Service Standards

Adoption Services

Purpose

Adoption services establish permanent family relationships for children in need of permanency and increase the well-being, functioning, and stability of children, birth parents, adoptive families, and adopted individuals.

Definition

Adoption services may include: adoption information and education, recruitment, assessments, home studies, training, counseling, support, preparation, matching, placement, advocacy, referral, and post-placement/post-adoption services to facilitate permanent caring relationships within families for children and youth.

Interpretation: *Organizations should be familiar with the relevant legal requirements of the Indian Child Welfare Act (ICWA), which governs state proceedings involving American Indian and Alaska Native children. To ensure compliance with ICWA, organizations must have established procedures for determining if children are members or eligible for membership in a federally recognized tribe, include tribal representatives throughout all aspects of service delivery in cases where ICWA applies, and collaborate with local child welfare agencies to determine their role in the context of tribal-state child welfare agreements, ICWA, and any relevant state laws pertaining specifically to Indian child welfare.*

Interpretation: *Some organizations work collaboratively with the public child welfare agency and share responsibility for providing services in adoption cases. For standards or elements of standards that are handled by a public agency or its designee, the organization can show implementation by providing evidence that another entity is responsible.*

Note: *COA Accreditation standards are written to encompass best practices for all adoption types, services for all members of the adoption triad, and organizations that address either some or all services in the adoption process. COA Accreditation recognizes that some organizations only provide home studies, training, and/or post-adoption services, and that services for foster care adoptions may be limited due to the involvement of the public agency. Some standards include an option of "not-applicable" when needed, but many standards are written to address various adoption program models and services where at least one or more of the elements of the standard applies.*

Note: *Home study programs will complete AS 1, AS 2, AS 7, AS 13, AS 14, and AS 15.*

Post-placement/post-adoption programs will complete AS 1, AS 2, AS 12, AS 13, AS 14, and AS 15.

Foster-to-adopt programs will complete all of FKC and AS 6, AS 7, AS 8, AS 9, AS 10, AS 12, AS 13, and AS 14.

Child-focused recruitment programs will complete AS 1, AS 2, AS 4, AS 5, AS 6, AS 9, and AS 10.

Child-focused recruitment is a child-centered, intensive, and tailored recruitment strategy designed to identify a permanent placement resource for a specific child or youth based on their unique needs, preferences, and circumstances. Recruitment efforts consider relatives, friends, school personnel, coaches, current or past caregivers, and other individuals who have had a committed, caring relationship with the child or youth or who may be a good match based on the child or youth's background, needs, and strengths. Common models of child-focused recruitment include Wendy's Wonderful Kids® and Extreme Recruitment® .

Note: *COA Accreditation understands that adoption language is complex, sensitive, and evolving. The standards reflect language commonly used at the time the standards were updated, and certain terms are used for broader applicability and ease of use. For example, the term “children” includes infants, toddlers, school-age children, and youth. The term “prospective adoptive parents” refers to individuals pursuing adoption and generally includes foster parents, kinship caregivers, relatives, single individuals, and couples. The term “expectant parents” refers to parents who are considering or have planned for adoption. The term "birth parents” refers to biological parents of children who have been placed for adoption and is inclusive of both private and foster care adoptions. The standards do not define birth father. State laws provide more specific definitions and requirements for birth fathers and use terms such as legal or presumed father and alleged or putative father.*

Note: *Please see the AS Reference List for the research that informed the development of these standards.*

Table of Evidence

Self Study Evidence

No Self Study Evidence

Adoption Services

AS 1: Person-Centered Logic Model

Purpose

Adoption services establish permanent family relationships for children in need of permanency and increase the well-being, functioning, and stability of children, birth parents, adoptive families, and adopted individuals.

The organization implements a program model that describes how resources and program activities will support the achievement of positive outcomes.

NA: The organization provides foster-to-adopt services only.

Note: *Please see the Logic Model Template for additional guidance on this standard.*

Rating Indicators:

1 All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice Standards.

Logic models have been implemented for all programs and the organization has identified at least two outcomes for all its programs.

2

Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice Standards; e.g.,

- Logic models need improvement or clarification; or
- Logic models are still under development for some of its programs, but are completed for all high-risk programs such as protective services, foster care, residential treatment, etc.; or
- At least one desired outcome has been identified for all of its programs.

3

Practice requires significant improvement, as noted in the ratings for the Practice Standards. Service quality or program functioning may be compromised; e.g.,

- Logic models need significant improvement; or
- Logic models are still under development for a majority of programs; or
- A logic model has not been developed for one or more high-risk programs; or
- Outcomes have not been identified for one or more programs.

4

Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice Standards; e.g.,

- Logic models have not been developed or implemented; or
- Outcomes have not been identified for any programs.

Table of Evidence

Self Study Evidence

* • Program logic model that includes a list of outcomes and program outputs being measured	
• See program description completed during intake	

Site Visit Evidence

No Site Visit Evidence

On-Site Activities

* • Interviews may include:

1. Program director
2. Relevant personnel

AS 1.01

A program logic model, or equivalent framework, identifies:

a. needs the program will address;
b. available human, financial, organizational, and community resources (i.e. inputs);
c. program activities intended to bring about desired results;
d. program outputs (i.e. the size and scope of services delivered);
e. desired outcomes (i.e. the changes you expect to see in persons served); and
f. expected long-term impact on the organization, community, and/or system.

Examples: *Please see the W.K. Kellogg Foundation Logic Model Development Guide and COA Accreditation's PQI Guide for more information on developing and using program logic models.*

Examples: *Information that may be used to inform the development of the program logic model includes, but is not limited to: (1) characteristics of the service population, (2) needs assessments and periodic reassessments, (3) risk assessments, and (4) the best available evidence of service effectiveness.*

AS 1.02

The logic model identifies desired outcomes in at least two of the following areas:

a. change in clinical status;
b. change in functional status;
c. health, welfare, and safety;
d. permanency of life situation;
e. quality of life;
f. achievement of individual service goals; and
g. other outcomes as appropriate to the program or service population.

Example: *Outcomes data should be disaggregated to identify patterns of disparity or inequity that can be masked by aggregate data reporting. See PQI 5.02 for more information on disaggregating data to track and monitor identified outcomes.*

Examples: *Child and family serving organizations interested in pursuing contracts with public entities may consider tracking outcomes that align with nationally recognized indicators of quality in the areas of prevention, safety, permanency, and well-being including, but not limited to: (1) percentage of cases in which placements remained permanent and stable, (2) percentage of cases in which family relationships and connections were preserved, (3) number of cases of recurring maltreatment, (4) number of cases of maltreatment-related fatalities, (5) number of families provided with prevention services, and (6) percentage of children whose parents lack secure employment.*

Adoption Services

AS 2: Personnel

Purpose

Adoption services establish permanent family relationships for children in need of permanency and increase the well-being, functioning, and stability of children, birth parents, adoptive families, and adopted individuals.

Personnel have the competency and support needed to provide services and meet the needs of individuals and families served.

NA: The organization provides foster-to-adopt services only.

Interpretation: *Competency can be demonstrated through a combination of education, training, and experience. Support can be provided through supervision or other learning activities to improve understanding or skill development in specific areas.*

Rating Indicators:

1 All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice Standards.

2

Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice Standards; e.g.,

- With some exceptions, staff (direct service providers, supervisors, and program managers) possess the required qualifications, but the integrity of the service is not compromised; or
- Supervisors provide additional support and oversight, as needed, to the few staff without the listed qualifications; or
- Most staff who do not meet educational requirements are seeking to obtain them; or
- With few exceptions, staff have received required training, including applicable specialized training; or
- Training curricula are not fully developed or lack depth; or
- Training documentation is consistently maintained and kept up-to-date with some exceptions; or
- A substantial number of supervisors meet the requirements of the standard, and the organization provides training and/or consultation to improve competencies when needed; or
- With few exceptions, caseload sizes are consistently maintained as required by the standards or as required by internal policy when caseload has not been set by a standard; or
- Workloads are such that staff can effectively accomplish their assigned tasks and provide quality services and are adjusted as necessary; or
- Specialized services are obtained as required by the standards.

3

Practice requires significant improvement, as noted in the ratings for the Practice Standards. Service quality or program functioning may be compromised; e.g.,

- A significant number of staff (direct service providers, supervisors, and program managers) do not possess the required qualifications, and as a result, the integrity of the service may be compromised; or
- Job descriptions typically do not reflect the requirements of the standards, and/or hiring practices do not document efforts to hire staff with required qualifications when vacancies occur; or
- Supervisors do not typically provide additional support and oversight to staff without the listed qualifications; or
- A significant number of staff have not received required training, including applicable specialized training; or
- Training documentation is poorly maintained; or
- A significant number of supervisors do not meet the requirements of the standard, and the organization makes little effort to provide training and/or consultation to improve competencies; or
- There are numerous instances where caseload sizes exceed the standards' requirements or the requirements of internal policy when a caseload size is not set by the standard; or
- Workloads are excessive, and the integrity of the service may be compromised; or

- Specialized staff are typically not retained as required and/or many do not possess the required qualifications; or
- Specialized services are infrequently obtained as required by the standards.

4 Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice Standards.

Table of Evidence

Self Study Evidence

*	• List of program personnel that includes: 1. Title 2. Name 3. Employee, volunteer, or independent contractor 4. Degree or other qualifications 5. Time in current position • See organizational chart submitted during application	
*	• Table of contents of training curricula	
*	• Procedures or other documentation relevant to case assignment	

Site Visit Evidence

*	• Sample job descriptions from across relevant categories • Documentation tracking staff completion of required trainings and/or competencies • Training curricula • Caseload size requirements set by policy, regulation, or contract, when applicable • Documentation of current caseload size per worker

On-Site Activities

*	• Interviews may include: 1. Supervisors 2. Relevant personnel • Review personnel files

AS 2.01

Adoption workers who provide adoption-related services that require the application of clinical skills and judgment meet applicable regulatory requirements and are qualified by:

a. a bachelor’s degree in social work; or
b. a combination of a bachelor's degree in any field and prior experience in family and children's services, adoption, or intercountry adoption.

Interpretation: *When a new worker providing clinical services does not have direct experience in adoption, they receive support and/or supervision or have access to consultation with someone with direct experience in adoption until they gain experience.*

Examples: *Examples of services that require the application of clinical skills and judgment include, but are not limited to: (1) home studies, (2) child background studies, (3) clinical counseling, (4) obtaining consents, (5) preparation and training, (6) making clinical decisions such as approval of home studies, matching, etc., (7) post-placement monitoring and post-placement reports, (8) crisis intervention, and (9) therapeutic interventions.*

Examples of services that may not require the application of clinical skills and judgment include, but are not limited to: (1) preparation of profiles or dossiers for prospective adoptive parents, (2) provision of information or training on non-clinical topics such as the legal process for adoption, planning travel for international or interstate adoptions, etc., and (3) notarizing documents.

AS 2.02

Supervisors are qualified by at least two years of prior experience in adoption, intercountry adoption, or family and children's services and an advanced degree in social work or a comparable human service field.

