

Section of Regulation	Questions and Answers
<b>F. Assessment Study</b>	<p><b>3 (e): What information is needed for 3 (e)? Info about related children not living in household.</b>  <b>Who? My adult children who do not live with us anymore?</b>  <b>Conduct an interview, if appropriate, with the biological children from a former marriage or relationship who live with ex-spouse or partner. Assess the non-custodial parent who has limited/no contact with minor children or provides no support for them or there is visitation between the non-custodial parent and his/her children which may present a problem concerning sleeping arrangements when the biological children visit overnight or for an extended period. Contact adult children for reference or recommendation for licensure.</b>  <b>Does this include adult children? Does it matter if they are in college or just working?</b>  <b>This does include adult children, whether in college or working.</b></p>
<b>G. Eligibility Standards</b>	<p><b>In the Eligibility Standards section, the document states "Income must be verified through income tax records, pay stubs, and bank account statements." Does this mean that 3 months of pay stubs will no longer be the only form of income verification required? And we now need to collect all three of these documents?</b>  <b>You do not need to collect all three of these document types. These are examples to verify income.</b></p> <p><b>Can an applicant on public assistance be licensed?</b>  <b>DSS policies, procedures, and state statutes and regulations do not apply such "pre-screening" criteria. The applications should be accepted and the applicant's ability to serve as a foster parent should be fairly assessed using DSS' policies, procedures, as well as state statutes and regulations.</b></p> <p><b>(3) nondiscrimination clause - Does this apply to all licensing agencies, or just DSS (who currently is doing kinship only)?</b>  <b>This nondiscrimination clause applies to all agencies.</b></p> <p><b>What household members apply? Do adult children or parents living in the home have to be on the license?</b>  <b>All individuals living in the home are to be considered part of the household. Adult children or parents living in the home do not have to be on the license; however, they must be assessed, meet the requirements for a household member, and be included in the foster family home study and support the applicants interest in fostering.</b></p> <p><b>Does a roommate (not in a relationship with applicant) have to apply? Is a renter considered a roommate?</b>  <b>A roommate will be considered part of the household. A renter will be considered a household member. They will need to be assessed, meet the requirements for a household member, and be included in the foster family home study and support the applicants interest in fostering.</b></p> <p><b>In section G #2B- it says "roommates" must apply together. But, it says separately that "romantic partners" must apply together. If another adult household member is clearly just a roommate, not a partner to the person applying, are we able to just have them assessed as another adult household member versus being an applicant, as we have always done?</b>  <b>If another adult household member is not a partner to the person applying, that person will need to be assessed, meet the requirements for a household member, and be included in the foster family home study and support the applicants interest in fostering.</b></p>

**H. Physical and Mental Health Standards**

Are we getting a new form, the old medical does not ask this question? What if there are no children in the home now and we are asking about caring for additional children?

**The medical form is being revised and will include the necessary information.**

Does infant mean under one year of age?

**Infant means a child under one year of age.**

What is considered special needs for determining if a flu shot is needed – will a doctor have to determine this?

**Special needs is determined by medical or healthcare professionals.**

On page 6-7, it sounds like there are still allowances for children not to be vaccinated if the doctor states that the child being vaccinated is not good for the child's health or if DSS determines there are extenuating circumstances. What if the doctor will not comment on the impact that no/delayed immunizations would have?

**DSS will consider on a case-by-case basis if additional response is needed.**

For H. (2) (b), will there be a special designation on the license that designates if a foster home is licensed to serve infants / children with special medical needs?

**The family license will include the age, gender, and number of children to be cared for by the family. The home study and other assessment or record keeping should include verification of required vaccinations and evaluations to determine which children a family can serve.**

Should current foster home licenses be adjusted to reflect age change to 2-21 if a foster parent does not want to care for infants and receive the necessary immunizations?

**The minimum age range should be adjusted to one year if the family will not receive the necessary immunizations to care for infants or infants and children with special medical care needs.**

If a foster parent refuses to immunize their own children, is this an automatic "no" to initial licensure?

