successfully completed is defined as demonstrating] Successfully completed shall
27		mean demonstrating competency, as evaluated by the instructor who has been approved by the
28		<u>American Heart [Association]</u> Association, or the American Red [Cross] Cross, or other
29		organizations approved by the Division of Social Services to provide first-aid, [CPR] CPR, and
30		universal precautions training. Training in CPR shall be appropriate for the ages of children in care.
31		Documentation of successful completion of first-aid, [CPR] CPR, and universal precautions shall
32		be maintained by the supervising agency. [Web based trainings are not shall not be acceptable
33		methods of successfully completing certification in first aid, CPR and universal precautions.] The
34		Division shall not accept web-based trainings for certification in first-aid, CPR, or universal
35		precautions.
36	(5)	Child-specific training shall be provided to the foster parents as required in the out-of-home family
37		services agreement or person-centered plan as a condition of the child being placed in the foster

1		home. When If the child or adolescent requires treatment for abuse <u>reactive, sexually reactive and</u>
2		sexual offender behaviors, abuse, for example, if the child or adolescent engages in reactive,
3		sexually reactive, or sexual offender behaviors, specific treatment shall be identified in his/her his
4		or her person-centered plan. Training of therapeutic foster parents is required in all aspects of
5		reactive and offender specific offender-specific sexual treatment and shall be made available by a
6		provider who meets the requirements specified for a qualified professional as defined in 10A NCAC
7		27G .0104. When the child or adolescent requires treatment for substance abuse, specific treatment
8		shall be identified in his/her person-centered plan. Training and supervision of therapeutic foster
9		parents are required in all aspects of substance abuse and shall be made available by a provider who
10		meets the requirements specified for a qualified substance abuse prevention professional as defined
11		in 10A NCAC 27G .0104. This training shall count towards the training requirements of Item (6)
12		of this Rule.
13	(6)	Prior to licensure renewal, each foster parent shall successfully complete <mark>at least</mark> twenty hours of in-
14		service training. This training may be child-specific or may concern issues relevant to the general
15		population of children in foster care. In order to meet this requirement:
16		(a) each supervising agency shall provide, or cause to be provided, at least 10 hours of in-
17		service training for foster parents annually;
18		(b) the training shall include subjects that would enhance the skills of foster parents and
19		promote stability for children;
20		(c) a foster parent may complete training provided by a community college, a licensed
21		supervising agency, or other departments of State or county governments; governments
22		and, upon approval by the supervising agency, such training shall count towards meeting
23		the requirements specified in this Item; and
24		(d) each supervising agency shall document in the foster parent record the type of activity the
25		foster parent has completed pursuant to this Item.
26	(7)	A foster family caring for a child with HIV (human immunodeficiency virus) or AIDS (acquired
27		immunodeficiency syndrome) shall complete six hours of training on issues relevant to HIV or
28		AIDS annually. This training may shall count towards the training requirements Item (6) of this
29		Rule.
30	(8)	Training <mark>requirements</mark> for physical restraint holds pursuant <u>holds pursuant</u> to 10A NCAC 70E .1103.
31		
32	History Note:	Authority G.S. 131D-10.1; 131D-10.2; <u>131D-10.2A;</u> 131D-10.3; 131D-10.5; 131D-10.6;
33		131D-10.6A; 143B-153;
34		Eff. September 1, 2007;
35		Amended Eff. <u>August 1, 2017;</u> November 1, 2009.

10A NCAC 70F .0202 is amended with changes as published in 31:15 NCR 1536 as follows:

2

3 10A NCAC 70F .0202 RESPONSIBILITIES OF THE GOVERNING BODY

4 (a) The governing body shall provide leadership for the agency and shall approve the agency's policies and

5 programs.

6 (b) The governing body shall employ an executive director who is located in the <u>agency's</u> administrative office

7 within the geographical boundaries of North Carolina and delegate responsibility to that person for the

8 administration and operation of the agency, including the employment and discharge of all agency staff.

9 geographical boundaries of North Carolina and shall delegate responsibility for the administration and operation of

10 the agency to that director, including the employment and discharge of all agency staff.

11 (c) The governing body shall require the executive director provide a signed statement that the executive director has

- 12 no criminal, social or medical history that would adversely affect his or her capacity to work with children and adults.
- 13 The governing body shall ensure that the criminal histories of an executive director are completed. The governing
- 14 body shall ensure that searches of the North Carolina Sex Offender and Public Protection Registry and the North
- 15 Carolina Health Care Personnel Registry (pursuant to G.S. 131E-256) are completed. The governing body shall submit

16 authorization to the licensing authority to search the Responsible Individuals List as defined in 10A NCAC 70A .0102

- 17 to determine if the executive director has had child protective services involvement resulting in a substantiation of
- 18 child abuse or serious neglect. The employing agency shall make all determinations concerning an individual's fitness
- 19 for employment based on the requirements of this Paragraph prior to employment. The governing body shall require
- 20 that the executive director provide a signed statement prior to employment that he or she has not abused or neglected
- 21 a child or has been a respondent in a juvenile court proceeding that resulted in the removal of a child or has had child
- 22 protective services involvement that resulted in the removal of a child. The governing body shall require that the

23 executive director provide a signed statement that he or she has not abused, neglected or exploited a disabled adult

24 and that he or she has not been a domestic violence perpetrator. Agencies or applicants that do not have a governing

- 25 body shall provide this information directly to the licensing authority.
- 26 (c) The governing body shall:

27	<u>(1)</u>	require the executive director provide a signed statement that the executive director has no
28		criminal, social, or medical history that would adversely affect his or her capacity to work with
29		children and adults:
30	(2)	ensure that the criminal histories of an executive director are completed;

- 31 (3) ensure that searches of the North Carolina Sex Offender and Public Protection Registry and the
 32 North Carolina Health Care Personnel Registry pursuant to G.S. 131E-256 are completed:
- 33 (3) submit authorization to the licensing authority to search the Responsible Individuals List, as
 34 defined in 10A NCAC 70A .0102, to determine if the executive director has had child protective
 - services involvement resulting in a substantiation of child abuse or serious neglect:
- 36 (5) <u>make all determinations concerning an individual's fitness for employment based on the</u>
- 37 requirements of this Paragraph prior to employment;

1	<u>6)</u>	require that the executive director provide a signed statement prior to employment that he or she
2		has not abused or neglected child, has not been a respondent in a juvenile court proceeding that
3		resulted in the removal of a child, and has not had child protective services involvement that
4		resulted in the removal of a child; and
5	<u>(7)</u>	require that the executive director provide a signed statement that he or she has not abused,
6		neglected, or exploited a disabled adult and that he or she has never committed an act of domestic
7		violence upon another person.
8	Agencies or ap	plicants that do not have a governing body shall provide this information directly to the licensing
9	authority.	
10	(d) The execut	ive director is not eligible for employment if he or she has been convicted of a felony involving:
11	(1)	child abuse or neglect;
12	(2)	spouse abuse;
13	(3)	a crime against a child or children (including child pornography);
14		pornography; or
15	(4)	a crime of rape, sexual assault, or homicide.
16	(e) The execut	ive director is not eligible for employment if within the last five years he or she has been convicted of
17	a felony involv	ing:
18	(1)	assault;
19	(2)	battery; or
20	(3)	a drug-related offense.
21	(f) The govern	ing body shall annually evaluate the executive director's performance performance, except a sole
22	proprietor or pa	artner is exempt from this Rule if he or she serves as executive director.
23	(g) The govern	ing body shall approve the annual budget of anticipated income and expenditures necessary to provide
24	the services des	scribed in its statement of purpose. Child-placing agencies and residential maternity homes receiving
25		ments or state maternity home funds shall submit an annual audit of their financial statements to the
26	Department of	Health and Human Services, Controller's Office, <mark>Rate Setting Branch in compliance <u>with</u> Cost Analysis</mark>
27	Branch, Rate S	etting Unit and shall comply with 10A NCAC 70D .0105(a)(5).
28	(h) <mark>The gover</mark>	ning body shall annually evaluate the agency's services. This evaluation shall include the agency's
29	interaction wit	h other community agencies to serve its clients. The governing body shall annually evaluate the
30	effectiveness of	f the agency's service to its clients. This evaluation shall include the agency's services to ensure client
31	<u>safety.</u>	
32	(i) The govern	ing body shall establish in writing confidentiality policies and procedures for control and access to and
33	receipt, use, or	release of information about its clients.
34	(j) The govern	ing body of child-placing agencies providing foster care services shall develop a written disaster plan
35	that is provide	d to agency personnel and foster parents. The disaster plan shall be prepared and updated at least
36	annually. The g	governing body of residential maternity homes shall comply with 10A NCAC 70K .0315(g).