AS 2.03

Employees who provide adoption-related services that require the application of clinical skills and judgment, and others as needed based on their job responsibilities, are trained on, or demonstrate competency in:

a. state, federal, and foreign laws and regulations governing the types of services provided by the organization;
b. ethical considerations in adoption and applicable professional and ethical guidelines;
c. issues relating to race, ethnicity, religion, culture, tribal affiliation, language, sexual orientation, gender identity, and culturally competent services;
d. factors that lead to children needing adoptive families;
e. feelings of separation, grief, and loss which may be experienced prior to, during and after adoption by children, birth parents, adults who were adopted, and previously by some prospective adoptive parents;
f. trauma experienced by children and youth who have been victims of abuse, neglect, or trafficking;
g. common medical, psychological, and developmental issues commonly experienced by adopted children;
h. the short- and long-term impact of out-of-home care and institutionalization on children and youth;
i. ways in which adoption can affect child, adolescent and adult development and identity formation; and
j. maintaining connections, openness in adoption, and attachment and bonding.

Interpretation: *Organizations may customize their training/competency requirements based on their program model and populations served. The organization should exempt employees from elements of their training/competency requirements only when the employee has demonstrated competence with the topic.*

Examples: *Regarding element (b), ethical considerations in adoption can include: (1) preventing child buying, trafficking, and undue influence on expectant parents, (2) making decisions when the preferences and needs of the parties to the adoption differ, and (3) limitations on eligibility and related professional, personal, and organizational values and beliefs.*

AS 2.04 (FP)

Adoption workers and supervisors, depending on job responsibilities, are trained on or demonstrate competency to implement relevant provisions of the Indian Child Welfare Act (ICWA), including:

a. the importance of ICWA and special considerations for working with American Indian and Alaska Native children;
b. the identification of American Indian and Alaska Native children;
c. determination of jurisdiction;
d. appropriate notice and collaboration with the child's tribe;
e. placement preferences that support the child's connection to their native culture and heritage;
f. process for, and alternatives to, terminating parental rights; and
g. court procedures.

Interpretation: *All adoption personnel should be trained in the basic requirements of ICWA and informed of the cultural norms and historical trauma associated with Indian tribes. Staff in specialized service units, such as assessment or permanency planning, should receive additional specialized training, and all screening personnel must be trained on how to identify children with American Indian or Alaska Native heritage.*

AS 2.05

Adoption workers who work with expectant parents or have responsibilities relating to legal proceedings, including providing required notices and obtaining consents, are knowledgeable about:

a. requirements and processes for the proper identification of all parties whose consent is required;
b. requirements and processes for providing appropriate notice to all parties who must receive notice or whose consent is required;
c. preventing undue pressure or coercion on parties whose consent is required, and what steps to take if undue pressure or coercion has occurred;
d. inappropriate financial incentives or influence; and
e. determination of jurisdiction and jurisdictional issues that could impact the adoption.

NA: Staff do not work with expectant parents and do not have responsibilities for providing notice of an adoption plan or obtaining consents.

AS 2.06

The organization ensures that employees who provide adoption-related services that require the application of clinical skills and judgment complete ongoing professional development training on adoption-related topics in accordance with applicable agency, state, and federal requirements.

Interpretation: *The Intercountry Adoption Act regulations require at least 30 hours of professional development training every two years.*

AS 2.07

Employee workloads support the achievement of desired outcomes and are regularly reviewed.

Interpretation: *Caseloads for workers providing child-focused recruitment services should typically not exceed 20-25 cases, with no more than 12-15 in an intensive phase.*

Examples: *Examples of factors that may be considered when determining employee workloads include, but are not limited to: (1) the qualifications, competencies, and experience of the worker, including the level of supervision needed, (2) the scope of services being provided including the work and time required to accomplish assigned tasks and job responsibilities, and (3) service volume, accounting for assessed level of needs of persons served at varying stages of the adoption process.*

Adoption Services

AS 3: Services for Expectant Parents Considering Adoption

Purpose

Adoption services establish permanent family relationships for children in need of permanency and increase the well-being, functioning, and stability of children, birth parents, adoptive families, and adopted individuals.

The organization engages with expectant parents considering adoption in an honest, responsive, and respectful manner and provides or refers them to appropriate services.

NA:

- The organization provides post-placement and/or post-adoption services only.
- The organization provides home study services or child-focused recruitment only.
- The organization does not work with expectant parents considering or planning for adoption.

Rating Indicators:

1

All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice Standards.

2

Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice Standards;e.g.,

- Minor inconsistencies and not yet fully developed practices are noted;however, these do not significantly impact service quality;or
- Procedures need strengthening;or
- With few exceptions, procedures are understood by staff and are being used;or
- For the most part, established timeframes are met;or
- Proper documentation is the norm and any issues with individual staff members are being addressed through performance evaluations and training;or
- Active participation of persons served occurs to a considerable extent.

3

Practice requires significant improvement, as noted in the ratings for the Practice Standards.Service quality or program functioning may be compromised;e.g.,

- Procedures and/or case record documentation need significant strengthening;or
- Procedures are not well-understood or used appropriately;or
- Timeframes are often missed;or
- Several case records are missing important information;or
- Participation of persons served is inconsistent.

4

Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice Standards;e.g.,

- No written procedures, or procedures are clearly inadequate or not being used;or
- Documentation is routinely incomplete and/or missing.

Table of Evidence

Self Study Evidence

* • Copy of intake forms or other tools used to collect information from expectant parents	

Site Visit Evidence

* • Informational materials provided to expectant parents • Community resource and referral list • Educational/training curricula, if applicable

On-Site Activities

* • Interviews may include: 1. Program director 2. Relevant personnel 3. Persons served • Review case records • Review program information on website

AS 3.01

The organization provides expectant parents considering adoption with accurate information about the adoption process and available services, including:

a. steps and timelines for the adoption process;
b. the legal process for adoption and the rights and responsibilities of each party, including expectant parents' right to legal counsel;
c. the selection process for the adoptive family and options for the expectant parents' level of involvement;
d. confidentiality and the range of openness in adoption; and
e. availability of post-adoption services.

Examples: *Post-adoption services may include: (1) options for independent, unbiased counseling services with adoption-competent professionals and (2) assistance with search and reunion in the future, as applicable.*

AS 3.02

Upon initial contact with expectant parents considering adoption, the adoption worker attempts to collect information about:

a. immediate needs;
b. any individuals who may need to be provided with notice of a future adoption plan or whose consent may be required;
c. any open cases with child protective services; and
d. any potential membership or eligibility for membership in a tribe.

AS 3.03

Expectant parents who have planned for adoption receive in writing:

a. notice and consent requirements;
b. provisions for any financial support that will be provided;

c. provisions for contact with prospective adoptive parents, as appropriate;
d. action steps if the expectant parent believes that any undue pressure or coercion is occurring; and
e. circumstances under which either party may terminate services.

Examples: *The information may be provided in a service agreement, a disclosure of the organization's policies, a rights and responsibilities disclosure, or another appropriate document.*

AS 3.04

The organization provides or refers expectant parents to supportive services, including:

a. information, education, and counseling provided by adoption-competent professionals whenever possible;
b. support and advocacy groups, including peer support; and
c. post-adoption services.

Adoption Services

AS 4: Adoptive Parent Recruitment and Orientation

Purpose

Adoption services establish permanent family relationships for children in need of permanency and increase the well-being, functioning, and stability of children, birth parents, adoptive families, and adopted individuals.

The organization conducts recruitment and orientation activities in a responsive, ethical, and equitable manner.

NA:

- The organization provides foster-to-adopt services only.
- The organization provides home study services only.
- The organization provides post-placement and/or post-adoption services only.

Rating Indicators:

1 All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice Standards.

2

Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice Standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted; however, these do not significantly impact service quality; or
- Procedures need strengthening; or
- With few exceptions, procedures are understood by staff and are being used; or
- For the most part, established timeframes are met; or
- Proper documentation is the norm and any issues with individual staff members are being addressed through performance evaluations and training; or
- Active participation of persons served occurs to a considerable extent.

3

Practice requires significant improvement, as noted in the ratings for the Practice Standards. Service quality or program functioning may be compromised; e.g.,

- Procedures and/or case record documentation need significant strengthening; or
- Procedures are not well-understood or used appropriately; or
- Timeframes are often missed; or
- Several case records are missing important information; or
- Participation of persons served is inconsistent.

4 Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice Standards; e.g.,

- No written procedures, or procedures are clearly inadequate or not being used; or
- Documentation is routinely incomplete and/or missing.

Table of Evidence

Self Study Evidence

*	• Eligibility criteria	
*	• Recruitment plan	
*	• Procedures for online photo listing services, if applicable	

Site Visit Evidence

*

• Most recent annual evaluation of recruitment plan

• Documentation of tribal participation in adoptive parent recruitment, when available

• Informational materials provided to prospective adoptive parents at initial contact or during orientation

On-Site Activities

*

- Interviews may include:

1. Program director
2. Relevant personnel
3. Persons served

- Review case records
- Review program information on website

AS 4.01

The organization has a recruitment plan for prospective adoptive parents that:

a. includes specialized recruitment strategies for children with special placement needs, as applicable;
b. details how the organization works with tribes to identify adoptive homes within the tribal community for American Indian and Alaska Native children; and
c. is evaluated annually.

NA: The program does not recruit prospective adoptive parents.

Examples: *Children with special placement needs may include: (1) sibling groups, (2) older children, (3) children with physical, emotional, behavioral, and developmental challenges, (4) children who identify as LGBTQ+, (5) youth who are pregnant or parenting, and (6) children of color who are overrepresented in the child welfare system. A recruitment plan may specify how carefully crafted language, images, and strategies can help the organization reach and connect with prospective adoptive parents who are willing and able to adopt these children.*

Recruitment strategies can include targeted and/or child-specific recruitment. Targeted recruitment strategies can include efforts to locate specific families for children with unique needs such as (1) reaching out to high school parents, teachers, and coaches who may be a resource for youth, (2) engaging specific cultural organizations, churches, or minority-owned businesses to recruit adoptive parents from particular ethnic or racial groups, (3) connecting with LGBTQ+ community groups and attending LQBTQ+ events to recruit LGBTQ+ adoptive parents, (4) partnering with tribes and Indian organizations and establishing joint recruitment efforts to identify families for American Indian and Alaska Native children, (5) outreach to healthcare professionals, individuals with experience working with people with disabilities, and accessible housing communities to recruit adoptive parents for children with disabilities or acute medical conditions, and (6) outreach to existing adoptive parents. Child-specific recruitment strategies

may include a comprehensive assessment of the child and identification of all individuals who may have a connection to the child, including family members, foster parents, former caregivers, members of the child's tribe, and other adults with a significant connection to the child.

AS 4.02

The organization engages, supports, and fosters trusting relationships with prospective adoptive parents beginning at their first interaction with the organization.

Examples: *Strategies to effectively engage, support, and build trusting relationships with prospective adoptive parents may include: (1) responding to inquiries in a timely manner, (2) having multiple ways in which prospective adoptive parents can inquire such as by phone, email, or through social media, (3) consistent messaging at all stages in the process and across all staff involved in the response system, (4) connection with support groups, previous adoptive parents, and other resources, and (5) opportunities to provide feedback and share their experiences or concerns.*

AS 4.03

Organizations that utilize online photo listing services to recruit prospective adoptive families ensure that:

a. accurate, strengths-based narratives are written with input from the child whenever possible;
b. appropriate mechanisms are in place to protect confidential and identifying information;
c. written consent is obtained from the child's legal guardian before photo listing the child; and
d. photo listings are updated at least annually, or as often as needed to include relevant information.