**All children who are household members must be current on immunizations, unless the immunization is contrary to the child's health as documented by a licensed health care professional or the department determines that other extenuating circumstances exist.**

Requiring Vaccinations for biological kids in FH's– does this need to happen for already licensed foster homes or will they be grandfathered in? If this is required of currently licensed foster homes- when does this need to be in compliance by? If there is a religious reason/ other extenuating circumstance that FP's have expressed as why they do not vaccinate their biological children who would CPA clear this with to confirm it will be approved by SCDSS for newly licensed homes ? Is there a procedure/policy to follow to get approval? Will a letter from FP explaining reasoning suffice?

**This is a requirement for all families. Currently licensed families should now be working to become compliant. All children who are household members must be current on immunizations, unless the immunization is contrary to the child's health as documented by a licensed health care professional or the department determines that other extenuating circumstances exist. You may send the request for consideration to the CPA licensing consultant at DSS. A letter from the foster parent to detail extenuating circumstances or other reasons and from the medical provider should be included with the request.**

**H. Physical and Mental Health Standards (continued)**

Flu shot/Whooping Cough- does this mean all FP's need these before we send licensing packet to DSS? Or only if they choose to foster infant or special needs child? What is the time frame DSS is giving foster parents who are already licensed and providing care to these populations to get their shots?

All foster parents who will be caregivers of infants and infants or children with special medical needs must have up-to-date flu vaccination and whooping cough vaccination. This documentation must be included in licensing packet that is sent to DSS. If foster parents or caregivers are not caring for those two populations, you do not need to send proof of the vaccinations. The license request will be for children age two and older and placement will be consistent with the request for licensure. All families should now be working to become compliant with this requirement.

2 (b)- caregivers of any infant or just special needs infants? And an infant is up to what age?

All household members who will be caregivers of infants and caregivers of infants or children with special medical needs must have up-to-date flu vaccination. An infant is a child under one year of age.

(b) flu vaccine required for adults in homes taking/with infants - what age child does this apply to? less than 6 months old (when the infant can get a vaccine)?

All household members who will be caregivers of infants and caregivers of infants or children with special medical needs must have up-to-date flu vaccination. An infant is a child under one year of age.

"all children in the home should be immunized according to schedule recommended by ACIP/CDC/AAP." Flu, Covid-19, and HPV are "recommended" but not required for school. Will these be required for foster licensure?

All children who are household members must be current on immunizations jointly recommended by the American Academy of Pediatrics, the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention, and the American Academy of Family Physicians, unless the immunization is contrary to the child's health as documented by a licensed health care professional or the department determines that other extenuating circumstances exist. All household members who will be caregivers of infants and caregivers of infants or children with special medical needs must have up-to-date flu vaccination. Vaccinations for Covid-19 and HPV are not currently required for licensure of foster family homes or approval of adoptive homes.

How will religious exemptions to vaccinations be handled? Are they considered extenuating circumstances?

Any requests for religious exemption is on a case-by-case basis.

When is the final deadline for families to come into compliance with children in the household being up to date with immunizations. (I know you all mentioned flexibility around the September 12<sup>th</sup> deadline)

Families need to be working toward compliance now.

If a family does not come into compliance with vaccinations, how quickly should their foster care license be closed?

If a family chooses not to be vaccinated and do not have foster children placed, they should be offered the opportunity to voluntarily close the foster family license. If they do not voluntarily close license, the process for revocation will need to begin.

**H. Physical and Mental Health Standards (continued)**

**What exemption can a family have for not getting vaccinations? (Does a religious exemption apply? What else can they get from the doctor?)**

**There is not a prescribed list of exemptions. All children who are household members must be current on immunizations jointly recommended by the American Academy of Pediatrics, the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention, and the American Academy of Family Physicians, unless the immunization is contrary to the child's health as documented by a licensed health care professional or the department determines that other extenuating circumstances exist. All household members who will be caregivers of infants and caregivers of infants or children with special medical needs must have up-to-date flu vaccination.**

**If we get an acceptable form of exemption from vaccines, how do we document this? Do we send you all verification immediately?**

**Once you receive statement as documented by a licensed health care professional, submit statement to your DSS licensing consultant for approval by DSS.**