1	(k) The governing body, in the event of the closing of the agency, shall develop a plan for the retention and storage
2	of client records. The specifics of this plan shall be submitted to the licensing authority before the actual closing of
3	t <mark>he agency.</mark>
4	The governing body shall develop a plan, in the event of the closing of the agency, that shall contain:
5	(1) the date of projected closing;
6	(2) the name, address, email, and phone number of the contact person responsible for accessing the
7	agency's records;
8	(3) the physical location of the records; and
9	(4) how the agency plans to keep records secure and confidential.
10	(1) The governing body shall develop and implement policies and procedures to comply with fall applicable State
11	and [Federal] federal laws pertaining to nondiscrimination]. Title VI Civil Rights Act of 1964, Section 504 of the
12	Rehabilitation Act of 1973, and the Americans with Disabilities Act, incorporated by reference including subsequent
13	amendments and editions.
14	(m) The governing body shall insure that the agency complies with the Multiethnic Placement Act (MEPA) of 1994,
15	P.L. 103-82, as amended by the Interethnic Adoption Provisions (IEP) of 1996, which is incorporated by reference,
16	including subsequent amendments and editions.
17	(n) The governing body shall comply with the terms and conditions of State and Federal requirements to participate
18	in procurement contracts and covered non-procurement transactions as required by 45 C.F.R. 82.510 and 49 C.F.R.
19	29.630, which is incorporated by reference, including subsequent amendments and editions.
20	
21	History Note: Authority G.S. 131D-10.5; 131D-10.6; 131D-10.10; 143B-153;
22	Eff. February 1, 1986;
23	Amended Eff. July 1, 1990;
24	Temporary Amendment Eff. February 1, 2002;
25	Amended Eff. <u>August 1, 2017;</u> June 1, 2010; November 1, 2009; October 1, 2008; July 18, 2002.

- 1
- 10A NCAC 70F .0205 is amended with changes as published in 31:15 NCR 1537 as follows:
- 2

3 10A NCAC 70F .0205 RESPONSIBILITY TO LICENSING AUTHORITY

- 4 (a) The agency shall submit, biennially to the licensing authority, the information and materials to document5 compliance with the licensure rules and to support issuance of a license.
- 6 (b) The agency shall submit to the licensing authority a biennial statistical report of program activities. activities that
- 7 shall include information such as agency governance structure, financial data, staff employed, and clients served
- 8 <u>during the licensure period.</u>
- 9 (c) The agency shall provide written notification to the licensing authority of a change in the executive director within10 72 hours.
- 11 (d) The agency shall provide written notification to the licensing authority of any changes in policies and procedures
- 12 to assure that the changes are in compliance with the rules in Subchapters 70E, 70F, 70G, 70H, or 70K. The agency
- 13 shall receive written approval from the licensing authority before instituting any changes in policies and procedures.
- 14 shall not institute any changes in policies and procedures until after it receives written approval from the licensing
- 15 <u>authority</u>.
- 16 (e) Child-placing agencies for foster care shall comply with requirements related to the handling and reporting of
- 17 critical incidents incidents, in accordance with 10A NCAC 70G .0513. Residential maternity homes shall comply
- 18 with requirements related to the handling and reporting of critical incidents in accordance with 10A NCAC 70K .0210.
- 19 (f) When If there is a death of a child or resident in placement in a home supervised by the agency, the executive
- 20 director or his or her designee shall notify the licensing authority within 72 hours.
- 21 (g) The agency shall provide to the licensing authority at the time of license application the legal name and social
- 22 security number of each individual who is an owner and holds at least five percent interest of at least a five percent
- 23 <u>interest in the agency.</u>
- 24 (h) The agency shall provide to the licensing authority written notification of a change in the legal name of any owner
- 25 and individuals person holding an interest in the agency of at least five percent within 30 days following the changes.
- 26 (i) The agency shall notify the local management entity within 24 hours of placement that a child may require Mental
- 27 Health, Developmental Disability or Substance Abuse services. <u>Services.</u>
- 28 (j) If a child-placing agency for foster care is monitored by a local management entity, the agency shall provide data
- 29 to the local management entity, entity as required by Department of Health and Human Services for monitoring and
- 30 reporting to the General Assembly.
- 31 (1) The agency shall notify the licensing authority [immediately] within 24 hours if the agency receives notice of
- 32 debarment that prohibits the agency from participating in State and Federal procurement contracts and covered non-
- 33 procurement transactions.
- 34
- **35** *History Note: Authority G.S. 131D-1; 131D-10.3; 131D-10.5; 143B-153;*
- 36 *Eff. February 1, 1986;*
- **37** *Amended Eff. July 18, 2002; July 1, 1990;*

1	Temporary Amendment Eff. July 1, 2003;
2	Amended Eff. August 1, 2017; October 1, 2008; August 1, 2004.

10A NCAC 70F .0208 is amended with changes as published in 31:15 NCR 1537 as follows:

2		
3	10A NCAC 70F	.0208 CONFIDENTIALITY
4	(a) The agency s	hall develop and enforce a policy on confidentiality that will; that:
5	(1)	identify identifies the individuals with access to or control over confidential information;
6	(2)	specify that persons who have access to records or specified information in a record be limited to
7		persons authorized pursuant to law. These persons include the client; the parents or guardian or
8		legal custodian when the client is a minor; agency staff; auditing, licensing, or accrediting personnel;
9		and those persons for whom the agency has obtained a signed consent for release of confidential
10		information;
11		specify that persons who have access to records or specified information in a record be limited to
12		persons authorized pursuant to law, including:
13		(A) the client:
14		(B) the parents, guardian, or legal custodian if the client is a minor;
15		(C) agency staff;
16		(D) auditing, licensing, or accrediting personnel; and
17		(E) those persons for whom the agency has obtained a signed consent for release of
18		confidential information;
19	(3)	require requires that when a client's information is disclosed, a signed written consent for release of
20		information is obtained on a consent for release form signed by from the parent(s), parent, guardian,
21		legal custodian custodian, or client, client if age 18 or older;
22	(4)	provide provides for a secure place for the storage of records with confidential information;
23	(5)	inform informs any individual with access to confidential information of the provisions of this Rule;
24	(6)	ensure ensures that, upon employment and whenever revisions are made to the policy, staff sign a
25		compliance statement which that indicates an understanding of the requirements of confidentiality;
26	(7)	permit permits a client to review his or her case record in the presence of agency personnel on the
27		agency premises, in a manner that protects the confidentiality of other family members or other
28		individuals referenced in the record, unless agency personnel determines the information in the
29		client's case record would be harmful to the client;
30	(8)	in cases of perceived harm to the client, document documents in writing any refusals refusal to share
31		information with the client, parents, guardian guardian, or legal custodian;
32	(9)	maintain maintains a confidential case record for each client;
33	(10)	maintain confidential personnel records for all employees (full-time, part-time and contracted); and
34	(11)	maintain confidential records for all volunteers and interns;
35	(b) A child-placi	ng agency for foster care and a residential maternity home may destroy in its office:
36	(1)	the closed record of a child or resident who has been discharged from foster care or residential
37		maternity care for a period of three years unless included in a federal or state fiscal audit or program