NA: The organization does not utilize photo listings to recruit prospective adoptive families.

Examples: *Regarding element (c), the public child welfare agency may consent for children who are legally freed for adoption; however, if parental rights have not been terminated, the organization should obtain consent from expectant parents or the judge who has jurisdiction over the child's case.*

AS 4.04

The organization provides prospective adoptive parents with information on adoption, the adoption process, and services offered by the organization, including:

a. policies or procedures relating to the organization's adoption services;
b. eligibility criteria;
c. fees and expenses;
d. estimated timelines and general information on waiting lists, if the organization maintains such lists;
e. common needs and characteristics of children awaiting adoptive families;
f. the importance of race, ethnicity, religion, tribal affiliation, language, sexual orientation, gender identity, and other factors in adoption;
g. options for openness and maintaining connections that benefit the child; and
h. the availability of supports, clinical services, and subsidies following adoption.

Interpretation: *Information on estimated wait times should be carefully communicated to prevent confusion or dissatisfaction if timelines exceed what was originally projected.*

AS 4.05

Eligibility criteria of adoptive parents is ethical, equitable, and:

a. prioritizes the needs and varying characteristics of children in care;
b. promotes inclusion of individuals and families with diverse backgrounds to ensure appropriate placements are available for all children; and
c. emphasizes the skills and capacities needed to provide a safe and supportive home environment.

Interpretation: *If eligibility criteria is limited, the organization must have a policy for such selectivity and refer applicants who do not meet its criteria to another provider, unless it is evident the applicants do not meet legally required criteria.*

Interpretation: *When placing American Indian and Alaska Native children, organizations should work closely with tribes to establish eligibility for adoptive parents that are consistent with the norms of the tribe and to identify adoptive homes within the tribal community through joint recruitment efforts.*

AS 5: Service and Permanency Planning and Adoption Service Contracts

Purpose

Adoption services establish permanent family relationships for children in need of permanency and increase the well-being, functioning, and stability of children, birth parents, adoptive families, and adopted individuals.

Persons served participate in the development and ongoing review of service and permanency plans and/or adoption services contracts that are the basis for delivery of services and support.

NA:

- The organization provides foster-to-adopt services only.
- The organization provides home study services only.
- The organization provides post-placement and/or post-adoption services only.

Interpretation: *The organization develops service and permanency plans for the individuals they serve. Plans for some individuals may be combined or separate depending on the nature of the program. Service plans are sometimes incorporated into the adoption services contract. Service plans are sometimes drafted prior to the completion of birth family assessments, child studies, and home studies and should be updated when those assessments are complete.*

Interpretation: *When the case involves an American Indian or Alaska Native child and family, the organization must: (1) give tribal or local American Indian or Alaska Native representatives an active role in all aspects of service planning and service delivery, including assessment, permanency, case closing, and aftercare, (2) consider and prioritize culturally relevant resources available through or recommended by the tribe or local Indian organizations, and (3) provide timely notification of case reviews to tribal representatives to ensure their involvement, particularly when changes are made to the plan.*

Rating Indicators:

1 All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice Standards.

2

Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice Standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted; however, these do not significantly impact service quality; or
- Procedures need strengthening; or
- With few exceptions, procedures are understood by staff and are being used; or
- For the most part, established timeframes are met; or
- Proper documentation is the norm and any issues with individual staff members are being addressed through performance evaluations and training; or
- With few exceptions, staff work with persons served, when appropriate, to help them receive needed support, access services, mediate barriers, etc.; or
- Active participation of persons served occurs to a considerable extent.

3

Practice requires significant improvement, as noted in the ratings for the Practice Standards. Service quality or program functioning may be compromised; e.g.,

- Procedures and/or case record documentation need significant strengthening; or

- Procedures are not well-understood or used appropriately; or
- Timeframes are often missed; or
- Case reviews are not being done consistently; or
- Level of care for some people is clearly inappropriate; or
- Service planning is often done without the full participation of persons served; or
- Appropriate family involvement is not documented; or
- Documentation is routinely incomplete and/or missing; or
- Individual staff members work with persons served, when appropriate, to help them receive needed support, access services, mediate barriers, etc., but this is the exception.

4 Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice Standards; e.g.,

- No written procedures, or procedures are clearly inadequate or not being used; or
- Documentation is routinely incomplete and/or missing.

Table of Evidence

Self Study Evidence

* • Service planning and monitoring procedures	
* • Adoption service contract template	
* • Procedures for review of permanency plans	

Site Visit Evidence

* • Reports or other aggregate data regarding the length of stay in out-of-home care from the previous 12 months, if the organization facilitates foster care adoptions

On-Site Activities

* • Interviews may include: 1. Program director 2. Relevant personnel 3. Persons served • Review case records

AS 5.01

Service plans are developed in a timely manner with the full participation of persons served and others as appropriate, and include:

a. agreed upon goals, desired outcomes, and timeframes for achieving them;
b. the adoption services and supports to be provided, and by whom; and
c. documentation of the individual or family's participation in service planning.

Examples: *Ways to support the full participation of persons served and others can include providing sufficient notice to interested parties and scheduling meetings at times and places where interested parties can attend.*

Examples: *In child-focused recruitment programs, workers can engage children in the development of the recruitment plan by seeking the child's input on or participation with: (1) types of recruitment activities conducted, (2) type of family desired, (3) development of recruitment tools, and (4) identification of individuals to consider.*

AS 5.02

The permanency plan for children in foster care defines the permanency goal as adoption, is reviewed at least every 6 months through a court or administrative review process, and specifies:

a. activities that support the achievement of adoption; and
b. a time frame for completing the adoption.

NA: The organization does not provide services in foster care cases.

Interpretation: *Federal laws, state statutes, or administrative rules may provide guidance about when and how administrative reviews are to be conducted. The case review may be conducted by or in collaboration with the public authority. The review is scheduled at times when appropriate parties can attend.*

AS 5.03

The worker and a supervisor, or a clinical, service, or peer team, review each case quarterly, or more frequently depending on the needs of persons served, to assess:

a. service plan implementation;
b. progress toward achieving service goals and desired outcomes;
c. need for additional or new services or other changes to the plan;
d. the need for any updates to the child background study or the home study; and
e. the continued appropriateness of agreed upon goals.

Interpretation: *When experienced workers are conducting reviews of their own cases, the worker's supervisor must review a sample of the worker's evaluations as per the requirements of the standard.*

AS 5.04

The worker and person served:

a. periodically review progress toward achievement of agreed upon service goals; and
b. document revisions to the service goals and plans.

Interpretation: *A clinical or other justification demonstrating the need for additional or new services, or for any significant pause in the process should be documented in the case record and discussion of such changes with persons served should be documented in the case record to ensure they fully understand the justification.*

Interpretation: *Each child receives information about progress toward achieving permanency as appropriate to their age, cultural needs, and developmental level.*

Interpretation: *Workers in child-focused recruitment programs should meet with the child at least monthly to establish a productive working relationship and customize the child's recruitment plan.*

AS 5.05

The adoption service contract signed by prospective adoptive parents includes:

a. a description of the services to be provided by the organization and responsibilities of the prospective adoptive parents;
b. fees, expenses, and the organization's refund policy;
c. a provision relating to duty of candor and ongoing disclosure requirements;
d. available post-placement and post-adoption services and details of any required post-placement visits and reports;
e. a plan describing the adoptive parents' and the organization's responsibilities if the adoption is disrupted or dissolved;

f. risks related to adoption services and waivers of liability only when such waivers are limited, consistent with applicable law and regulation, and based on the specific risks detailed in the contract; and
g. circumstances under which either party may terminate services.

NA: The organization provides child-focused recruitment only.

Interpretation: *When a child is being placed prior to the termination of parental rights, the organization should inform the prospective adoptive parents of the risks of such a placement and the steps that will be necessary to complete an adoption.*

Examples: *Examples of information in the plan if the adoption is disrupted or dissolved can include: (1) legal and financial obligations of the family and the organization, (2) how the child's wishes may be considered, and (3) how relevant authorities will be notified and may be involved.*

AS 5.06

The organization works in active partnership with persons served to:

a. assume a service coordination role, as appropriate, when the need has been identified and no other organization has assumed that responsibility;
b. ensure that they receive appropriate advocacy support;
c. assist with access to the full array of services to which they are eligible; and
d. mediate barriers to services within the service delivery system.

Adoption Services

AS 6: Birth Family Assessments and Child Studies

Purpose

Adoption services establish permanent family relationships for children in need of permanency and increase the well-being, functioning, and stability of children, birth parents, adoptive families, and adopted individuals.

The organization conducts assessments and collects all available information to evaluate service needs, facilitate matching and permanency, and compile relevant information for future use.

NA:

- The organization provides home study services only.
- The organization provides post-placement and/or post-adoption services only.

Interpretation: *The term "child study" includes both the process of assessing the child's needs and the written report, which is generally included in the referral information provided to prospective adoptive parents.*

Rating Indicators:

1 All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice Standards.

2

Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice Standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted; however, these do not significantly impact service quality; or
- Procedures need strengthening; or
- With few exceptions, procedures are understood by staff and are being used; or
- In a few rare instances, urgent needs were not prioritized; or
- For the most part, established timeframes are met; or
- Culturally responsive assessments are the norm and any issues with individual staff members are being addressed through performance evaluations and training; or
- Active participation of persons served occurs to a considerable extent.

3

Practice requires significant improvement, as noted in the ratings for the Practice Standards. Service quality or program functioning may be compromised; e.g.,

- Procedures and/or case record documentation need significant strengthening; or
- Procedures are not well-understood or used appropriately; or
- Urgent needs are often not prioritized; or
- Services are frequently not initiated in a timely manner; or
- Applicants are not receiving referrals, as appropriate; or
- Assessment and reassessment timeframes are often missed; or
- Assessment are sometimes not sufficiently individualized;
- Culturally responsive assessments are not the norm, and this is not being addressed in supervision or training; or
- Several case records are missing important information; or
- Participation of persons served is inconsistent; or
- Intake or assessment is done by another organization or referral source and no documentation and/or summary of required information is present in case record.

4 Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice Standards; e.g.,

- There are no written procedures, or procedures are clearly inadequate or not being used; or
- Documentation is routinely incomplete and/or missing.

Table of Evidence

Self Study Evidence

*	• Procedures for child assessments	
*	• Procedures for identification and collaboration in ICWA cases	
*	• Procedures for birth family assessments	
*	• Copy of assessment tool(s)	

Site Visit Evidence

*	• Indian Child Welfare Act information provided to families • Copies of tribal state agreements, when applicable

On-Site Activities

*	• Interviews may include: 1. Program director 2. Relevant personnel 3. Persons served • Review case records

AS 6.01

Assessments are conducted and information is collected in a strengths-based, culturally- and linguistically responsive manner to identify services and resources that support the achievement of agreed upon goals and increase engagement in service delivery.