**For extenuating circumstances: How should this be documented and tracked? Do we submit this DSS or just keep in the foster parent file? Is this required at time of initial licensure?**

**Once you receive statement as documented by a licensed health care professional, submit statement to your DSS licensing consultant for approval by DSS. The medical statement and DSS approval should be kept with medical documents in the license file.**

**H 2. Will extenuating circumstances by the department consider exemptions for religious reasons and/or staggered time frames for shots that delay certain shots?**

**Yes; Medical professional to sign off**

**Should every family licensed for 0 and up go get the whooping cough vaccine? Or just families actively caring for babies? When is the deadline?**

**If the family does not have required vaccinations to care for infants, the license should be amended immediately and no infants placed. The family license will include the age, gender, and number of children to be cared for by the family. The home study and other assessment or record keeping should include verification of required vaccinations and evaluations to determine which children a family can serve or noted if vaccinations were not completed.**

**Do we need to provide a copy of the immunization record for these vaccines with our foster home applications to meet this requirement?**

**Verification of vaccinations should be provided with the foster home application packets for licensure.**

**If a home is licensed for 0+, do the foster parents automatically need the pertussis vaccine or just if they actually taken an infant in their home?**

**The home will not be licensed for infants, if the family has not met the vaccination requirements. The family license will include the age, gender, and number of children to be cared for by the family.**

<p><b>H. Physical and Mental Health Standards (continued)</b></p>	<p>If a home is licensed for 0-+, do the foster parents automatically need the flu vaccine or just if they actually take infants or children with medical needs?  <b>The home will not be licensed for infants, if the family has not met the vaccination requirements. The family license will include the age, gender, and number of children to be cared for by the family.</b></p>
	<p>When and how often will immunization records have to be submitted? What other exemptions will be allowable? Family's beliefs?  <b>All children who are household members must be current on immunizations jointly recommended by the American Academy of Pediatrics, the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention, and the American Academy of Family Physicians, unless the immunization is contrary to the child's health as documented by a licensed health care professional or the department determines that other extenuating circumstances exist. All household members who will be caregivers of infants and caregivers of infants or children with special medical needs must have up-to-date flu vaccination.</b></p>
	<p>Flu Shot. What time of year?  <b>Flu vaccination is required to be up-to-date and completed annually.</b>  Do we see this migrating into including the COVID vaccine?  <b>Unable to determine at this time.</b></p>
	<p>What verification does a family need for vaccination waivers? DSS form? Again, is there a grace period - some families will need to go into their physician for an annual physical before doctor will complete any paperwork.  <b>Once you receive statement as documented by a licensed health care professional, submit statement to your DSS licensing consultant for approval by DSS. The medical statement and DSS approval should be kept with medical documents in the license file. Family needs to work now to become compliant.</b></p>
	<p>Vaccinations. How do we track? Especially the annual flu shot. Is there a list that could be provided to families of what exact immunizations are needed (not just the specific ones stated in the regs)? Will a tracking tab be added into CAPSS?  <b>Tab is already in CAPSS. Vaccinations may be entered on the person tab in CAPSS.</b></p>
<p><b>I. Home Study Standards</b></p>	<p>Is this saying that if all H/H members are seen at the first HV, then a second is not required?  <b>At a minimum, two visits are required. There must be one in-home visit. The second visit may be virtual. If needed, additional in-home or virtual visits are conducted.</b></p>
	<p>Can a virtual visit be done for quarterly home visits and license renewal?  <b>In-person visits provide the best opportunity for assessing the family's ongoing compliance, needs and observations of the home.</b></p>
	<p>Can the relative reference be any relative? Household member, spouse, child, etc., or are there specific relatives that are/are not acceptable?  <b>The relative reference should be outside of the family home. Household members are already being assessed.</b></p>
<p><b>J. Capacity Standards</b></p>	<p>If a family already has more than 8 children in home, and are still seeking to adopt, would they be able to start the process now since it is before September 12th?  <b>No.</b></p>