1		audit that is unresolved, then in which case the agency may destroy the record in its office when
2		released from all audits; and
3	(2)	a record three years after a child or resident has reached age the age of 4821, unless included in a
4		federal fiscal audit or program audit that is unresolved, then in which case the agency may destroy
5		the record in its office when released from all audits.
6	(c) All individu	al children, birth parents parents, and adoptive family records shall be permanently retained by the
7	agency. After a	period of seven years, the files may be microfilmed or scanned in accordance with provisions of G.S.
8	8-45.1, followin	g which the original files may be destroyed by a shredding process. The adoption agency may destroy
9	in <u>its</u> office the c	losed records of applicants who were not accepted or who did not have a child placed with them three
10	years after the o	date of their application, unless included in a federal or state fiscal audit or program audit that is
11	unresolved, then	the agency may destroy the record in its office when released from all audits.
12		
13	History Note:	Authority G.S. <u>131D-1;</u> [10D-10.3;] <mark>131D-10.3;</mark> 131D-10.5; 143B-153;
14		Temporary Adoption Eff. February 1, 2002;
15		Eff. July 18, 2002
16		Amended Eff. <u>August 1, 2017;</u> October 1, 2008.

10A NCAC 70F .0214 is adoption with changes as published in 31:15 NCR 1538 as follows:

3	10A NCAC 70F .0214 NORMALCY FOR FOSTER CHILDREN
4	(a) Child placing agencies and residential maternity homes shall develop and follow policies and procedures in
5	accordance with 131D-10.2. to implement the reasonable and prudent parent standard established in G.S. 131D-10.2A.
6	(b) The agency shall demonstrate compliance with policies and procedures that includes: include:
7	(1) appointment of a designated official(s) official to apply the reasonable and prudent parent standard when
8	determining whether to allow a child to participate in extracurricular, enrichment, cultural, and social
9	activities;
10	(2) documentation of <u>any</u> reasonable and prudent parenting parent standard decision making; decision;
11	(3) training for residential maternity home staff, child placing agency staff, and foster parents in the area of
12	reasonable and prudent parent standard; and
13	(4) supervision and support to staff and foster parents in the implementation of implementing the reasonable and
14	prudent parent standard.
15	
16	History Note: Authority G.S. 131D 10.2; 131D-10.2A; 131D-10.5; 131D-10.6; 143B-153;
17	Eff. <u>August 1, 2017.</u>

10A NCAC 70G .0402 is amended with changes as published in 31:18 NCR 1797 as follows:

	A NCAC 70	
	•	e context of the Rule indicates that the term has a different meaning the following definitions shall
_		es in Subchapter 70G:
	(1)	"Agency" means a child placing agency as defined in G.S. 131D-10.2 that is authorized by law to
		receive children for purposes of placement in foster homes or adoptive homes.
	(2)	"Family Foster Home" has the meaning as defined in G.S. 131D-10.2(8).
	(3)	"Family Foster Care" means a planned, goal-directed service in which the temporary protection and
		care of children take place in a family foster home. Family foster care is a child welfare service for
		children and their parents who must live apart from each other for a period of time due to abuse,
		neglect, dependency, or other circumstances necessitating out of home care. means foster care, as
		defined in G.S. 131D-10.2(9), that is provided in a family foster home.
	(4)	"Guardian" means means:
		(a) an individual as defined in G.S. 7B-600 who is appointed by the court to serve as the
		guardian of the person for a juvenile. juvenile:
		(b) The guardian shall have the care, custody, and control of the juvenile or may arrange a
		suitable placement for the juvenile and may represent the juvenile in legal actions before
		any court. The guardian may consent to certain actions on the part of the juvenile in place
		of the parent including marriage, enlisting in the armed forces and enrollment in school.
		The guardian may also consent to any necessary remedial, psychological, medical, or
		surgical treatment for the juvenile. Guardian also means an individual appointed by the
		clerk of court in North Carolina to exercise all the powers conferred by G.S. 35A-1241,
		including a standby guardian appointed under Article 21A of Chapter 35A whose authority
		has actually commenced <u>commenced;</u> and
		(c) also means an individual appointed in another jurisdiction according to the law of that
		jurisdiction who has the powers consistent with G.S. 35A-1241.
	(5)	"Legal Custodian" means a person or agency that has been awarded legal custody of a juvenile by a
		court of competent jurisdiction.
	(6)	"Licensing Authority" means the North Carolina Division of Social Services.
	(7)	"Out-of-Home Family Services Agreement" means is a Division of Social Services document
		prepared by a county department of social services required of all children regarding a child in the
		custody of a county department of social services receiving who receives family foster care services
		or therapeutic foster care services. This agreement is used to define defines the primary permanency
		plan; to identify plan, identifies the family's strengths and needs; to set needs, sets objectives and
		case activities to assist the family in resolving those issues that place the child at risk; to specify
		risk, specifies consequences if the plan does or does not succeed; and to establish succeed, and

1		establishes the alternative permanency plan if the primary plan does not succeed. The agreement
2		must address the services to be provided or arranged; the visitation plan designed to maintain links
3		with the family; expectations of the family, agency, placement provider and community members;
4		target dates; and expected outcomes.
5	(8)	"Owner" means any person who holds an the ownership interest of five percent or more of the
6		applicant. A person includes a sole proprietor, co-owner, partner or shareholder, principal or
7		affiliate, or any person who is the applicant or any owner of the applicant.
8	(9)	"Parent" means the birth parent or adoptive parent.
9	(10)	"Person-Centered Plan" means is a document prepared by the Division of Mental Health,
10		Developmental Disabilities and Substance Abuse Services document and must be completed on all
11		children regarding a child receiving therapeutic foster care services. services that includes The
12		person centered plan is the umbrella under which all planning for treatment, services services, and
13		supports occurs. Person centered planning begins with the identification of the reason the
14		individual/family is requesting assistance. It focuses on the identification of the individual's/family's
15		needs and desired life outcomes not just a request for a specific service. The plan captures all goals
16		and objectives and outlines each team member's responsibilities within the plan. support.
17	(<mark>11)</mark>	"Supervising Agency" means a county department of social services or a private child- placing
18		agency that is authorized by law to receive children for purposes of placement in foster homes or
19		adoptive homes. Supervising agencies are responsible for recruiting, training, and supporting foster
20		parents. Supervising agencies recommend the licensure of foster homes to the licensing authority.
21	<mark>(11)</mark> (1	2)"Social worker" [shall mean those who have] means an individual who has earned a bachelor's,
22		master's, or doctorate degree in social work from a social work program accredited by the Council
23		on Social Work Education (CSWE) as provided in the Social Worker Certification and Licensure
24		<u>Act (G.S. 90B).</u>
25	<mark>(12)</mark> (1	<u>3)</u> "Therapeutic Foster Care" means a foster home where <u>in which</u> the foster parent has received
26		additional training in providing care to children with behavioral behavioral, mental health health,
27		or substance abuse problems.
28	<mark>(13)</mark> (14	4) The "reasonable and prudent parent [standard", as defined in G.S.131D 10.2.] standard has the
29		meaning set forth in G.S. 131D 10.2A.
30		
31	History Note:	Authority G.S 131D-10.1; <mark>131D-10.2;</mark> <u>131D 10.2A;</u> 131D-10.3; 131D-10.5; 143B-153;
32		<i>Eff. October 1, 2008;</i>
33		<u>Amended Eff. August 1, 2017;</u>