AS 6.02

The organization reviews records and gathers all available information about birth parents and their extended families from birth parents or other individuals, including:

a. preferences for the child's placement and wishes for the child;
b. preferences for openness or the child maintaining connections with siblings, family members, or other individuals;
c. family medical history, including mental health and substance use history;
d. birth parents' relationship history and marital status;
e. support provided by expectant parents during the pregnancy and care, visitation and custody of the child;
f. dated photographs, videos, and/or a physical description of birth parents; and
g. family social history, including information about the child's grandparents, siblings, or other extended family members.

Interpretation: *Family social history should include information about the birth parents': (1) tribal affiliation, (2) employment, (3) education, (4) religion, and (5) interests. When the program is unable to obtain this information, it makes reasonable efforts to obtain the information up until the time when the adoption is finalized and documents efforts to obtain the missing information in the case record.*

In foster care adoptions, information from the foster care record should be obtained before the record is sealed, and the organization or another responsible entity should share the relevant information with the prospective adoptive parents.

Interpretation: *For an American Indian or Alaska Native child, information gathered should also include the child's Certified Degree of Indian Blood and tribal membership card. To protect an American Indian or Alaska Native child's rights to tribal enrollment or membership, the state agency, court, and private agency if applicable must also coordinate the preparation and maintenance of confidential records on all state adoptions of American Indian and Alaska Native children that include: (1) a copy of the final adoption decree or order, (2) the birth name and birthdate of the Indian child, their tribal affiliation, and the name of the child after adoption, (3) names and addresses of the birth parents, (4) names and addresses of the adoptive parents, (5) name and contact information for any agency having files or information related to the adoption, (6) any affidavit signed by the biological parent(s) requesting confidential identity, and (7) any information relating to tribal membership or eligibility of the adopted child.*

The Bureau of Indian Affairs is also authorized to receive and maintain these records and to release them at the request of an American Indian or Alaska Native adoptee, their adoptive or foster parents, or an Indian tribe when the American Indian or Alaska Native child has reached age 18.

Interpretation: *In child-focused recruitment programs, the worker must conduct an in-depth review of the records and information obtained which should also include all significant people in the child's life, past or present.*

AS 6.03

The organization reviews records and gathers all available information about the child from the birth parents, other individuals who have custody or are responsible for care of the child, and the child themselves, including:

a. dated photographs or videos of the child;
b. history and records of prenatal care and the child's birth;
c. date the child entered into care, the circumstances of the child's entry into care, and a history of all past and current placements with reasons for each placement change;
d. history of abuse or neglect;
e. assessment of past trauma;
f. the child's medical and social history including any significant illnesses, injuries, or diagnoses, hospitalizations, other special needs;
g. all available medical records for the child including developmental status and data, test results, immunization records, dental records, and psychological records;
h. results of a current medical examination;
i. history and records of the child's education; and
j. contact information for organizations, medical professionals or facilities, or others involved in providing services to the birth parents and the child.

Interpretation: *In child-focused recruitment programs, the worker must conduct an in-depth review of the records and information obtained, which should also include the child's: (1) next court date, (2) most recent assessment, (3) history of services received and needed, (4) strengths, challenges, and desires, and (5) preparedness for adoption.*

AS 6.04 (FP)

The organization engages children considering or planning for adoption in an age- and developmentally appropriate assessment of:

a. their understanding of the meaning of adoption, the adoption process, and services offered by the organization;
b. their preferences, goals, and concerns; and
c. ways in which they can be involved in the process.

NA: The organization only provides services for infant adoptions.

Interpretation: *The organization should discuss adoption with children who have a formal plan or goal of adoption and those who are considering adoption as one permanency option. Other providers may have already discussed adoption with the child, sometimes before adoption is formally identified as a goal. Adoption workers should have strategies for their initial contact with the child and for engaging them in conversations over time about adoption.*

AS 6.05 (FP)

The organization identifies American Indian and Alaska Native children and has a process to ensure outreach and collaboration with the tribe or Indian organization to:

a. determine jurisdiction;
b. ensure compliance with the Indian Child Welfare Act;
c. provide the family with information regarding their rights under the Indian Child Welfare Act;
d. facilitate participation in assessment and service planning to determine the most appropriate plan for the child; and
e. maintain connections between the child and their extended family and tribe.

Interpretation: *All organizations must have established procedures for identifying American Indian and Alaska Native children to determine if the child or his/her biological parent(s) are members of a federally recognized Indian tribe, or if the child is eligible for membership in a federally recognized Indian tribe. Physical appearance, blood quantum, or perceived presence or absence of cultural cues within the family are not appropriate determinants of ICWA applicability. The organization should document efforts to identify and contact children's tribes and if tribes are unknown the organization should contact the regional office of the Bureau of Indian Affairs to identify, locate, and notify the child's tribe.*

Adoption Services

AS 7: Home Study Practice

Purpose

Adoption services establish permanent family relationships for children in need of permanency and increase the well-being, functioning, and stability of children, birth parents, adoptive families, and adopted individuals.

Qualified personnel use a standardized home study process to collect and analyze information, assess safety, and determine the eligibility of prospective adoptive parents.

NA:

- The organization provides post-placement and/or post-adoption services only.
- The organization provides child-focused recruitment only.

Interpretation: *Laws and regulations regarding who is qualified to conduct adoption home studies vary by state or tribe.*

Note: *Foster-to-adopt programs will complete FKC 19 and AS 7.*

Rating Indicators:

1 All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice Standards.

2

Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice Standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted; however, these do not significantly impact service quality; or
- Procedures need strengthening; or
- With few exceptions, procedures are understood by staff and are being used; or
- For the most part, established timeframes are met; or
- Proper documentation is the norm and any issues with individual staff members are being addressed through performance evaluations and training; or
- Active participation of persons served occurs to a considerable extent.

3

Practice requires significant improvement, as noted in the ratings for the Practice Standards. Service quality or program functioning may be compromised; e.g.,

- Procedures and/or case record documentation need significant strengthening; or
- Procedures are not well-understood or used appropriately; or
- Timeframes are often missed; or
- Several case records are missing important information; or
- Participation of persons served is inconsistent.

4 Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice Standards; e.g.,

- No written procedures, or procedures are clearly inadequate or not being used; or
- Documentation is routinely incomplete and/or missing.

Table of Evidence

Self Study Evidence

* • Table of contents of training curricula	
* • Home study procedures	
* • Copy of home study tool(s)	
* • Procedures for background checks	

Site Visit Evidence

* • Training curricula

On-Site Activities

* • Interviews may include: 1. Program director 2. Relevant personnel • Review case records

AS 7.01

Staff who conduct home studies receive initial and periodic training and ongoing supervision on the defined home study method and tools.

Interpretation: *While practice should be consistent with the program model, tools, and standards, decisions about how the home study is conducted in each case (including who must be interviewed, how each interview is conducted, the content of interviews, and visits to the home) are clinical decisions that should consider the unique needs and circumstances of the prospective adoptive parent(s) and the child if the child is already identified or living in the home. The organization should recognize that there can be subjective aspects to assessment and decision-making and have appropriate mechanisms to ensure that its determinations are justified.*

AS 7.02 (FP)

The home study process includes:

a. collection and review of self-reported information and documents from the prospective adoptive parents;
b. at least one individual in-person interview with each prospective adoptive parent and one joint interview;
c. age-and developmentally-appropriate interviews with each child and adult living or frequently in the home;
d. age-and developmentally-appropriate interviews with each child or adult child of the prospective adoptive parents living outside the home;
e. at least two visits to the prospective adoptive family's home including a safety assessment of the home and an observation of family members interacting together;
f. criminal background, child abuse and neglect records, and sex offender registry checks according to applicable law and regulation;
g. a review of information and documents relating to any previous unfavorable home studies, denied adoption petitions, disruptions, dissolutions, or placement of other children out of the home; and
h. personal references, including unrelated references when permitted by law.

Interpretation: *Individuals living in the home share common areas, sleep in the home, and have lived there for more than two weeks. Individuals frequently in the home should include any child care providers.*

In-person interviews provide the best opportunity for engagement of the person interviewed and provide additional information through observations and interactions during the interview and are preferred, but have only been specifically required for the prospective adoptive parents. It can sometimes be appropriate to interview other individuals through a video conference or over the phone. When the organization is unable to complete an interview, it should make a clinical determination if the interview is necessary given the circumstances, other steps that can be taken to obtain relevant information, and document that decision and its efforts in the case record.

People who provide references should be interviewed to validate the reference and can provide additional information or verification of other information collected through the home study process.

While best practice generally requires at least two visits to the home to effectively engage the family in the home study process, make the necessary observations, and effectively collect all the required and necessary information, the organization should conduct additional visits when it deems necessary.

Tribes and local Indian organizations may also be able to provide valuable support in assessing and approving adoptive families for American Indian and Alaska Native children.

AS 7.03

The home study includes a psychosocial assessment of each prospective adoptive parent's:

a. motivations, expectations, and preparedness for adoption;
b. personal characteristics and caregiving abilities and experiences;
c. physical and mental health, including history of trauma, abuse or neglect, and substance use;
d. significant family history, status of marital and family relationships, and family lifestyle;
e. educational background, employment history, and financial status;
f. community and social supports;
g. willingness and ability to support a child's continued connection to their biological family members and racial, ethnic and cultural heritage; and
h. previous experiences with foster care or adoption.

Interpretation: *Regarding element (a), the psychosocial assessment should provide opportunities to discuss prospective adoptive parents' experiences related to infertility, miscarriage, or the death of a child to assess their readiness for, and understanding of, adoption, determine if referrals for services such as grief counseling are needed, and provide additional support as appropriate.*

Interpretation: *Regarding element (b), an assessment of prospective adoptive parents' caregiving abilities and experiences should include a review of their knowledge and skills related to fostering positive behavior, with particular attention to strategies that address the unique needs of children who have experienced trauma.*

Examples: *Regarding element (b), personal characteristics of individuals and families positively associated with parenting adopted children include, but are not limited to: (1) patience, (2) empathy, (3) adaptability, (4) effective communication, (5) coping skills, and (6) problem-solving abilities.*

AS 7.04

The organization provides education, support, and continued assessment throughout the home study process that helps prospective adoptive parents consider:

a. their strengths and capacity to provide lifelong care for children who have experienced trauma and loss; and

b. whether adoption is an appropriate goal for their family.

AS 7.05

The information gathered during the home study process is carefully considered, in a timely manner, to determine:

a. if any further assessment is needed;
b. what additional counseling, training, or preparation is needed;
c. the family's ability and readiness to successfully complete an adoption;
d. the family's eligibility and suitability for adoption; and
e. the specific characteristics and special needs of children the family would be suitable to care and provide for.

Interpretation: *The rationale for these determinations and the persons involved in making the determinations should be clearly documented in the record.*

AS 7.06

If the organization determines that prospective adoptive parents may not meet the required eligibility criteria or certain factors might not be adequately mitigated to demonstrate suitability, the organization:

a. ensures specific concerns are communicated to the prospective adoptive parents as early as possible and attempts to resolve them; and
b. provides a written explanation of the reasons for the decision and the procedures for appeal if the home study is denied.

