

HOME STUDY OUTLINE

Michigan Department of Human Services

Case #:
Case Name:
Worker Load #:
Worker Name:
POS Agency:
Date Child Entered Care:

Children's Name and Ages(s):

1. Name of Caregiver(s):
Address:
Phone Number:

2. Household Members:

	NAME	DOB	SS#*	RELATIONSHIP TO CHILD	ID CONFIRMED
"Click Here and Type"					

Describe the family connection which makes up the relation.

"Click Here and Type"

* Social Security Numbers must be redacted from all written reports.

3. Dates of contact with household members, including on-site visit:

DATE	TYPE OF CONTACT
"Click Here and Type"	"Click Here and Type"

4. Date Home Study Completed:

5. Date of Criminal History Check:

Results of Criminal History Check:

N/A: No Criminal History

- a. If there is a criminal history, is the conviction for child abuse/neglect, spousal abuse, a crime against children (including pornography) or crime involving violence, rape, sexual assault or homicide, but not including other physical assaults or battery?

Yes: **Placement is prohibited:** Document reason and rationale for denying the placement.

No: List all other offenses. Describe the length of time since the offense, any services completed that rectified the situation, and any threatened risk of injury or harm to the child placement.

"Click Here and Type"

- b. Address any risk factors that might impact the safety of the child and describe what protective interventions are in place currently.

6. Date of Central Registry Check:

Results of Central Registry Check:

N/A: No CPS History

Yes, there is a history of abuse/neglect.

- a. If there is a history of abuse or neglect, describe the length of time since the substantiation and any services that have been provided to rectify the problem(s).

- b. Address any risk factors that might impact the safety of the child and describe what protective interventions are in place currently.

7. Caregiver(s) Relationship Status:

Is the caregiver involved in a relationship?

Describe the relationship. Describe strengths of the relationship & areas in need of work or attention. Describe how the couple handles stress, decision making, etc.

Is that person living in the home?

Have there been any incidents of domestic violence in the relationship?

Is there a history of domestic violence for the caregiver or any other household member? Describe.

8. Substance Abuse:

Does the caregiver or any household member have a substance abuse or alcohol concern?

Is there a history of substance abuse or alcohol concerns or treatment for any household member?

9. Mental Health:

Describe and evaluate the current mental and emotional health of the caregiver(s) and household members. Is there a history of mental health problems or treatment for the caregiver or any household member including marriage counseling or counseling for the child(ren)? Include current prescriptions for psychotropic medications and reasons for prescribed medications.

10. Physical Health:

Describe the caregiver(s) physical health. If physical health condition is noted, describe how condition would affect the care of the child(ren) in the home.

11. Financial/Employment Status:

List all sources of income for the household. Are they adequate to meet the needs of the placement? If income is based on disability, i.e., SSI, Social Security Disability, long term disability payments from a job, workmen's compensation, etc., there must be an assessment of how that impacts the ability to care for the child(ren).

12. Day Care and Supervision:

Discuss the caregiver(s) plans for day care if necessary.

What arrangements would be made for alternative care for the child(ren) if the caregiver is unavailable?

13. Sleeping Arrangements:

View and describe the sleeping arrangements for the child(ren). If the child(ren) is 12 months of age or younger, describe the caregiver's understanding of and willingness to abide by safe sleep practices.

14. Motivation for Placement of the Child(ren):

Attitude of each member of the household toward accepting the child(ren). Attitudes towards the birth parent(s).

15. The Capacity for and Willingness to Support the Case Plan for the Child(ren) in Their Care:

Discuss the caregiver's capacity and willingness to cooperate with the supervising agency, the school system, child's therapist, the parenting time plan outlined in the treatment plan, etc. Address the caregiver's ability to protect the child(ren) from further harm.

16. Family's Willingness to Work with the Child's Birth Family:

Do the caregiver's agree that they will not allow the child(ren)'s parent(s) to live in the home without the agency's approval? Do the caregiver's agree to not release the child(ren) to anyone, including birth parents, without the supervising agency's approval?

17. Family Methods of Behavior Management and Discipline of Children:

Are the caregiver's willing to follow the supervising agency's discipline policy? Discuss the caregiver's method of behavior management.

18. Discuss the caregiver's capacity for parenting relative to the child(ren)'s age and developmental needs. Describe their capacity and disposition to give the child(ren) guidance, love, and affection.

19. Is the caregiver committed to providing a stable living environment for the duration of placement? Describe the caregiver's ability to provide permanence if necessary.

20. Conclusion:

Based on information gathered, summarize the caregiver's functioning as it applies to their capacity to care for the child(ren).

21. Recommendation:

Placement with caregiver's is Approved/Denied

Foster Care Worker's Signature: _____ Date: _____

Foster Care Supervisor's Signature: _____ Date: _____

Department of Human Services (DHS) will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to a DHS office in your area.

cc: Case File
Court
Parent(s) – See policy. Redact Central Registry and LEIN information.