<p><b>K. Sleeping Standards</b></p>	<p>Can there be more than four children total sharing a bedroom in order to accommodate placement of a sibling(s) to a foster child already in the home?  <b>This regulation does not make exceptions to allow siblings to sleep in the same bedroom in a foster home. If the foster family were kin, this would be a “non-safety element” that DSS could waive.</b></p> <p>Who is authorized to give agency approval to waive the regulation for a sleeping arrangement due to an extenuating circumstance?  <b>The Director of Child Welfare Licensing and Director of Permanency Management.</b></p> <p>(2) (b) and (d) any age relatives can share a room and children older than 12 months can share a room with the foster/adoptive caregiver... Has DSS always been able to allow for this or is this new?  <b>This is not new and is allowed with agency approval.</b></p> <p>We have a family with a custom built three tier bunk bed. Can we allow them to keep the bunk bed intact but ensure only two tiers are used to sleep on? Is there a height limit for the top tier ?  <b>All bunk beds in the home must have no more than two tiers. There are no specified height parameters.</b></p>
<p><b>L. Other Living Space Standards</b></p>	<p>Working Phone: 3(d)- does a cell phone count? If I have mine with me and I leave the house, one must be available - does a sitter's phone work? What age of foster child does that apply too?  <b>There must be access to a working phone at all times.</b></p> <p>" working phone" Is the expectation that the child (and at what age?) have access to a landline if cell phones are not generally provided for the children in the home? Is the expectation that a child would be able to access a cell phone in the home if no landline is present? For instance, if the adults have phones, but none of the kids do and the phones are password/code/face Id protected would I need to have an unlocked phone for them to access or landline? And is it ok if that phone uses a web app?  <b>There must be access to a working phone at all times.</b></p>
<p><b>M. Fire Safety/Evacuation Plan Standards</b></p>	<p>Does disaster plan have to be posted in the home, the same as the fire escape plan? Is the disaster plan going to be updated to incorporate all the other required numbers (poison control, etc?) Or should we just develop a list internally and provide to the families of what emergency numbers they must post?  <b>Have a written emergency evacuation plan to be reviewed with the child within 24 hours of placement in the home and posted in a prominent place in the home. Maintain a comprehensive list of emergency telephone numbers and post those numbers in a prominent place in the home. If there is a landline phone located in the home, the numbers must be posted next to the phone.</b></p> <p>Why does the part about fire inspection not specify that families have to have smoke alarms? It just states carbon monoxide detector. Why does it not specify the type of fire extinguisher needed?  <b>Refer to State Fire Marshal (LLR) code:  <a href="http://statefire.llr.sc.gov/osfm/forms/subarticlepdfs/2016/Chapter%2071%20-%20Article%208%20-%20Subarticle%202%20-%20Effective%202016.0624.pdf">http://statefire.llr.sc.gov/osfm/forms/subarticlepdfs/2016/Chapter%2071%20-%20Article%208%20-%20Subarticle%202%20-%20Effective%202016.0624.pdf</a></b></p>