10A NCAC 70G .0501 is amended with changes as published in 31:18 NCR 1798 as follows:

3	10A NCAC 70G .0501 PERSONNEL
4	(a) The executive director is responsible for the general management and administration of shall manage and administer
5	the agency in accordance with licensing requirements and policies of the governing body. The executive director shall
6	meet the requirements of a Social Services Program Administrator I as defined by the North Carolina Office of State
7	Personnel. Human Resources. A copy of these requirements can be obtained by contacting the Division of Social
8	Services at 828 669 3388 or by reviewing [reviewed] found at the following web site:
9	(http://www.osp.state.nc.us/CLASS_SPECS/Spec_Folder_03100_04099/PDF_Files/04077.pdf).
10	(http://www.oshr.nc.gov/state-employee-resources/classifications/job-classification). The college or university degree
11	shall be from a college or university listed at the time of the degree in the Higher Education Directory. This information
12	can be obtained by calling Higher Education Publications, Inc. at 1-888-349-7715. or [by viewing site] at:
13	http://www.hepinc.com.
14	(b) The social work supervisor is responsible for supervising, evaluating, and monitoring Social Work Supervisor or
15	Case Manager Supervisor shall supervise, evaluate, and monitor the work and progress of the social work Social Work or
16	[case management] <u>Case Management</u> staff. The <mark>social work supervisor</mark> <u>Social Work Supervisor</u> or [case manager
17	supervisor] Case Manager Supervisor shall meet the requirements of a Social Work Supervisor II as defined by the North
18	Carolina Office of State Personnel. Human Resources. A copy of these requirements can be obtained by contacting the
19	Division of Social Services at 828 669 3388 or by reviewing the following web site:
20	(http://www.osp.state.nc.us/CLASS_SPECS/Spec_Folder_03100_04099/PDF_Files/04016.pdf). found at
21	(http://www.oshr.nc.gov/state-employee-resources/classification/job-classification). The college or university degree
22	shall be from a college or university listed at the time of the degree in the Higher Education Directory. This information
23	can be obtained by calling Higher Education Publications, Inc. at 1 888 349 7715. or [by viewing the site] at:
24	http://www.hepinc.com. Social work supervisors Work Supervisors or Case Management Supervisors shall receive 24
25	hours of continuing education annually.
26	(c) The social worker [or case manager] is responsible for intake services, providing casework or group work services
27	for children and their families, conducting home-finding and assessment studies related to foster parents and planning
28	and coordinating the services and resources affecting children and their families. The Social Worker or Case Manager
29	shall provide intake services and casework or group work services for children and their families, conduct home-finding
30	and assessment studies related to foster parents and planning, and coordinate the services and resources affecting foster
31	<u>children and their families.</u> The <mark>social worker</mark> <u>Social Worker or [case manager] Case Manager</u> shall meet the
32	requirements of a Social Worker II as defined by the North Carolina Office of State Personnel. Human Resources. A
33	copy of these requirements can be obtained by contacting the Division of Social Services at 828 669 3388 or by
34	reviewing [reviewed] found at the following web site: (http://www.osp.state.nc.us/CLASS_SPECS/Spec_Folder_03100-
35	04099/PDF_Files/04012.pdf). (http://www.oshr.nc.gov/state-employee-resources/classification/job-classification). The
36	college or university degree shall be from a college or university listed at the time of the degree in the Higher Education
37	Directory. This information can be obtained by calling through Higher Education Publications, Inc. at 1-888-349-7715.

- 1 [or by viewing at site] at: http://www.hepinc.com. Social workers Workers or Case Managers shall receive 24 hours of
- 2 continuing education annually.
- 3 (d) Social workers Workers or case managers Case Managers serving children in family foster homes shall serve no
- 4 more than 15 children. Social workers Workers or case managers Case Managers serving children in therapeutic foster
- 5 homes shall serve no more than 12 children. Social workers Workers or [case managers] Case Managers providing
- 6 foster home licensing services (licensing workers) (in this Rule, "licensing workers") shall serve no more than 32 foster
- 7 families. Agencies providing family foster care services may combine the duties of the social worker or case manager
- 8 and licensing worker and serve no more than ten children and ten foster families. Agencies providing therapeutic foster
- 9 care services may combine the duties of the social worker or case manager and licensing worker and serve no more than
- 10 eight children and eight foster families.
- 11 (e) Supervision of social workers or case managers shall be assigned as follows:
- 12

Supervisors Required	Social Workers or Case Managers
0	0-4
	(executive director serves as social work
	or <u>case manager</u> supervisor)
1	5
2	6-11
3	12-17
There shall be one additional supervisor for every one to five additional	
social workers or case managers.	

- 14 (f) The [child placing] agency shall ensure that the [social work supervisors] Social Work Supervisors or Case
- 15 Management Supervisors and [social workers] Social Workers or Case Managers receive training in the areas of child
- 16 development, permanency planning methodology, family systems and relationships, child sexual abuse, [trauma informed
- 17 **care**] trauma-informed care, and the reasonable and prudent parent standard.
- 18
- 19 *History Note:* Authority G.S. <u>131D-10.2A;</u> 131D-10.5; 143B-153;
- 20 *Eff. October 1, 2008;*
- 21 <u>Amended Eff. August 1, 2017;</u> June 1, 2010.

10A NCAC 70G .0503 is amended with changes as published in 31:18 NCR 1799 as follows:

- 3 10A NCAC 70G .0503 PLACEMENT SERVICES
- 4 (a) The agency shall assist the parents or guardian to assume or resume their parental roles and
- 5 responsibilities as specified in the out-of-home family services agreement or person-centered plan.
- 6 (b) The agency shall assist the parents or guardian to gain access to the services necessary to accomplish
- 7 the goals and objectives specified in the out-of-home family services agreement or person-centered plan.
- $\mathbf{8}$ (c) The agency shall encourage contacts between parents or guardian and children after placement, in
- 9 accordance with the visitation and contact plan.
- 10 (d) The agency shall have a signed agreement with the parents, guardian guardian, or legal custodian of the
- 11 child in care which that includes the expectations and responsibilities of the agency and the parents,
- 12 guardian guardian, or legal custodian for carrying out the steps to meet the out-of-home family services
- 13 agreement or goals of the person-centered plan goals, plan, the financial arrangements for the child in care,
- 14 and visitation and contact plans.
- 15 (e) The agency shall select the most appropriate form of <u>family foster</u> care <u>or therapeutic foster care</u> for the
- 16 child consistent with the needs of the child, parents parents, and guardian for family foster care or
- 17 therapeutic foster care. guardian. The agency shall provide for any services the child may need and shall
- 18 make every effort and, when placing the child to child, shall select the least restrictive and most appropriate
 19 setting closest to the child's home.
- 20 (f) The agency shall document any need to place a child in a family foster home or therapeutic foster home
- 21 that is beyond a radius of 150 miles from the child placing agency and the child's parents or guardian.
- 22 (g) The agency, when selecting care, shall take into consideration a child's racial, cultural, ethnic, and
- 23 religious heritage and preserve them to the extent possible without jeopardizing the child's right to care.
- 24 (g) The agency, when selecting care, shall [make concerted efforts to] maintain the child's connections to
- 25 <u>their neighborhood, community, faith, extended family, tribe, [school]</u> <u>school, and friends.</u>
- 26 (h) The agency shall involve the parents or guardian in the selection of the placement. In accordance with
- 27 7B-903.1(d) 7B-903.1(d), when the supervising agency intends to change a child's placement, they it shall
- 28 give the parent or guardian notice of its intention unless precluded by emergency circumstances. Where
- 29 <u>emergency circumstances exist, the supervising agency shall notify the parent or guardian within 72 hours</u>
- 30 of the placement change.
- 31 (i) The family foster home or the therapeutic foster home shall be licensed by the Division of Social
- 32 Services. Each family foster home or the therapeutic foster home in which a foster child is placed shall be
- 33 <u>licensed by the Division of Social Services</u>.
- 34 (j) The agency social worker for the child shall become acquainted with the child and family prior to
- 35 placement, except when a child is placed on an emergency basis or in the case of if the child is an infant.
- 36 (k) The agency social worker shall help the child understand the reasons for placement and prepare him or
- 37 her for the new environment. The social worker shall, except when placing under emergency conditions,