Interpretation: *Eligibility criteria of countries and states may differ, and the organization must evaluate all applicable criteria. The organization should ensure required eligibility factors are clearly and accurately addressed in the home study. While some jurisdictions are willing to waive eligibility criteria in unique circumstances, it is best to receive those waivers in advance and in writing.*

Examples: *Factors that may need to be mitigated for home study approval may include: (1) untreated physical or mental health issues, (2) hazards in the home such as unsecured firearms or inoperative smoke/carbon monoxide detectors, (3) outdated pet vaccinations, (4) unstable finances or relationships, and (5) housing modifications related to living space and arrangements, cleanliness, or household members.*

AS 7.07

A written home study report is completed in a timely manner and contains complete, accurate, and current information addressing applicable eligibility criteria, suitability, and all other required information.

Interpretation: *The Safe and Timely Interstate Placement of Foster Children Act generally requires the completion within 60 days and acceptance of such studies received from another State within 14 days.*

AS 7.08

The organization ensures that all prospective adoptive homes receive and maintain licensure, approval, or certification in accordance with state, tribal, or local regulation and completes periodic updates when there are significant changes in circumstance to ensure relevant information and documents are current.

NA: The organization provides home study services only.

Interpretation: *Home studies, including background checks, should be updated periodically so that they remain valid in accordance with applicable requirements. Significant changes in circumstances include a change in residence, employment or financial resources, additional children or adults residing in the home, criminal history, abuse history, medical status, etc. Updates for a significant change in circumstance are best completed as soon as possible, but may be postponed in certain circumstances, for example, if an additional change is expected or the prospective adoptive parents expect a significant amount of time to pass before their home study will be used.*

Adoption Services

AS 8: Training for Prospective Adoptive Parents

Purpose

Adoption services establish permanent family relationships for children in need of permanency and increase the well-being, functioning, and stability of children, birth parents, adoptive families, and adopted individuals.

Prospective adoptive parents complete required training to prepare the family for adoption.

NA:

- The organization provides home study services only.
- The organization provides post-placement and/or post-adoption services only.
- The organization provides child-focused recruitment only.

Interpretation: *Training must meet all applicable state requirements and for international adoptions training must also meet all requirements of 22 CFR Part 96.48 and the child's country of origin.*

Rating Indicators:

1 All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice Standards.

2

Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice Standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted; however, these do not significantly impact service quality; or
- Procedures need strengthening; or
- With few exceptions, procedures are understood by staff and are being used; or
- For the most part, established timeframes are met; or
- Proper documentation is the norm and any issues with individual staff members are being addressed through performance evaluations and training; or
- Active participation of persons served occurs to a considerable extent.

3

Practice requires significant improvement, as noted in the ratings for the Practice Standards. Service quality or program functioning may be compromised; e.g.,

- Procedures and/or case record documentation need significant strengthening; or
- Procedures are not well-understood or used appropriately; or
- Timeframes are often missed; or
- Several case records are missing important information; or
- Participation of persons served is inconsistent.

4 Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice Standards; e.g.,

- No written procedures, or procedures are clearly inadequate or not being used; or
- Documentation is routinely incomplete and/or missing.

Table of Evidence

Self Study Evidence

* • Procedures for the provision of training and preparation of prospective adoptive parents and for child specific training and preparation	
* • Table of contents of training provided directly by the organization and/or a list of trainings provided by third parties	

Site Visit Evidence

* • Informational materials provided to prospective adoptive parents • Training curriculum for any training provided directly by the organization

On-Site Activities

* • Interviews may include: 1. Program director 2. Relevant personnel 3. Persons served • Review case records

AS 8.01

The organization uses effective training methods and standardized curricula that are tailored to meet the needs of prospective adoptive parents.

Examples: *The organization may customize training based on the type of adoption or the unique characteristics of persons served. For example, kinship caregivers, foster parents, or prospective adoptive parents who have already adopted another child through the organization may receive individualized training best suited to their unique strengths and needs.*

Examples: *Examples of training methods found to be effective or commonly used include: (1) in-person, group seminars, (2) online training through webinars and self-paced trainings, (3) recorded trainings and podcasts, (4) reading and writing assignments, and (5) individual counseling and training.*

AS 8.02

Prospective adoptive parents receive training and demonstrate competence in:

a. the adoption process and significant provisions of laws and regulations;
b. the availability of, and application process for, subsidies or other financial benefits;
c. options for openness in adoption;
d. the importance of legally finalizing the adoption and for obtaining and maintaining documentation of citizenship for children adopted internationally;
e. long-term impacts of adoption on the child and the family; and
f. the availability and importance of post-adoption supports and services.

Interpretation: *With regards to element (a), it is especially important for training to include educating prospective adoptive parents on how laws and regulations might impact the adoption process. For example, prospective adoptive parents should receive training on the Indian Child Welfare Act, its impact on placement and permanency for American Indian and Alaska Native children, and its requirements relating to supporting the child's cultural identity and facilitating connections to their tribe.*

AS 8.03 (FP)

Prospective adoptive parents receive training and demonstrate competence in parenting adopted children with trauma history, including:

a. understanding chronic or complex trauma;
b. recognizing the signs of unknown or undisclosed abuse, effective strategies to support safe disclosure, and how to report abuse allegations to appropriate authorities;
c. maintaining safety when there is a history of sexual abuse, trafficking, self-harming behavior, or other unsafe conduct;
d. promoting positive behavior by adapting parenting techniques to fit the child's needs; and
e. overcoming barriers to seeking or obtaining support.

Interpretation: *Regarding element (d), training on promoting positive behavior should include information on discipline techniques that can be harmful to children, especially children with a history of trauma, including: (1) corporal punishment, (2) interventions that involve withholding nutrition or hydration or that inflict physical or psychological pain, (3) the use of demeaning, shaming, or degrading language or activities, and (4) forced physical exercise as punishment or in excess.*

Examples: *The organization may provide or refer prospective adoptive parents to evidence-based parenting programs to learn more about complex trauma and how to effectively parent children who have experienced multiple traumatic events, such as physical, psychological, or sexual abuse, neglect, institutionalization and out-of-home care, malnutrition, prenatal substance exposure, or other events.*

Training may include how to: (1) recognize trauma triggers and conditioned responses, (2) avoid actions or reactions that may trigger the child, (3) normalize the child's feelings and provide emotional support in ways the child can accept, (4) implement strategies for relaxation, (5) provide positive experiences to encourage self-esteem, (6) provide developmentally-appropriate information and education about trauma to the child, (7) provide developmentally-appropriate opportunities for choice and control, and (8) recognize and respond to secondary trauma.

AS 8.04 (FP)

Prospective adoptive parents receive training and demonstrate competence in supporting the social-emotional needs of adopted children, including helping them:

a. cope with separation, loss, and grief;
b. build and maintain healthy bonds and attachments;
c. navigate changing roles and relationships; and
d. explore, develop, and embrace their cultural, racial, and gender identity by providing a safe, affirming environment.

Interpretation: *Having skills and strategies to navigate changing roles and relationships is especially important when the child and prospective adoptive parents are relatives, already known to each other, or when some level of openness is being considered.*

Examples: *Regarding element (d), training can include: (1) the organization's nondiscrimination policy, (2) the history, traditions, values, and communication styles of populations served, (3) systemic inequities and implicit bias, (4) how culture influences trauma response, (5) a review of vocabulary relevant to LGBTQ+ youth; and (6) parenting practices that promote the safety and well-being of LGBTQ+ youth.*

AS 8.05

Prospective adoptive parents receive directly or by referral:

a. needed customized education, counseling, or support specific to their unique needs or experiences which may impact their readiness and suitability for placement; and
b. reassessment when needed to ensure they remain ready and suitable for an adoptive placement.

Examples: *Examples of unique needs and experiences can include, but are not limited to: (1) prior history of trauma, mental illness, or substance use, (2) experience of infertility, miscarriage, or loss of a child, (3) their own adoption as a child, (4) grief or loss due to missed time with their adopted child, and (5) a previous unsuccessful adoption attempt or disruption or dissolution of an adoption.*

Adoption Services

AS 9: Consents and Matching

Purpose

Adoption services establish permanent family relationships for children in need of permanency and increase the well-being, functioning, and stability of children, birth parents, adoptive families, and adopted individuals.

The organization ensures consents are obtained properly and makes diligent and timely efforts to match children with prospective adoptive parents who can meet their needs for safety, well-being, and permanency.

NA:

- The organization provides home study services only.
- The organization provides post-placement and/or post-adoption services only.

Interpretation: *Children are encouraged to participate in the decision-making process to the greatest extent possible given their age and developmental level.*

Note: *Foster-to-adopt programs will complete FKC 7 and AS 9.*

Rating Indicators:

1 All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice Standards.

2

Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice Standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted; however, these do not significantly impact service quality; or
- Procedures need strengthening; or
- With few exceptions, procedures are understood by staff and are being used; or
- For the most part, established timeframes are met; or
- Proper documentation is the norm and any issues with individual staff members are being addressed through performance evaluations and training; or
- Active participation of persons served occurs to a considerable extent.

3

Practice requires significant improvement, as noted in the ratings for the Practice Standards. Service quality or program functioning may be compromised; e.g.,

- Procedures and/or case record documentation need significant strengthening; or
- Procedures are not well-understood or used appropriately; or
- Timeframes are often missed; or
- Several case records are missing important information; or
- Participation of persons served is inconsistent.

4 Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice Standards; e.g.,

- No written procedures, or procedures are clearly inadequate or not being used; or
- Documentation is routinely incomplete and/or missing.

Table of Evidence

Self Study Evidence

*	• Copy of tools used for providing notice, obtaining consents, and matching	
*	• Matching procedures	
*	• Procedures for identifying, locating, and providing notice to individuals whose notice and consent is required	
*	• Procedures for obtaining consents	

Site Visit Evidence

*	• Documentation of tribal participation in placement process, when applicable

On-Site Activities

*	• Interviews may include: 1. Program director 2. Relevant personnel 3. Persons served • Review case records

AS 9.01

Custody status and applicable notice and consent requirements are determined as early as possible.

NA: The organization provides child-focused recruitment only.

Note: *The Indian Child Welfare Act includes provisions related to the termination of parental rights that apply to both public and private adoption proceedings.*

AS 9.02 (FP)

The organization ensures timely and diligent efforts to locate and provide notice to all parties who require notification or whose consent is required and documents such efforts in the case record.

NA:

- The organization only provides services in cases where birth parents' rights have already been terminated and no other consents are required.
- The organization provides child-focused recruitment only.

Interpretation: *The organization should take steps to prevent practices that could limit or compromise a party's rights to notice and consent, including, for example: (1) following up on inconsistent or incomplete information on someone whose notice or*

consent may be required, (2) detailing important due dates and overseeing completion of required tasks, (3) establishing procedures to determine jurisdiction and change of jurisdiction, and (4) verifying that notice and consent requirements were met when those steps are completed by another provider.

The organization should understand consent requirements set by state statutes. All states require consent from all legal parents if parental rights have not been terminated. Additional consent requirements vary and may include obtaining consent from (1) the child if over a certain age, (2) the agency or individual who has custody of the child, (3) the child's guardian ad litem, or (4) the court that has jurisdiction over the child.