<p><b>M. Fire Safety/Evacuation Plan Standards (continued)</b></p>	<p>Where is the regulation regarding smoke detectors? Are they required any longer?  <b>Refer to State Fire Marshal (LLR) code:</b>  <a href="http://statefire.llr.sc.gov/osfm/forms/subarticlepdfs/2016/Chapter%2071%20-%20Article%208%20-%20Subarticle%202%20-%20Effective%202016.0624.pdf">http://statefire.llr.sc.gov/osfm/forms/subarticlepdfs/2016/Chapter%2071%20-%20Article%208%20-%20Subarticle%202%20-%20Effective%202016.0624.pdf</a></p>
	<p>Have fire inspection regulations changed significantly?  <b>Refer to State Fire Marshal (LLR) code:</b>  <a href="http://statefire.llr.sc.gov/osfm/forms/subarticlepdfs/2016/Chapter%2071%20-%20Article%208%20-%20Subarticle%202%20-%20Effective%202016.0624.pdf">http://statefire.llr.sc.gov/osfm/forms/subarticlepdfs/2016/Chapter%2071%20-%20Article%208%20-%20Subarticle%202%20-%20Effective%202016.0624.pdf</a></p>
	<p>Is the Fire Marshal aware of these new standards? When will they be assessing against these new standards? Will they start immediately so that family initial licenses and recertifications completed in Aug but aren't approved until after Sept meet the new regs?  <b>The State Fire Marshal has been made aware of the new regulations.</b></p>
	<p>Has the requirement for interconnected smoke detectors gone away?  <b>The regulations that govern the State Fire Marshal's Fire Inspection still apply.</b></p>
	<p>Has the window size requirement gone away?  <b>The regulations that govern the State Fire Marshal's Fire Inspection still apply.</b></p>
	<p>In the Fire Safety / Evacuation Plan standards section, the document states "applicants must maintain a comprehensive list of emergency telephone numbers, including poison control, and post those numbers in a prominent place in the home." Is this something a fire marshal will now be checking for?  <b>This is a licensing requirement. Licensing staff should be checking for this.</b></p>
	<p>Emergency Number list: Must this list be in the foster family file at the agency's office? Can this be added to safety checks on the Quarterly Visit guide?  <b>Maintain a comprehensive list of emergency telephone numbers and post those numbers in a prominent place in the home. If there is a landline phone located in the home, the numbers must be posted next to the phone.</b></p>
	<p>Emergency Number list: What numbers must be in a comprehensive list besides poison control? It needs a specific definition... My list would be different than yours.  <b>Maintain a comprehensive list of emergency telephone numbers and post those numbers in a prominent place in the home. If there is a landline phone located in the home, the numbers must be posted next to the phone.</b></p>
<p><b>N. Additional Health and Safety Standards</b></p>	<p>Swimming Pools- is the 4ft fencing around the pool required for both above and in ground pools or just inground pools if the above ground pool has sides of more than 4ft and a ladder that is removed/locked from us.  <b>Yes, this is required for in ground and above ground pools.</b></p> <p>What about the temporary above ground pools that have a pump? Usually these are just kept up for the summer and then taken down. Is removing the ladder enough for these?  <b>You must still have a fence.</b></p>

**N. Additional Health and Safety Standards (continued)**

What about permanent above ground pools? Often, they have a small deck attached which has a gate to prevent access. Is this adequate, since the gate (and the walls of the pool) prevent getting into the pool, or does the entire pool have to be fenced?

**No, the regulation is very clear and specific.**

For families with inground pools that do not have a 4 sided fence around the pool, how long do they have to correct this following the implementation of the regs? How do we notify them of the allowable timeframe and what is the consequence if they don't remediate within the time frame?

**Families are expected to come into compliance by the licensing renewal date. If there are circumstances outside of the families control that would not allow them to come into total compliance, this will be reviewed and considered.**

How long will foster families that have pools be given to get a fence, ladder and life saving device in the pool? Are they eligible to have expenses reimbursed (like fire marshal changes they have to make)?

**Families are expected to come into compliance by the licensing renewal date. If there are circumstances outside of the families control that would not allow them to come into total compliance, this will be reviewed and considered. This would not qualify for reimbursement.**

What constitutes a "wading pool"? Plastic or blow-up pools? If a foster family is found not in compliance with this regulation (ex.: emptying the pool after use), is this considered a regulatory violation by the State DSS Office? Should agencies use their own regulatory violation forms or is DSS going to publish one?

**A wading pool is considered to be shallow portable or artificial pool for children to paddle in. This would include inflatable pools of any size. If found not in compliance with the regulation, the Child Placing Agency will be responsible for addressing the violation/working with the family under corrective action. Th CPA should notify the State Office Licensing Consultant if after addressing with the family is unable or unwilling to come into compliance.**

What are considered "adequate first aid supplies"? Does it have to be a kit? How do we confirm this and how often?

**First aid supplies may include bandages, wipes, gauze, for example. They may be in a clearly labeled box or container. This can be viewed during home visits with the foster family.**

Are we now requiring that foster parents have first aid kits? If so, could this be added to the safety checks on the Quarterly Visit guide?

**Yes, maintain first aid supplies. The quarterly home visit guide form is being updated to include this information.**

What entity will be checking pools for the new requirements? The licensing worker, fire marshal or someone else?