- 1 arrange at least one preplacement visit for the child and shall be available to the child, the parents or
- 2 guardian, and the foster parents for supportive services.
- 3 (1) No child shall be accepted into a foster home without having had a current medical examination by a
- 4 licensed medical provider (physician, physician's assistant or nurse practitioner). Medical examinations
- 5 completed by a licensed medical provider within 12 months prior to the admission of the child in foster
- 6 care are considered current. If a child has not had a medical examination by a licensed medical provider
- 7 within 12 months prior to admission, the agency shall arrange a medical examination for the child within
- 8 two weeks after admission or sooner if indicated by the child's health condition. The medical examination
- 9 report shall include a signed statement by a licensed medical provider specifying the child's medical
- 10 condition and medications prescribed and indicating the presence of any communicable disease which may
- 11 pose a risk of transmission in the foster home. If a child is in the custody of a county department of social
- 12 services, is already scheduled to have and is having a medical examination completed annually, and is
- 13 entering a foster home, the schedule of annual medical examinations do not have to be changed. A copy of
- 14 the most recent medical examination report shall be obtained from the responsible county department of
- 15 social services by the agency.

16 (m) The agency shall obtain and record a developmental history for each child.

- 17 (n)(1) The agency shall supervise the care of the child and shall coordinate the planning and services for the
- 18 child and family family, as stated in the out-of-home family services agreement or person-centered plan.
- 19 (o)(m) Children in family foster homes and therapeutic foster homes shall have a monthly face-to-face
- 20 contact by the social worker or case manager or more if specified in the out-of-home family services
- 21 agreement or person-centered plan. The parents or guardian of children in family foster care and
- 22 therapeutic foster care shall have a monthly face-to-face contact by the social worker or case manager
- 23 unless the out-of-home family services agreement or person-centered plan indicates a different schedule of
- face-to-face contacts.
- 25 (p)(n) The agency social worker or case manager shall meet with the children and the parents, guardian
- 26 <u>guardian</u>, or legal custodian, either separately or together based on the out-of-home family services
- 27 agreement or person-centered plan plan, to assess and work on the following:
- 28 (1) progress in resolving problems which precipitated placement;
- **29** (2) parent and child relationship difficulties;
- **30** (3) adjustment to separation;
- **31** (4) adjustment to placement; and
- 32 (5) achievement of out-of-home family services agreement goals or person-centered plan goals-; and
- 33 (6) the reasonable and prudent parent standard.
- (q)(o) The agency shall refer the child's parents or guardian to other agencies in the community if they
- 35 require services the agency does not provide and it is these services are specified in the out-of-home family
- 36 services agreement or person-centered plan. The agency shall receive reports from the agency providing
- 37 services regarding the parents' or guardian's progress or lack of progress.
 - 2

1	(r)(p) The agency shall make provisions for social work, mental health health, and health care services		
2	services, as stated in the out-of-home family services agreement or person-centered plan.		
3	(s)(q) The agency shall give foster parents assistance, training, consultation, and emotional support in		
4	caring for children and in resolving problems related to their role as foster parents. Foster parents shall		
5	have one face-to-face contact per month by the social worker or case manager unless the out-of-home		
6	family services agreement or person-centered plan indicates a different schedule of face-to-face contacts for		
7	each foster child placed in the home. Phone support and 24-hour on-call support shall be provided to foster		
8	parents. Therapeutic foster care parents shall have at least 60 minutes of supervision by a qualified		
9	professional as defined in 10A NCAC 27G .0104 on a weekly basis for each therapeutic foster child placed		
10	in the foster home. <u>home</u> unless the <mark>[person centered plan]</mark> person centered plan indicates a different		
11	schedule of supervision for each therapeutic foster child placed in the home. At least fifty percent of the		
12	supervision shall be [face to face] face-to-face in the foster home unless specified differently in the person-		
13	centered plan. person centered plan. Therapeutic Foster Parents foster parents providing treatment to		
14	children/youth children or youths with substance abuse treatment needs shall receive supervision from a		
15	qualified substance abuse professional as defined in 10A NCAC 27G .0104. The agency shall provide each		
16	foster parent with a Foster Parent Handbook that outlines agency procedures, requirements and		
17	expectations.		
18			
19	History Note: Authority G.S. <u>131D-10.2;</u> <u>131D-10.2A;</u> 131D-10.5; 143B-153;		
20	<i>Eff. October 1, 2008;</i>		
21	Amended Eff. <u>August 1, 2017;</u> November 1, 2009.		

10A NCAC 70G .0504 is amended with changes as published in 31:18 NCR 1800 as follows:

2 3

4

16

10A NCAC 70G .0504OUT-OF-HOME FAMILY SERVICES AGREEMENT FOR CHILDRENRECEIVING FAMILY FOSTER CARE SERVICES

5 (a) The agency shall develop a written out-of-home family services agreement within 30 days of admission of a child 6 in a family foster home. The out-of-home family services agreement shall be developed in cooperation with the child, 7 parents, guardian or legal eustodian, <u>eustodian</u>, and <u>and</u>, <u>when possible</u>, the child and foster parents when possible. 8 parents. The out-of-home family services agreement shall be based upon an assessment of the needs of the child, 9 parents or guardian. The out-of-home family services agreement shall include goals stated in specific, realistic, and 10 measurable terms and plans that are action oriented, including responsibilities of staff, parents or guardian, other 11 family members, legal custodian, foster parents parents, and the child. The agreement shall address the following 12 services to be provided or arranged: 13 (1)the visitation plan designed to maintain links with the family; 14 (2)the expectations of the family, agency, placement provider, and community members;

15 (3) target dates; and

(4) <u>expected outcomes.</u>

(b) The out-of-home family services agreement shall be reviewed by the agency within 60 days of placement; placement, the second out-of-home family services agreement review shall occur within 90 days of the first review, and subsequent reviews shall be held every six months. Parents, guardian, legal custodian, the foster parents, the child, as well as any individual or agency and individuals or agencies designated as providing services, services shall participate in the reviews to determine the child's and parents' or guardian's progress or lack of progress towards meeting the goals and objectives, objectives and to determine changes that need to be made in the out-of-home family services agreement.

- (c) If the legal custodian is a county department of social services, the child placing agency, the department of social services, the parents or guardian, the foster parents, other service providers providers, and the child shall develop a single out-of-home family services agreement. A copy of the child's out-of-home family services agreement shall be provided to the parents, guardian, the executive director of the child-placing agency or his or her designee designee, and the foster parents by the county department of social services serving as the legal custodian. The child's out-of-home family services agreement shall be provided to other agencies and individuals listed as providing services to the child and to his or her parents or guardian. An age appropriate age-appropriate version of the out-of-home family
- 31 services agreement shall be written and provided to each child by the legal custodian.
- 32 (d) The child-placing agency and foster parents shall attend be informed of court reviews, child and family team
 33 meetings, agency reviews and permanency planning action team meetings. The Out-of-Home Family Services
 34 Agreement (DSS-5240 or DSS-5241) and the Transitional Living Plan may serve as the out-of-home family services
- 35 agreement for the child placing agency if the documents reflect input and participation by the [parents',] parents,
- 36 child placing agency and foster parents.
- 37

1	History Note:	Authority G.S. 131D-10.5; <u>131D-10.10;</u> 143B-153;
2		<i>Eff. October 1, 2008;</i>
3		Amended Eff. <u>August 1, 2017;</u> November 1, 2009.