AS 9.03 (FP)

When obtaining consents to adoption, the organization ensures all applicable legal requirements are met and verifies each individual providing consent:

a. has read and understands the consent and any related documents;
b. has had sufficient time to consider the decision;
c. is not under the influence of any substances or conditions that could compromise their understanding or decision making;
d. understands when and how they may revoke their consent;
e. has not experienced any undue pressure or duress for their consent;
f. has not received or been promised any compensation or other consideration in exchange for their consent; and
g. is not aware of any fraud having been committed in relation to the adoption.

NA:

- The organization only provides services in cases where birth parents' rights have already been terminated and no other consents are required.
- The organization provides child-focused recruitment only.

AS 9.04

The organization assesses all available information about the birth parents, the child, and prospective adoptive parents, including expressed preferences, and determines which prospective adoptive parents may be most suitable to meet the needs of the child.

Interpretation: *An organization that has responsibility for placing an American Indian or Alaska Native child should work closely with the child's tribe to identify adoptive homes within the tribal community. Families from all tribes to which the child has ties should be considered as placement options, and eligibility should be consistent with the norms of the tribe.*

Interpretation: *Some circumstances that can make transition more difficult and have been found to be factors in some disruptions and dissolutions include placement of more than one unrelated child into a home at the same time, or placement of a child too soon after the birth or addition of another child to the family. The organization might generally avoid matching children with prospective adoptive parents in these circumstances or take additional steps to prepare for and support such placements.*

AS 9.05

The organization provides information about the prospective adoptive parents who were identified as possible matches to the birth parents, the youth, and/or the individual(s) who are responsible for making the placement decision and documents the provision of this information in its records.

AS 9.06

The organization incorporates provisions of applicable law and regulations for placement preferences and matching into its established criteria for determining or making recommendations about the best interests of the child and:

a. makes placement decisions based on this criteria; and
b. documents the decision in its records.

Interpretation: *In cases where expectant parents have made an adoption plan prior to the child's birth, the organization can make or support a preliminary match before the birth, and makes a final decision or recommendation on the match only after the child is born and the child study is completed and reviewed.*

Interpretation: *Organizations must follow guidelines set forth in the Multi-Ethnic Placement Act and the Indian Child Welfare Act and should consider birth parents' expressed desires and the importance of keeping siblings together. When there is any conflict in these preferences or priorities the organization engages administrative personnel and legal counsel as needed to make its decision and carefully documents its deliberations and a rationale for its decision.*

Interpretation: *When the organization is working with American Indian and Alaska Native children and families, tribal representatives and service providers must be involved in placement decisions and placement changes to ensure compliance with the Indian Child Welfare Act, which requires that preference be given to families in the following order: (1) a member of the child's extended family, (2) families who are members of the child's tribe, and (3) other American Indian or Alaska Native families. Alternative placement preferences established by the child's tribe may apply, and the court may also take into consideration the preferences of the child or their birth parents.*

Interpretation: *When the organization does not have responsibility for making the decision, it should provide input in the process whenever possible and/or review the placement decision and provide feedback when necessary to express any questions or concerns about the match.*

AS 9.07

The organization notifies prospective adoptive parents of the match and provides a referral package which includes the child study and all non-identifying information that can be provided.

NA: The organization provides child-focused recruitment only.

Interpretation: *The organization must not withhold or misrepresent any information concerning the child. Intentional misrepresentation, concealment, or withholding of information can negatively impact children and families and put the organization at risk for litigation. The organization may not provide all non-identifying information about the child's family history at the time of the match and initial placement but should give the prospective adoptive parents sufficient information about the child to ensure safety and well-being and provide additional, non-identifying information on the child's background and family history at the time of the adoption.*

Examples: *Examples of practices to implement the standard include: (1) informing prospective adoptive parents in advance of any limits on information gathering and disclosure, (2) maintaining detailed records of the receipt and provision of information, and (3) training staff on procedures for collecting and disclosing information and documentation requirements.*

AS 9.08

The organization allows prospective adoptive parents at least two weeks to consider the match and provides information, counseling, training, and ongoing assessment of the suitability of the match based on the information in the referral, the home study, and any new information received.

NA: The organization provides child-focused recruitment only.

Interpretation: *The prospective adoptive parents should have sufficient time to give careful thought and consideration to the decision. While there may be circumstances where the child's immediate needs are significant and the child would benefit from a shorter timeframe, the organization must still take steps to ensure the prospective parents have given careful thought and consideration to their decision.*

Adoption Services

AS 10: Placement

Purpose

Adoption services establish permanent family relationships for children in need of permanency and increase the well-being, functioning, and stability of children, birth parents, adoptive families, and adopted individuals.

The organization prepares and supports parties to the adoption for placement by providing information, counseling, service referrals, and training.

NA:

- The organization provides home study services only.
- The organization provides post-placement and/or post-adoption services only.

Rating Indicators:

1 All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice Standards.

2

Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice Standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted; however, these do not significantly impact service quality; or
- Procedures need strengthening; or
- With few exceptions, procedures are understood by staff and are being used; or
- For the most part, established timeframes are met; or
- Proper documentation is the norm and any issues with individual staff members are being addressed through performance evaluations and training; or
- Active participation of persons served occurs to a considerable extent.

3

Practice requires significant improvement, as noted in the ratings for the Practice Standards. Service quality or program functioning may be compromised; e.g.,

- Procedures and/or case record documentation need significant strengthening; or
- Procedures are not well-understood or used appropriately; or
- Timeframes are often missed; or
- Several case records are missing important information; or
- Participation of persons served is inconsistent.

4 Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice Standards; e.g.,

- No written procedures, or procedures are clearly inadequate or not being used; or
- Documentation is routinely incomplete and/or missing.

Table of Evidence

Self Study Evidence

*	• Procedures for adoption preparation that address the provision of information, counseling, and support	
*	• Procedures for maintaining contact with relatives and openness in adoption	
*	• Procedures for placement and child transfer	

Site Visit Evidence

*	• Informational materials provided to persons served

On-Site Activities

*	• Interviews may include: 1. Program director 2. Relevant personnel 3. Persons served • Review case records

AS 10.01

The organization provides or arranges for services and supports needed to help prepare birth parents for the child's placement including:

a. referral for needed services;
b. assistance as needed with planning for the child's birth, placement, and for the adoption process;
c. counseling and support relating to grief, separation, loss, and the lifelong implications of placing a child for adoption;
d. discussion of changing roles and relationships in the case of a relative adoption or when the birth parents will have an ongoing relationship or maintain contact with the child or adoptive parents;
e. assistance with maintaining relationships with friends and family who can provide support; and
f. post-adoption services and information on the potential for search and reunion in the future.

Interpretation: *It can help birth parents to maintain supportive relationships by providing, with their permission, information, counseling, and/or support to family members or other individuals with whom they have a close relationship, especially if those individuals may not be fully supportive of the adoption plan.*

In foster care cases where the birth parents' rights have been involuntarily terminated, it may not be possible or appropriate to provide such services. The organization may consult with the public agency or its designee to determine the appropriateness and needs for such services. Documentation of that consultation and implementation of the guidance provided is sufficient evidence of implementation for this standard.

AS 10.02

The organization provides or arranges for developmentally-appropriate services needed to help the child prepare for placement, including:

a. information to help the child understand the meaning, process, and lifelong impact of adoption;
b. counseling to help the child understand and cope with feelings of fear, separation, and loss;
c. opportunities for visits with prospective adoptive parents, including chances to share information about the child's routines and preferences, and preparation and support for such visits;
d. discussion of changing roles and relationships in the case of a relative adoption or when the birth parents will maintain contact or a relationship with the child;

e. preparation for moving to a new community or school;
f. opportunities for peer support;
g. information on post-placement services; and
h. providing opportunities for the child's involvement in planning for placement.

Examples: *A lifebook can be created by older children or for younger children to describe the child's personal history.*

AS 10.03

When the parties to the adoption are considering an open adoption or maintaining connections between the child and their biological family members, previous foster families, or others with whom they have a connection, the organization:

a. assesses and makes professional recommendations regarding if, and to what extent, continued contact is in the child's best interests;
b. offers counseling and support for planning the exchange of information or continued contact, including how to resolve conflicts that may arise; and
c. documents these efforts in the case record.

Interpretation: *Documentation in the record that the organization has assessed the appropriateness of openness or maintaining connections will be sufficient evidence of standard implementation in cases where there are no plans for openness or maintaining connections.*

Examples: *Maintaining relationships between adopted children and their biological relatives or others with whom they have a significant connection is most often beneficial for the child's development and the stability of the adoptive placement. Decisions regarding whether to maintain contact may depend on: (1) the circumstances surrounding the termination of the birth parents' parental rights, (2) the characteristics of the child and the birth parents, (3) the relationship between the child and birth family, and (4) the relationship between the adoptive parents and the birth parents.*

The continuum of open adoption is extensive and may include, but is not limited to: (1) birth parent(s)' providing their identifying information to the adoptive parents, (2) organization-mediated communication, (3) occasional written, phone, or in-person contact, and/or (4) frequent in-person contact. To assist in planning the details of an open adoption, the organization can: (1) help identify individuals the child might continue to contact and encourage consideration of the child's expressed desires regarding ongoing contact, (2) discuss options for the type and frequency of contact, emphasizing that communication needs and desires may change over time, (3) explain limits on confidentiality and enforcement of agreements, and (4) document expressed preferences and concerns in the case record.

AS 10.04

Prospective adoptive parents receive services and supports to prepare for the child's placement in the home, including assistance with:

a. planning the details and timeframe of the transition, including plans for pre-placement visits with the prospective adoptive family;
b. preparing for and managing the child's behaviors and emotions during the transition;
c. preparing other children or individuals in the home; and
d. obtaining resources for the child's therapeutic, medical, educational, or other special needs; and
e. obtaining insurance, financial assistance, or other benefits.

Interpretation: *Pre-placement visits can help the child learn more about the prospective adoptive family's community and family culture and form a relationship. A typical transition plan includes initial daytime visits, progressing to overnight and weekend visits in the adoptive family's home.*

Examples: *Information can be provided through: (1) reading materials, (2) contact information for service providers, (3) group or individual counseling and training sessions, and (4) online resources.*

Examples: *Regarding element (f), financial assistance may include: (1) recurring monthly payments through Title IV-E subsidies, (2) tax credits, (3) employer benefits, and (4) education expense assistance.*

AS 10.05

The organization ensures that the transfer of the child takes place in secure and appropriate circumstances, with properly trained and qualified escorts, if used.

AS 10.06

The organization promptly provides prospective adoptive parents with updated information about the child if and when such information becomes available.

Adoption Services

AS 11: Temporary Care for Children Awaiting Placement

Purpose

Adoption services establish permanent family relationships for children in need of permanency and increase the well-being, functioning, and stability of children, birth parents, adoptive families, and adopted individuals.

Foster parents provide temporary care that ensures the health and safety of infants awaiting adoption.

NA:

- The organization does not provide temporary care for children awaiting placement or provides such care through its foster care program.
- The organization provides home study and/or child-focused recruitment services only.
- The organization provides post-placement and/or post-adoption services only.