**The licensing worker or agency staff assigned to work with the family should be checking for the new pool requirements.**



<p><b>N. Additional Health and Safety Standards (continued)</b></p>	<p>Weapon storage - does this apply to bows and arrows used for archery practice? Is the expectation that arrows are kept locked?  <b>All ammunition, arrows or projectiles must be stored in a locked space separate from the weapons.</b></p>
	<p>Firearms. What is “inoperative”? Can the firearm be kept loaded, but locked in a box with a trigger lock? Because a trigger lock renders it inoperable, even if it is loaded with ammunition.  <b>All ammunition must be stored in a locked space separate from the weapons.</b></p>
<p><b>O. Criminal History Records Check Standards</b></p>	<p>Do the SOR checks begin at age 12 or age 18?  <b>Sex Offender Registry checks are required for age 18 and over.</b></p>
	<p>Juvenile Offenses: O. (5) – Is there a form/place for this information to be noted? – Juvenile offenses – It mentions “ongoing duty”. SLED does not usually show these juvenile offenses.  <b>The foster parent and household members are responsible for reporting any juvenile offenses committed by any member of the household. This is captured in the background section of home studies, on quarterly home visit guide forms, and license renewal summaries, for example.</b></p>
	<p>The regulations indicate SLEDs are required for applicants. It had been communicated from the State DSS office that fingerprints were sufficient for initial licensures and SLEDs were not required. Does this necessitate a change in this practice for CPA agencies?  <b>For initial applicants, the fingerprint based check includes the state law enforcement division (SLED) search. A separate SLED search is required annually.</b></p>
	<p>Applicants for renewal must include SLED checks conducted no earlier than one year prior to renewal and FBI checks conducted no earlier than five years prior to renewal. (Are SLED checks going to be annual or at year of relicensure?)  <b>Yes, annually for SLED.</b></p>
	<p>Will fingerprinting need to be redone every 5 years now?  <b>Yes.</b></p>
	<p>Can we get a standard form that the applicant can sign stating that they are not on the CR in any other state for the purpose of issuance of a provisional license?  <b>You can utilize AFFIDAVIT FOR KINSHIP CARE PLACEMENT/DSS Form 3042 for this purpose.</b></p>
	<p>Just to clarify, to issue a provisional kinship license, we complete a SLED check then we obtain fingerprints for full licensure?  <b>This is correct.</b></p>
<p><b>Q. Assurances from Applicants</b></p>	<p>Does the no smoking include vaping?  <b>Yes</b></p>
	<p>Do I understand that there is to be no smoking by anyone around the children?  <b>Yes</b></p>

<p><b>Q. Assurances from Applicants (continued)</b></p>	<p>The Assurance paperwork is taking the place of the discipline paperwork. Since it says this is done for each placement (not once annually), who completes this? Is it the FSC for the family or is it whoever is placing the child and doing the FP contract (county/adoptions)?  <b>The worker/CPA staff who is present when the foster child is placed.</b></p> <p>How/how often do agencies verify that families are keeping the PH balance in their pools correctly?  <b>At the time that the Assurances form is completed.</b></p> <p>Q. (j) : What constitutes legal and safe methods of transportation? (Uber/Lyft, Medicaid van, household teens with driver’s license)  <b>Applicants should ensure that all laws are followed while transporting children. The circumstances, reasons for transporting and age of the foster child will help determine what is appropriate.</b></p> <p>Q. (1) (k) – Will ACGs/family/friends have to provide automobile insurance information to the CPA?  <b>At the time that the Assurances form is completed.</b></p> <p>(j) re: coordinate transportation: Is the expectation that foster families will now do all transport?  <b>Foster parents should transport to appointments, school, activities, etc. Some situations will require a joint effort between the foster parent and DSS to meet the transportation needs of the foster child.</b></p> <p>(k) re: no loaded weapons in a car with a child: Is the expectation that CWP carriers will not carry weapons with them when transporting foster children?  <b>Foster parents should ensure that any weapons are not loaded and are properly secured when transporting a foster child.</b></p> <p>Can we get a standard process for what the foster parents providing “training” to foster children about water safety for families who have pools/lakes/ponds is? A standard video that they show the children? Would help to ensure consistency across the Regions.  <b>Yes, the training curriculum is being revised.</b></p> <p>(1) (e): Is DSS going to provide a specific script/training of what is to be addressed in this water safety instruction?  <b>Yes, the training curriculum is being revised.</b></p>
<p><b>R. Pre-License and Adoptive Home Training Standards</b></p>	<p>What is the expected due date for an already approved adoptive family to obtain the required 15 hours and 30 hours of training to keep their file active?  <b>Adoptive families should have the training by December 31, 2021.</b></p> <p>When does the 30 hours start?  <b>September 12, 2021</b></p> <p>It was stated that foster parents can get their training hours online. Does that mean strictly online hours (not live webinars)? Or, does it mean 8 online hours and the rest can be online live webinars? Can the 15 hours a year of continuing education now be done all online?  <b>There is no limit to the number of hours that can be acquired online or by webinars.</b></p>