10A NCAC 70G .0506 is amended with changes as published in 31:18 NCR 1801 as follows:

2		
3	10A NCAC 70G	.0506 CLIENT RECORDS
4	(a) The agency shall maintain an individual record for each child receiving foster care services which that contains:	
5	(1)	an application for services that includes:
6		(A) demographic information about the child, including name, address, sex, race, birth date,
7		birth place, educational information, medical information information. and client record
8		number;
9		(B) demographic information about the parents or guardian of the child, including names,
10		addresses, telephone numbers, birth dates, races, religion religion, and marital status;
11		(C) demographic information about the siblings and other relatives of the child, including
12		names, addresses, and telephone numbers;
13		(D) the reasons the child was removed from the home of his or her parents;
14		(E) a record of the child's prior placements with names and addresses of foster parents and
15		other caregivers and dates of care provided by each foster parent or caregiver, and
16		(F) the services the agency shall provide the child and his or her parents or guardian. guardian:
17	(2)	legal documents of importance to the child child, including a birth certificate and any court
18		dispositions;
19	(3)	pre-admission medical examination report or a medical examination report completed within two
20		weeks of admission (unless the child's health status indicates the completion of a medical
21		examination report sooner) and copies of subsequent medical examination reports;
22	(4)	medical reports including medical history, cumulative health history, immunization records, and
23		available psychological and psychiatric reports; and if applicable:
24		(A) documentation of mental illness, developmental disabilities disabilities, or substance abuse
25		diagnosis coded according to the latest edition of the Diagnostic and Statistical Manual of
26		Mental Disorders; -Fourth Edition-Revised DSM IV;
27		(B) documentation of screening and assessment;
28		(C) medication orders and Medication Administration Record (MAR);
29		(D) documentation of medication administration errors;
30		(E) documentation of adverse drug reactions; and
31		(F) orders and copies of lab tests;
32	(5)	educational assessments, records records, and reports of school-age children;
33	(6)	intake study which that includes initial social assessment and background of parents or guardian and
34		the circumstances leading to the decision to place the child;
35	(7)	signed out of home family services agreement or person centered plan along with out of home
36		family services agreement or person-centered plan reviews which reflect the status of the child,
37		parents or guardian in relation to the out-of-home family services agreement or person-centered plan

1		and any progress or lack of progress in the goals of the out of home family services agreement or
2		person centered plan;
3		one of the following:
4		(A) a signed out-of-home family services agreement and reviews that reflect the status of the
5		child, parents, or guardian, and any progress or lack of progress in the goals;
6		(B) a person-centered plan and reviews that reflect the status of the child, parents, or guardian,
7		and any progress or lack of progress in the goals; or
8		(C) a person-centered plan along with an out-of-home family services agreement and reviews
9		that reflect the status of the child, parents, or guardian, and any progress or lack of progress in the
10		goals;
11	(8)	documentation of services provided;
12	(9)	documentation which reflects that reports the dates and content of social worker's or case manager's
13		visits with the child;
14	(10)	documentation of the agency's involvement with the parents, guardian guardian, or legal custodian,
15		including services offered, delivered, or rejected;
16	(11)	documentation which that includes the content of any administrative or service reviews;
17	(12)	a visitation and contact plan that specifies the child's contacts with parents, guardian, siblings and
18		other family members members, and individuals who may have contact with the child;
19	(13)	consents for release of information;
20	(14)	a signed statement from the parents, guardian guardian, or legal custodian, granting permission to
21		seek emergency care from a hospital or licensed medical provider;
22	(15)	emergency information for each child that shall include the name, address address, and telephone
23		number of the person to be contacted in case of sudden illness or accident and the name, address
24		address, and telephone number of the child's preferred licensed medical provider;
25	(16)	authorization from the parents, guardian, legal custodian <u>custodian,</u> or licensed medical provider to
26		administer non-prescription medications;
27	(17)	consents for time-limited audio-visual recordings signed by the parents, guardian guardian, or legal
28		custodian, and child, the child if 12 years of age or older;
29	(18)	documentation of searches for drugs, weapons, contraband <u>contraband</u> , or stolen property, including
30		date and time of the search, and action taken by foster parents and the agency, name of foster parent
31		informing the agency, the date and time the agency is informed of the search, the date and time of
32		the notification to the child's parents, guardian guardian, or legal custodian; and
33	(19)	discharge summary including date and time of discharge, the name, address, telephone number, and
34		relationship of the person or agency to whom the child was discharged, a summary of services
35		provided during eare, care and needs which remain to be met, and plans for the services needed to
36		meet these goals.

1	(b) If the agency	y maintains a separate record on the parents and guardians of children whom they place into care, the
2	parents' or guardians' record shall contain:	
3	(1)	demographic information including names, addresses, birth dates, races, religion, family
4		composition;
5	(2)	social histories, including any psychological or psychiatric reports and medical histories;
6	(3)	strengths and needs of the parents or guardian and the services required;
7	(4)	signed agreements between the agency and parents or guardian;
8	(5)	summary of dates of contacts and progress toward goals;
9	(6)	case review reports; and
10	(7)	discharge summary.
11	(c) (b) Docume	ntation shall be entered into the child's, parents' or guardian's records within five days of occurrence.
12	The agency shall	Il document events and enter information required by the Rule in the record of the child within five
13	days of the even	tt or receipt of the information by the agency.
14	(d) (<u>c</u>) The agen	cy shall keep separate records for each family foster home which that contains:
15	(1)	the agency application;
16	(2)	the mutual home assessment;
17	(3)	the medical examination reports;
18	(4)	the fire inspection safety report;
19	(5)	the environmental conditions checklist;
20	(6)	proof of high school diploma or GED; GED of <u>each foster parent;</u>
21	(7)	the dates and content of worker's contacts with the foster family; family by an agency representative;
22	(8)	the training record that includes all required and ongoing training;
23	(9)	the foster parent agreement signed by foster parents and agency representative;
24	(10)	the discipline agreement signed by foster parents and agency representative;
25	(11)	three references relevant to the role and responsibilities of a foster parent;
26	(12)	the annual assessment of strengths and needs of the foster family in providing foster care to children;
27	(13)	a chronological record of all placements of children receiving care in the home, including the dates
28		of their care and an assessment of the care;
29	(14)	the written approval letter from executive director or his or her designee authorizing foster parents
30		to administer physical restraint holds, if applicable;
31	(15)	a signed statement by the foster parents and adult members of the household that they have not been
32		found to have abused or neglected a child or have not been a respondent in a juvenile court
33		proceeding that resulted in the removal of a child or has had child protective services involvement
34		that resulted in the removal of a child;
35	(16)	a signed statement by the foster parents and adult members of the household that they have not been
36		confirmed or substantiated for abusing, <mark>neglecting</mark> neglecting, or exploiting a disabled adult;

1	(18)(17) documentation of the results of the search of the Responsible Individual's List as defined described
2		in 10A NCAC 70A .0102 for all adult members of the household that indicate they have not had
3		child protective services involvement resulting in a substantiation of child abuse or serious neglect;
4	<mark>(18)</mark> (18)	signed statement by the foster parents and adult members of the household that they have not been
5		a domestic violence perpetrator; never committed an act of domestic violence upon another person;
6	(19)	documentation of the results of the search of the North Carolina Sex Offender and Public Protection
7		Registry of all adult members of the household;
8	(20)	documentation of the results of the search of the North Carolina Health Care Personnel Registry
9		pursuant to G.S. 131E-256 of all adult members of the household;
10	(21)	copies of waivers, as specified in authorized by 10A NCAC 70L .0102; and
11	(22)	when closed, a summary containing reasons for the closing of the home and an assessment of the
12		strengths and needs of the foster family in providing foster care to children. children;
13	(23)	documentation of the results of criminal record [eheck(s)] checks of all adult members of the
14		household;
15	<u>(24)</u>	fingerprint clearance letters of all adult members of the household;
16	(25)	documentation of the results of child abuse and neglect registry checks of every state where the
17		foster parent resided in the past five years; and
18	(26)	documentation of the results of the search of the North Carolina Department of Public Safety,
19		Division of Adult Correction, Offender Information for all adult members of the household.
20		
21	History Note:	Authority G.S. 131D-10.5; 143B-153;
22		<i>Eff. October 1, 2008;</i>
23		Amended Eff. <u>August 1, 2017;</u> May 1, 2010.