Interpretation: *When the case involves an American Indian or Alaska Native child, the tribe or a local Indian organization and the Bureau of Indian Affairs should be notified of the decision to temporarily place an infant awaiting adoption in a foster home.*

Interpretation: *This section is intended for programs that provide short-term, temporary care for children, usually newborns, while they await placement, typically in states where direct placement with prospective adoptive parents is not possible and do not otherwise provide foster care services.*

Rating Indicators:

1 All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice Standards.

2

Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice Standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted; however, these do not significantly impact service quality; or
- Procedures need strengthening; or
- With few exceptions, procedures are understood by staff and are being used; or
- For the most part, established timeframes are met; or
- Proper documentation is the norm and any issues with individual staff members are being addressed through performance evaluations and training; or
- Active participation of persons served occurs to a considerable extent.

3

Practice requires significant improvement, as noted in the ratings for the Practice Standards. Service quality or program functioning may be compromised; e.g.,

- Procedures and/or case record documentation need significant strengthening; or
- Procedures are not well-understood or used appropriately; or
- Timeframes are often missed; or
- Several case records are missing important information; or
- Participation of persons served is inconsistent.

4 Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice Standards; e.g.,

- No written procedures, or procedures are clearly inadequate or not being used; or
- Documentation is routinely incomplete and/or missing.

Table of Evidence

Self Study Evidence

*	• Policy for licensure, approval, or certification of homes	
*	• Procedures for licensure, approval, or certification of homes	
*	• Procedures for foster home assessments, including criminal background checks	
*	• Procedures for foster home visits	

Site Visit Evidence

*	• Training curricula

On-Site Activities

*	• Interviews may include: 1. Relevant personnel 2. Foster parents • Review case records • Review foster parent records

AS 11.01

Prior to placement, foster homes are licensed, approved, or certified according to state, tribal, or local regulation, and foster parents have completed all required training.

AS 11.02 (FP)

Prior to placement, the organization:

a. assesses the home to identify any safety concerns; and
b. conducts criminal background and child abuse registry checks for all adults living or frequently in the home in accordance with applicable federal and state requirements.

Interpretation: *Individuals living in the home share common areas, sleep in the home, and have lived there for more than two weeks. Individuals frequently in the home can include for example, a child care provider.*

AS 11.03 (FP)

The organization coordinates needed healthcare services for the child, and foster parents are trained to respond to the healthcare needs of the child.

AS 11.04

The adoption worker visits the foster parents and the child:

a. within the first two weeks of placement; and
b. at least once a month while in temporary placement to evaluate safety and needs.

AS 11.05 (FP)

Each foster family develops or uses the organization's protocols for responding to emergencies, including accidents, serious illness, fire, and natural disasters.

AS 11.06 (FP)

Foster parents who transport children in their own vehicles:

a. use age-appropriate passenger restraint systems;
b. properly maintain vehicles and obtain required registration and inspection;
c. provide the organization with validation of their driving records; and
d. provide the organization with validation of their licenses and appropriate insurance coverage.

Interpretation: *Regarding element (d), this information should be provided as frequently as necessary, based on the amount of time licenses and insurance are valid. The organization should determine what level of insurance coverage is considered appropriate and maintain a copy of each resource parent's auto policy declaration to validate appropriate insurance coverage.*

Adoption Services

AS 12: Post-Placement and Post-Adoption Support and Family Preservation Services

Purpose

Adoption services establish permanent family relationships for children in need of permanency and increase the well-being, functioning, and stability of children, birth parents, adoptive families, and adopted individuals.

Comprehensive post-placement and post-adoption services are available to ensure safety, well-being, and long-term stability and permanency.

NA:

- The organization provides home study services only.
- The organization provides child-focused recruitment only.

Rating Indicators:

1 All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice Standards.

2

Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice Standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted; however, these do not significantly impact service quality; or
- Procedures need strengthening; or
- With few exceptions, procedures are understood by staff and are being used; or
- For the most part, established timeframes are met; or
- Proper documentation is the norm and any issues with individual staff members are being addressed through performance evaluations and training; or
- Active participation of persons served occurs to a considerable extent.

3

Practice requires significant improvement, as noted in the ratings for the Practice Standards. Service quality or program functioning may be compromised; e.g.,

- Procedures and/or case record documentation need significant strengthening; or
- Procedures are not well-understood or used appropriately; or
- Timeframes are often missed; or
- Several case records are missing important information; or
- Participation of persons served is inconsistent.

4 Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice Standards; e.g.,

- No written procedures, or procedures are clearly inadequate or not being used; or
- Documentation is routinely incomplete and/or missing.

Table of Evidence

Self Study Evidence

*	• Procedures for post-placement monitoring, visits, and reports	
*	• Procedures for responding to crisis situations	

Site Visit Evidence

*	• Reports on adoption-related crisis situations reviewed through risk management or performance and quality improvement activities • Community resource and referral list • Educational/training curricula, if applicable

On-Site Activities

*	• Interviews may include: 1. Program director 2. Relevant personnel 3. Persons served • Review case records

AS 12.01

The organization provides or refers children, youth, adoptive parents, adoptive families, and adopted adults to an array of preventive and supportive services based on their individualized needs, including:

a. information, education, and counseling;
b. social and cultural events and activities;
c. preventive care for medical, developmental, and mental health needs;
d. respite care; and
e. support and advocacy groups, including peer support.

Interpretation: *Adopted children may not need supportive services until years after an adoption is finalized. The organization should provide the family with information on how to obtain services even after they are no longer served by the organization.*

Interpretation: *Whenever possible, services provided by others should be provided by adoption-competent professionals with experience in trauma-informed care.*

Interpretation: *Specialized services for transracial or transcultural adoptive families, kinship caregivers, children who identify as LGBTQ+, and children with physical, emotional, behavioral, and developmental challenges should be made available to the greatest extent possible given the availability of local resources.*

Examples: *Engaging families in social activities and basic supportive services can help keep them connected to the organization and increase their likelihood of requesting help when more significant needs emerge.*

Examples: *Examples of common adoption-related issues addressed by preventive and supportive services include: (1) grief and feelings of loss or abandonment; (2) challenges with developing and maintaining trusting relationships; (3) identity formation; (4) difficulty navigating developmental milestones and events; and (5) unknown medical, developmental, or mental health needs.*

Support for transracial and transcultural adoptions can include cultural and social events such as picnics, camps, educational activities, heritage tours, and peer support.

AS 12.02

The organization provides or refers children, youth, adoptive parents, adoptive families, and adopted adults to an array of intensive and therapeutic services as appropriate to their requests or need for service, including:

a. medical, developmental, and psychological evaluations;
b. crisis intervention services;
c. individual, group, and family counseling and therapy;
d. early intervention and other developmental and educational supports;
e. mental health and substance use services; and
f. medical or rehabilitative care and residential treatment.

Interpretation: *Whenever possible, services provided by others should be provided by adoption-competent professionals with experience in trauma-informed care.*

AS 12.03

The organization completes required post-placement and post-adoption visits to monitor and assess safety, permanency, and well-being.

Examples: *To promote completion of required visits, organizations may: (1) communicate visit and report requirements in advance, (2) provide opportunities for continued engagement with the organization through social events and supportive services, and (3) require families to pay refundable deposits or post-placements fees in advance.*

AS 12.04 (FP)

The organization acts promptly in situations where the placement is in crisis, a child may be in danger, or where conduct relating to the adoption may be in question.

Examples: *Examples include situations where: (1) the placement may be at risk of disruption or dissolution, (2) adoptive parents are considering, planning or have completed an unregulated custody transfer, (3) allegations of child abuse or neglect are made, (4) a child discloses a prior history of being a victim of sexual abuse or human trafficking, (5) a child experiences a mental health crisis or suicide attempt, and (6) a question or concern is raised about the consents to the adoption or other fraudulent or unethical conduct relating to the adoption.*

AS 12.05 (FP)

When the organization believes that a child is in danger if they remain in the placement or that the placement is no longer in the child's best interests, it:

a. acts promptly, in accordance with all applicable legal and regulatory requirements, to report the situation to the appropriate authorities; and
b. assists as needed with transitioning the child to an appropriate placement.

Interpretation: *In an international adoption that is not considered a final placement, the organization must coordinate with the primary provider, foreign central authority and the Department of State, and in all international adoptions the organization should take appropriate steps to prevent the return of the child to the country of origin without authorization from the foreign central authority and the Department of State.*

AS 12.06

For individuals interested in searching for and contacting relatives, the organization provides information, counseling, and support in accordance with applicable confidentiality requirements.

AS 12.07

When a child is placed prior to the final adoption order the organization takes steps to ensure:

a. an order declaring the adoption final is sought by the adoptive parents; and
b. the child's US citizenship is obtained and documentation of the final adoption order and citizenship is maintained when it is an international adoption.

Adoption Services

AS 13: Adoption Program Administration

Purpose

Adoption services establish permanent family relationships for children in need of permanency and increase the well-being, functioning, and stability of children, birth parents, adoptive families, and adopted individuals.

The organization has administrative policies, procedures, and systems ensuring the confidentiality, accessibility, and maintenance of adoption records, proper collaboration with partnering providers, and the provision of ethical adoption services.

NA: The organization provides child-focused recruitment only.

Rating Indicators:

1 All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice Standards.

2

Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice Standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted; however, these do not significantly impact service quality; or
- Procedures need strengthening; or
- With few exceptions, procedures are understood by staff and are being used; or
- For the most part, established timeframes are met; or
- Proper documentation is the norm and any issues with individual staff members are being addressed through performance evaluations and training; or
- Active participation of persons served occurs to a considerable extent.

3

Practice requires significant improvement, as noted in the ratings for the Practice Standards. Service quality or program functioning may be compromised; e.g.,

- Procedures and/or case record documentation need significant strengthening; or
- Procedures are not well-understood or used appropriately; or
- Timeframes are often missed; or
- Several case records are missing important information; or
- Participation of persons served is inconsistent.

4 Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice Standards; e.g.,

- No written procedures, or procedures are clearly inadequate or not being used; or
- Documentation is routinely incomplete and/or missing.

Table of Evidence

Self Study Evidence

*	• Policy on ethical adoption practice	

* • Procedures for the collection of information, record keeping and retention, and information disclosure	

Site Visit Evidence

* • Documentation of licensure or credentials of collaborating organizations or individuals • Service agreements and contracts • Records of any complaints received in the last two years related to the adoption program

On-Site Activities

* • Interviews may include: 1. Program director 2. Relevant personnel 3. Persons served • Observe record storage area

AS 13.01

The organization makes readily available to the adoptee and the adoptive parent(s) upon request all non-identifying information in its custody in accordance with applicable legal requirements and contractual obligations.

AS 13.02

The organization ensures that adoption records and personal data are used only for the purposes for which the information was gathered and safeguards sensitive individual information.

AS 13.03

The organization has mechanisms to collect and maintain birth parents' updated medical or social information, including, as appropriate, contact information so that it can be made available to the adoptee in accordance with applicable requirements.