<p><b>R. Pre-License and Adoptive Home Training Standards (continued)</b></p>	<p>Will all of this be included in Heartfelt? CPR and First Aid now required? That's a lot more hours on top of the 14, will it be required every two years?  <b>Yes, the training curriculum is being revised to include all of the required training topics.</b></p> <p>R. (2) (b) – Is Bloodborne Pathogens now a required training? As well as CPR? – Part of Heartfelt Calling?  <b>Yes; Bloodborne Pathogens and CPR will be included in the pre-license training curriculum.</b></p> <p>If families are due for recertification this year, will they need to have 30 hours of CEU's versus 28?  <b>Beginning September 12, 2021, 30 hours of training are needed.</b></p> <p>How many hours can be rolled over from one license period to the next? We've always allowed rollover of 4 hours. Can they continue to roll over 4 hours?  <b>Yes, 4 hours can be rolled over to the next license period.</b></p>
<p><b>S. Emergency Placement Standards</b></p>	<p>In the "emergency placement" section of the regs it says to complete SOR for ages 12 and up versus the other places where it says 18 and older. Why does it have a different age in these two sections? Is this a typo?  <b>SOR are required for 12 and up for emergency placements.</b></p>
<p><b>T. Records Required for Child Placing Agencies</b></p>	<p>T.(1) Child placing agency records no longer require CPA to have birth certificates, immunization records, social security card, medicaid #?  <b>This section of the regulation did not change.</b></p>
<p><b>U. Initial Licensing, Renewal, Denial, Revocation, and Termination of License</b></p>	<p>U. (3): What constitutes a "demonstrable record" for not taking a placement? What if a family doesn't get calls because they have highly narrow specifications, do their narrow preferences that limit calls constitute this, even if needing to broaden their acceptance factors?  <b>This will be weighed against the license specifications and other factors that will help in making the decision. Every licensed family needs to be considered for placement, and the family preferences need to be reviewed and updated regularly.</b></p> <p>U. (3): License renewal – the agency may also deny an application to renew a family foster home if the family has a demonstrable record of refusing to accept placement of children in foster care? (How is that determined? Do records need to be kept or is that DSS agency only?) – DSS will be the one to deny an application or renewal of a foster family license?  <b>SCDSS will send the utilization report to the Child Placing Agency of families that are showing inactive quarterly for review.</b></p>
<p><b>W. Confidentiality</b></p>	<p>What if the child is a teen and they take pictures with friends at school and it is posted w/out FP's knowledge?  <b>The regulation refers to the foster parent/family, not the foster child.</b></p> <p>W. (2) – If a foster parent posts pictures on a social media website, how will it be handled? Is this considered a regulatory violation?  <b>This is a regulatory violation and the CPA should ensure that the information is removed immediately. Procedures should be followed like any other deficiency that is noted.</b></p>