10A NCAC 70G .0507 is amended with changes as published in 31:18 NCR 1803 as follows:

2 3 10A NCAC 70G .0507 CLIENT RIGHTS

4 (a) The agency shall develop and implement policies and procedures to protect the individual rights and dignity of

- 5 children and families who are provided services by the agency.
- 6 (b) The agency shall have a client's and family's rights policy that complies with 10A NCAC 70E .1101(a).

7 (c) The agency shall have a policy that prohibits direct involvement by a child in funds solicitation in soliciting funds

8 for the agency.

- 9 (d) The agency shall have a policy, which policy that prohibits the child's participation in any activities involving
- 10 audio or visual recording and research without the voluntary signed, time-limited consent of the parents, guardian or
- 11 legal custodian and child, <u>custodian, and the child</u> if 12 years of age or older.
- 12 (e) Each agency shall ensure that information relative to about AIDS or related conditions is disclosed only in
- 13 accordance with the communicable disease laws-as specified in G.S. 130A-143.
- 14 (f) The agency shall have a policy to comply with the reasonable and prudent parent standard in accordance with G.S.

15 131D 10.2.<u>131D-10.2A</u>.

- 16
- **17** *History Note: Authority G.S.* **<u>131D-10.2;</u> <u>131D-10.2A;</u> 131D-10.5; 143B-153;**
- 18 *Eff. October 1, 2008;*
- 19 <u>Amended Eff. August 1, 2017.</u>

10A NCAC 70G .0510 is amended with changes as published in 31:18 NCR 1803 as follows:

- 2 3 10A NCAC 70G .0510 **MEDICATION ADMINISTRATION REQUIREMENTS HEALTH SERVICES** 4 (a) The agency shall have written policies and procedures regarding foster parents administering medications to 5 children placed in their home that shall be discussed with each child and the child's parents, guardian, or 6 legal custodian, custodian prior to or upon placement. 7 (b) These policies and procedures shall address medication: 8 administration: (1)9 (2)dispensing, packaging, labeling, storage storage, and disposal; 10 (3) review: 11 (4) education and training; and 12 documentation, including medication orders, Medication Administration Record (MAR), orders and (5) 13 copies of lab tests, and medication administration errors and adverse drug reactions. reactions; and 14 record in a medical administration record $\frac{(MAR)}{(MAR)}$ (MAR), provided by the supervising $\frac{1}{(MAR)}$ (6) 15 agency, all medications administered to each child. The MAR shall include the following: child's 16 name; the name, strength, and quantity of the medications; instructions for administering the 17 medications; the date and time the medication is administered, discontinued, or returned to the 18 supervising agency or the person legally authorized to remove the child from foster care; the name 19 or initials of the person administering or returning the medications; the child's request for changes 20 or clarifications concerning medications; and the child's refusal of any prescribed medications. 21 (c) Upon discharge of a child from foster care, the foster parents or the agency shall return prescription medication to 22 the person or agency legally authorized to remove the child from foster care. Unwanted, out-dated, improperly labeled, 23 damaged, adulterated adulterated, or discontinued prescription medications shall be returned to a pharmacy for 24 disposal. disposed in accordance with the Federal Drug Administration guidelines found at: [<mark>http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm101653.htm.</mark>] 25 26 http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm101653.htm, incorporated by reference with subsequent 27 amendments and editions. 28 (d) The agency shall ensure that each child started or maintained on a medication by a licensed medical provider 29 receives either oral or written education regarding the prescribed medication by the licensed medical provider or his 30 or her designee. In instances where the ability of the child to understand the education is questionable, as determined 31 by a licensed medical or mental health provider, the agency shall ensure that a responsible person receives either oral 32 or written education regarding the prescribed medication by the licensed medical provider or his or her designee and 33 provides either oral or written instructions to the child. The agency shall ensure that the medication education provided 34 is sufficient to enable the child or other responsible person to make an informed consent, to safely administer the 35 medication and to encourage compliance with the prescribed regimen. 36 (e) [No child shall be accepted into a foster home without having had a current medical examination by a licensed
- 37 medical provider (physician, physician's assistant or nurse practitioner).] The agency shall ensure that each child shall

1	have a current r	nedical examination. Medical examinations completed by a licensed medical provider (physician,
2	physician's assis	stant or nurse practitioner) (in this Rule, "licensed medical provider") within 12 months prior to the
3	admission of the	child in foster care [are] shall be considered current. If a child has not had a medical examination by
4	a licensed medic	al provider within 12 months prior to admission, the agency shall arrange a medical examination for
5	the child within	two weeks after admission or sooner if indicated by the child's health condition. The medical
6	examination rep	ort shall include a signed statement by a licensed medical provider specifying the child's medical
7	condition and me	edications prescribed and indicating the presence of any communicable disease which may pose a risk
8	of transmission	in the foster home. If a child is in the custody of a county department of social services, is already
9	scheduled to hav	e [<mark>and is having]</mark> a medical examination completed annually, and is entering a foster home, <u>home</u> the
10	schedule of annu	al medical examinations [do not have] are not required to be changed. A copy of the most recent
11	medical examination	ation report shall be obtained from the responsible county department of social services by the agency.
12	(f) The agency s	hall obtain and record a developmental history for each child.
13	(g) Children sha	ll have had a dental <mark>[examination,]</mark> examination by a licensed [dentist,] dentist within one year prior
14	to admission or	arrangements shall be made for an exam within six weeks after admission and annually thereafter.
15	The agency shall	l document dental services in the child's record.
16		
17	History Note:	Authority G.S. 131D-10.5;
18		<i>Eff. October 1, 2008; <u>2008;</u></i>
19		Amended Eff. August 1, 2017.