Interpretation: *When a public agency or its designee is responsible for handling information related to birth parents, the organization should have procedures for referring birth parents, adoptees, or other individuals to the agency for assistance.*

AS 13.04

If the organization ceases to provide adoption services, it has a plan for:

a. transferring custody of adoption records that are subject to retention or archival requirements to an appropriate custodian and ensuring the future accessibility of those adoption records, and
b. transferring open cases to other organizations.

Interpretation: *It can be helpful to detail transfer plans in an agreement with another adoption service provider in advance and to plan for how persons served may be provided with choices in the transfer process. The plan should also address the refunding of fees paid for services not yet rendered and expenses not yet incurred.*

AS 13.05

When working in collaboration with other individuals or organizations for the provision of adoption services, the organization operates under a written agreement with that provider which specifies:

a. the adoption services to be provided by each party;
b. fees and compensation;
c. applicable laws, regulations, and standards that govern the provision of services;
d. the lines of authority between the providers including who is responsible for oversight of the services provided
e. terms and conditions for terminating the agreement;
f. documentation, record keeping, and confidentiality requirements; and
g. timely communication and the exchange of information between the parties and with persons served.

NA: The organization does not collaborate with other providers.

Interpretation: *Provisions relating to fees and compensation should articulate: (1) the amount of fees and compensation, (2) which party will bill the person served, (3) conditions under which fees are paid and compensation is made, including required documentation, (4) and provisions for refunds.*

AS 13.06 (FP)

Personnel do not take any action to discourage or retaliate against any individual for:

a. questioning the conduct of the organization;
b. expressing an opinion about the organization;
c. making a complaint or expressing a grievance; or
d. providing information, expressing a concern, or filing a complaint with the primary provider, the accrediting entity or any authority.

Adoption Services

AS 14: Financial Accountability in Adoption

Purpose

Adoption services establish permanent family relationships for children in need of permanency and increase the well-being, functioning, and stability of children, birth parents, adoptive families, and adopted individuals.

The organization operates in a financially ethical and responsible manner and takes steps to prevent the exploitation, sale, abduction, or trafficking of children.

NA: The organization does not have a role in placement or adoption finalization decisions and does not charge prospective adoptive parents fees for its services.

Rating Indicators:

1

All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice Standards.

2

Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice Standards;e.g.,

- Minor inconsistencies and not yet fully developed practices are noted;however, these do not significantly impact service quality;or
- Procedures need strengthening;or
- With few exceptions, procedures are understood by staff and are being used;or
- For the most part, established timeframes are met;or
- Proper documentation is the norm and any issues with individual staff members are being addressed through performance evaluations and training;or
- Active participation of persons served occurs to a considerable extent.

3

Practice requires significant improvement, as noted in the ratings for the Practice Standards.Service quality or program functioning may be compromised;e.g.,

- Procedures and/or case record documentation need significant strengthening;or
- Procedures are not well-understood or used appropriately;or
- Timeframes are often missed;or
- Several case records are missing important information;or
- Participation of persons served is inconsistent.

4

Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice Standards;e.g.,

- No written procedures, or procedures are clearly inadequate or not being used;or
- Documentation is routinely incomplete and/or missing.

Table of Evidence

Self Study Evidence

* • Payment and compensation policy	
* • Payment and compensation procedures	
* • Donation policy, if applicable	

Site Visit Evidence

* • Information on fees and expenses, if applicable

On-Site Activities

* • Interviews may include: 1. Program director 2. Relevant personnel 3. Persons served • Review financial records of compensation and fees paid by adoptive parents

AS 14.01 (FP)

The organization ensures that finances do not inappropriately influence adoption decisions and has written policies and procedures that:

a. prohibit its employees and agents from giving money or other consideration, directly or indirectly, to a child's parent(s), other individual(s), or entities as payment for the child or as an inducement to release the child;
b. prohibit compensation of any individual who locates or refers children or expectant parents on a contingent or incentive basis; and
c. ensure payments are not excessive and are only for activities related to the adoption when compensation is paid directly or indirectly to individuals whose consents may be required.

NA: The organization does not have a role in placement or adoption finalization decisions.

Interpretation: *Procedures should include documentation and oversight of requested payments, actual compensation, and the purchase of services or goods. The organization should reinforce these policies and procedures in periodic training for personnel, contractors, or other agents acting on behalf of the organization, and through the information provided to expectant parents and prospective adoptive parents.*

Examples: *Examples of activities related to the adoption include: (1) adoption proceedings, (2) medical expenses for prenatal care and birth, (3) care of the child, (4) care of the expectant mother while pregnant and immediately following the birth of the child, and (5) the provision of child welfare and child protection services.*

AS 14.02

Compensation paid to personnel and other individuals directly or indirectly involved in providing adoption services is:

a. reasonable for the services rendered;
b. on a fee-for-service, hourly wage, or salary basis rather than a contingent fee basis; and
c. only paid for services rendered or for reimbursement of appropriate expenses incurred.

NA: The organization does not have a role in placement or adoption finalization decisions.

Interpretation: *When the organization allows for the payment of compensation in advance, procedures should detail how the advanced compensation will be returned if services are not rendered.*

This does not prohibit an organization or person from providing in-kind or other donations not intended to influence or affect a particular adoption.

Examples: *Compensation amounts may reflect: (1) norms for compensation within the organization, region, or adoption community, (2) staff qualifications, and (3) workload requirements, such as the scope and complexity of the work.*

AS 14.03

When the organization accepts or makes charitable donations, policies and procedures ensure that donations do not influence child placement decisions.

NA:

- The organization does not accept or make charitable donations.
- The organization does not have a role in placement or adoption finalization decisions.

Interpretation: *Making donations to individuals or entities involved in consenting to, or obtaining consent for, the adoption can compromise the integrity of the process and should generally be avoided. If such donations are made, the organization should take significant steps to preserve integrity and keep thorough documentation.*

AS 14.04

The organization itemizes and discloses in writing all fees and estimated expenses for adoption services and provides information on:

a. which fees and expenses are non-refundable; and
b. payment due dates and payment plans, when applicable.

NA: The organization does not charge prospective adoptive parents fees for its services.

Interpretation: *Translation and document expenses should include costs for obtaining, translating, or copying records or documents required to complete the adoption, costs for court documents, and costs for notarizations and certifications.*

Examples: *Fees and expenses for adoption services may cover: (1) the initial home study and any required updates, (2) placement or program fees, (3) charges from other individuals or entities in the United States, (4) the care of the child, (5) document and translation costs, (6) required donations or contributions, (7) post-placement and post-adoption services, (8) other third party fees, and (9) travel and accommodations.*

AS 14.05

The organization properly handles monies collected from prospective adoptive parent(s) by:

a. not charging additional fees or expenses beyond those disclosed in the adoption services contract;
b. only collecting and retaining fees for services rendered; and
c. returning funds to which the prospective adoptive parent(s) may be entitled within 60 days.

NA: The organization does not charge prospective adoptive parents fees for its services.

Interpretation: *If the organization charges fees in advance, it should have procedures to accurately account for those funds so that they can be refunded promptly when necessary. It is best practice to maintain the funds collected separately from general operating expenses.*

Adoption Services

AS 15: Intercountry Adoption Program Administration

Purpose

Adoption services establish permanent family relationships for children in need of permanency and increase the well-being, functioning, and stability of children, birth parents, adoptive families, and adopted individuals.

The organization has administrative policies, procedures and systems to ensure that the services it provides as an exempt or supervised provider in intercountry adoptions are consistent with applicable foreign, federal, state, and primary provider requirements.

NA:

- The organization does not provide any services in intercountry adoptions.
- The organization is accredited under federal regulations for intercountry adoption.
- The organization only provides foster-to-adopt services or child-focused recruitment.

Rating Indicators:

1 All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice Standards.

2

Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice Standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted; however, these do not significantly impact service quality; or
- Procedures need strengthening; or
- With few exceptions, procedures are understood by staff and are being used; or
- For the most part, established timeframes are met; or
- Proper documentation is the norm and any issues with individual staff members are being addressed through performance evaluations and training; or
- Active participation of persons served occurs to a considerable extent.

3

Practice requires significant improvement, as noted in the ratings for the Practice Standards. Service quality or program functioning may be compromised; e.g.,

- Procedures and/or case record documentation need significant strengthening; or
- Procedures are not well-understood or used appropriately; or
- Timeframes are often missed; or
- Several case records are missing important information; or
- Participation of persons served is inconsistent.

4 Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice Standards; e.g.,

- No written procedures, or procedures are clearly inadequate or not being used; or
- Documentation is routinely incomplete and/or missing.

Table of Evidence

Self Study Evidence

* • Executive Verification	

Site Visit Evidence

* • List of any adoptions that have been disrupted or dissolved in the last 4 years or written verification that no disruptions or dissolutions are known to the organization

On-Site Activities

* • Interviews may include: 1. Program director 2. Relevant personnel 3. Prospective adoptive or adoptive parents • Review case records

AS 15.01

The organization demonstrates its suitability and qualification to provide intercountry adoption services by providing current and historical information about its operations and services, both before it begins providing services and periodically thereafter as needed.

Interpretation: *COA Accreditation's Executive Verification Form – ICA can be used as evidence, and documentation can be provided in the form of an attestation or as otherwise required by the primary providers with whom the organization works.*

The organization must disclose any changes in the information required within the timeframes specified in COA Accreditation's self-reporting requirements or as specified by the primary provider and at least within thirty business days of learning of the change.

Examples: *Examples of information that should be provided include: (1) verification of the absence of, or information about, any other names under which the organization has been known, (2) verification of current insurance coverage, (3) documentation of current licensure status for adoption services, (4) documentation demonstrating past history of compliance with licensing and accreditation requirements including any non-compliance with licensing requirements for the last 10 years, (5) documentation of any instances in which the organization lost the right or authority to provide adoption services or documentation of any such instance, (6) verification of the absence of, or documentation of, any instances of known complaints filed against the organization in the last 10 years with or by an domestic or foreign authorities in relation to its provision of adoption services, (7) verification of the absence of, or documentation of, any instances of known lawsuits or investigations or criminal charges filed against the organization in the last 10 years in relation to its provision of adoption or other child welfare services or financial irregularities, (8) a list of all personnel who provide or oversee adoption services which indicates the names of any other adoption service providers they worked for, and (9) verification of the absence of, or documentation of, any instances in which personnel providing or overseeing adoption services were subject to external disciplinary proceedings, convicted of a crime or, are currently under investigation.*

AS 15.02

The organization maintains the following data when it learns of a possible or actual disruption or dissolution and promptly reports the situation and the information to the primary provider:

a. the foreign country from which the child emigrated;
b. the State to which the child immigrated;
c. the current age of the child;
d. the date of the child's placement for adoption;
e. the date of or planned date for the disruption or dissolution;
f. the reason(s) for the disruption or dissolution;
g. information on the child's subsequent placement(s) and final legal adoption;

h. the names of the agencies or persons that handled the placement and adoption; and
i. the plans for the child.

Interpretation: *When citing reasons for the disruption or dissolution, it can be helpful to specify reasons cited by the adoptive parents separately from reasons cited by the organization in the event they differ.*

AS 15.03

The organization promptly complies with any requests for information or data made by the primary provider.