OTHER	<p>Is there any upcoming communication from state office that is going to be distributed to foster families regarding the implementation of the regs? If so, when? The SCFPA posted the link to the regs, is there any follow up communication from state office coming out?</p> <p><b>We will draft a communication and attach these Q&amp;A along with the FH regulations.</b></p>
	<p>All homes licensed prior to Sept 12, 2021 will be grandfathered in under the old regulations? Or starting Sept 12 will we need to have them adhere to all new regs-- a family reference letter, immunizations, etc..</p> <p><b>There is no grandfathering in, the CPA and DSS should work with families to bring the home into compliance by renewal.</b></p>
	<p>If families do not meet the criteria by Sept 12th, is there a waiver process or grace period? For how long?</p> <p><b>There is no grandfathering in, the CPA and DSS should work with families to bring the home into compliance by renewal.</b></p>
	<p>Will Ch 7 and Ch 9 of DSS policy and procedure manual be updated? In the meantime, should we ignore conflicts between this document and the new statute?</p> <p><b>Yes, State Law superseeds.</b></p>
	<p>Are there any conflicts between section 63-7 and the new 114-550?</p> <p><b>No</b></p>
	<p>For current foster families, when must we verify they meet these new standards? At recertification? Immediately? During quarterly visits?</p> <p><b>Families are expected to come into compliance by the licensing renewal date. If there are circumstances outside of the families control that would not allow them to come into total compliance, this will be reviewed and considered.</b></p>
	<p>What is the timeframe (if any) allowed for currently licensed foster families to be in compliance with the new regulations? (ex.: If they have an infant in their home, how quickly must they get the 2 required immunizations?; If they have a pool but no fence, how quickly must they have a fence installed?) – DSS will be flexible; relicensure timeframe?</p> <p><b>Families are expected to come into compliance by the licensing renewal date. If there are circumstances outside of the families control that would not allow them to come into total compliance, this will be reviewed and considered.</b></p>
	<p>Are DSS licensed foster families going to have to adhere to the same regulations as CPA licensed foster homes? Are the timeframes to “get in compliance” going to be “across the board”?</p> <p><b>Families are expected to come into compliance by the licensing renewal date. If there are circumstances outside of the families control that would not allow them to come into total compliance, this will be reviewed and considered.</b></p>
	<p>Can DSS streamline licensing and adoptions when conducting backgrounds, home visits, etc.? Each year we go through two updates for the same information. Seems like working together makes better sense and cuts down on the work load for DSS and the family.</p> <p><b>Yes, Adoptions and Foster Home Licensing will work together to stream line the process and not duplicate.</b></p>

**OTHER (continued)**

I truly hope that a detailed list of changes will be pulled out and highlighted so we can post and get out. There are several big changes which will affect people- immunizations, increased training hours, few changes in sleeping standards, phones, swimming pool stuff...

**Q & A will be provided along with the FH Regs.**

The changes go into effect Sept 12th- how long do FPS have to get the changes completed? With pools and Dr visits, it could take awhile especially with any new construction like pool fences being delayed and expensive even if you can find the materials to do the work?

**Families are expected to come into compliance by the licensing renewal date. If there are circumstances outside of the families control that would not allow them to come into total compliance, this will be reviewed and considered.**

Will currently licensed families be grandfathered until their renewal? How long do we have to comply?

**Families are expected to come into compliance by the licensing renewal date. If there are circumstances outside of the families control that would not allow them to come into total compliance, this will be reviewed and considered.**

"I realize that this is now part of the SC Code of Laws, however my question is regarding this first regulation (a) below versus the second regulation (a) below that comes from a separate section of the code pertaining to foster homes:

(a) Swimming pools and wading pools shall be enclosed with protective fencing at least four feet high , secured with a safety device (i.e. latch, lock, etc.) to restrict child's access, and any method of access must be through a safety device

(a) Prevent the child's access, as appropriate for his or her age and development, to all medications, poisonous materials, cleaning supplies, other hazardous materials, and alcoholic beverages.

In the regulation about poison, it says "as appropriate for his or her age and development", but in the one with the pool there is no such language. How can this be amended? Who can we contact to get this looked at? Do we have a group at DSS that tries to lobby for changes such as these. As a family that only takes teenagers, there is absolutely no 4 foot (or higher) fence that will keep a teenager out. Unfortunately, they will most likely be losing us as a foster home after having had over 70 teens come.

**These are 2 separate regulatory items and the language is directly pulled from the Department of Health and Human Services at the Federal level who developed the Model Licensing Standards for IV-E agency's such as ours and tied to the Family's First Prevention Services Act of 2018.**