10A NCAC 70G .0512 is amended with changes as published in 31:18 NCR as follows:

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3 10A NCAC 70G .0512 PHYSICAL RESTRAINT HOLDS, BEHAVIOR MANAGEMENT AND 4 DISCIPLINE

(a) Agencies using physical restraint holds If a foster parent or agency staff member uses a physical restraint hold. 5 6 the agency staff shall, within 72 hours of an incident involving a physical restraint, review the incident report to ensure 7 that correct steps were followed and forward the report to the parents, guardian or legal custodian and the licensing 8 authority on a report form developed by the licensing authority. 9 (b) Agencies shall submit a report to the licensing authority by the 10^{th} day of each month indicating the number of 10 physical restraint holds used during the previous month on each child and any injuries that resulted. 11 (c) Agencies shall maintain reports of physical restraint holds in a manner consistent with the agency's risk 12 management policies (clinical decisions and activities undertaken to identify, evaluate evaluate, and reduce the risk of 13 injury to clients, staff, and visitors and reduce the risk of loss to the agency) and shall make-them the reports 14 available to the licensing authority upon request. (d) Foster parents and agency staff who utilize physical restraint holds shall receive at least 16 hours of training in 15 16 Agencies shall provide foster parents and agency staff authorized to use physical restraint holds with 16 hours of 17 training in behavior management, including techniques for de-escalating problem behavior, behavior; the appropriate 18 use of physical restraint holds, holds; monitoring of vital indicators, indicators, and debriefing children, foster parents 19 parents, and agency staff involved in physical restraint holds. Foster parents and agency staff authorized to use 20 physical restraint holds shall annually complete at least eight hours of behavior management training, Agencies shall 21 provide foster parents and agency staff authorized to use physical restraint holds with eight hours of behavior management training annually, including techniques for de-escalating problem behavior. Foster parents and agency 22 23 staff shall be trained by instructors who have met the following qualifications and training requirements: Instructors 24 who train foster parents and agency staff shall have met the following qualifications and training requirements: 25 trainers shall demonstrate competence by scoring 100 percent on testing in a training program aimed (1)26 at preventing, reducing and eliminating the need for restrictive interventions; 27 (2)trainers shall demonstrate competence by scoring 100 percent on testing in a training program 28 teaching the use of physical restraint; trainers shall demonstrate and competence by scoring a 29 passing grade on testing in an instructor training program; the training shall be competency-based, competency-based and shall include measurable learning 30 (3) 31 objectives, measurable testing (written and by observation of behavior) on those objectives 32 objectives, and measurable methods to determine passing or failing the course; 33 (4) the content of the instructor training shall be approved by the Division of Mental Health, 34 Developmental Disabilities and Substance Abuse Services and shall include presentation of 35 understanding the adult learner, methods of teaching content of the course, evaluation of trainee 36 performance, and documentation procedures; Services;

- 1 (5) trainers shall be retrained at least annually and demonstrate competence in the use of physical 2 restraint; restraints; 3 (6) trainers shall be trained in CPR; CPR such as those provided by the American Red Cross, American 4 Heart Association, or equivalent organizations. Division staff shall determine that an organization 5 is substantially equivalent if the organization is already approved by the Department or meets the 6 same standard of care as the American Heart Association or American Red Cross. The Division 7 shall not accept web-based trainings for certification in CPR; 8 (7) trainers shall have been coached experience in teaching the use of restrictive interventions at least 9 two times with a positive review by the coach; 10 trainers shall teach a program on the use of physical restraints at least once annually; and (8) 11 (9) trainers shall complete a refresher instructor training at least every two years. 12 (e) Foster parents and agency staff shall only use physical restraint holds approved by the North Carolina Interventions 13 (NCI) Quality Assurance Committee, Division of Mental Health, Developmental Disabilities and Substance Abuse 14 Services, 3022 Mail Service Center, Raleigh, NC 27699-3022. Requests for approval shall be submitted to the North 15 Carolina Interventions (NCI) Quality Assurance Committee, Division of Mental Health, Developmental Disabilities 16 and Substance Abuse Services, 3022 Mail Service Center, Raleigh, NC 27699-3022. Services. (f) Physical restraints [where a person ends up] that place a person in a prone or face-down position are prohibited. 17 18 (f) (g) Foster parents and agency staff shall receive written approval from the executive director or his or her designee 19 of the supervising agency to administer physical restraint holds. The executive director of the agency or his or her 20 designee shall issue approvals to administer physical restraint holds to foster parents and agency staff, pursuant to the 21 rules in this Chapter. A copy of this letter shall be placed in the foster home record of foster parents and the personnel 22 file of agency staff members. 23 (\mathbf{g}) (h) Agencies shall complete an annual review of the discipline and behavior management policies and techniques 24 to verify that the physical restraint holds being utilized used are being applied properly and safely. The review of the 25 policies and techniques shall be documented and submitted to the licensing authority at the time of relicensure as part 26 of the reapplication process. 27 Authority G.S. 131D-10.5; G.S. 131D-10.5A; 143B-153; [P.L.113-183;] 28 History Note: 29 *Eff. October 1, 2008;* 30
 - Amended eff. August 1, 2017; November 1, 2009.

10A NCAC 70G .0513 is amended with changes as published in 31:18 NCR 1804 as follows:

2		
3	10A NCAC 7(G.0513 CRITICAL INCIDENTS
4	(a) The agency	y shall have written policies and procedures for reporting critical incidents.
5	(b) The agence	ey shall follow policies and procedures for handling any suspected incidents of abuse or neglect of a
6	child involving	g staff, subcontractors, volunteers, interns, interns, or foster parents in a foster home supervised by the
7	agency. The p	olicies and procedures shall include:
8	(1)	a provision for reporting any suspicion of abuse or neglect to the appropriate county department of
9		social services for investigation;
10	(2)	a provision for recording any suspected incident of abuse or neglect and for reporting it to the
11		executive director or to the governing body;
12	(3)	a provision for notifying parents, guardian guardian, or legal custodian;
13	(4)	a provision for preventing a recurrence of the alleged incident pending the investigative assessment;
14	(5)	a policy concerning personnel action to be taken when the incident involves a staff member,
15		subcontractor, volunteer volunteer, or intern;
16	(6)	a policy concerning the action to be taken when the incident involves a foster parent;
17	(7)	a provision for submitting a critical incident report to the licensing authority within 72 hours of the
18		incident being accepted for an investigative assessment investigation by a county department of
19		social services; and
20	(8)	a provision for submitting written notification to the licensing authority within 72 hours of the case
21		decision by the county department of social services conducting the investigative assessment.
22	(c) Critical inc	ident reports shall be submitted to the licensing authority by the executive director or his or her designee
23	on a form prov	vided by the licensing authority within 72 hours of the critical incident. Critical incidents involving a
24	child in placen	nent in a foster home supervised by the agency shall include the following:
25	(1)	a death of a child;
26	(2)	reports of abuse and neglect;
27	(3)	an admission to a hospital;
28	(4)	a suicide attempt;
29	(5)	a runaway lasting more than 24 hours; and
30	(6)	an arrest for violations of state, municipal, county or federal laws.
31	(d) Document	ation of critical incidents shall include:
32	(1)	the name of child or children involved;
33	(2)	the date and time of incident;
34	(3)	a brief description of incident;
35	(4)	the action taken by staff;
36	(5)	a need for medical attention;
37	(6)	the name of staff involved and person completing the report;

1	(7)	the <mark>Name name</mark> of child's parent, guardian or legal custodian <mark>notified</mark> who was notified and the date
2		and time of notification, notification; and; and
3	(8)	the approval of supervisory or administrative staff reviewing the report.
4	(e) When If the	re is a death of a child in placement in a foster home supervised by the agency, the executive director
5	or his or her des	ignee shall notify the parent, guardian guardian, or legal custodian and the licensing authority within
6	72 hours of the c	leath of the child.
7	(f) Critical incid	lent reports shall be maintained in manner consistent with the agency's risk management policies and
8	shall include clir	nical decisions and activities undertaken to identify, evaluate evaluate, and reduce the risk of injury to
9	clients, <mark>staff</mark> staf	f, and visitors and reduce the risk of loss to the agency and shall be made available to the licensing
10	authority upon re	equest.
11	(g) When a foste	r parent determines that a foster child under the age of 18 is missing, they shall notify the appropriate
12	law enforcement	authority immediately, authority within 24 hours.
13		
14	History Note:	Authority G.S. 131D-1; 131D-10.5; <mark>131D-10.5A;</mark> 143B-153; <u>P.L. 113- 183;</u>
15		<i>Eff. October 1, 2008;</i>
16		Amended Eff. <u>August 1, 2017;</u> November 1, 2009.