STATE OF IOWA DEPARTMENT OF Health and Human SERVICES

HHS Relative Home Study Protocol

EFFECTIVE JULY I, 2023

HHS STAFF PROTOCOL PRIOR TO MAKING A REFERRAL

- I. Perform Iowa Courts Online checks for household members age 14 and older.
- 2. Perform criminal, sex offender, and child abuse checks of all persons age 14 years and older who reside in the home using the SING system.
- 3. If the record is clean, print off the SING results screen if the record is cleaned.
- 4. Have the subject(s) complete the Record Check Evaluation Form(s)470-2310 for any criminal, child abuse or sex offender registry findings. There must be one form for each finding. When the form is returned from the subject of the check submit it to the local record check evaluation committee for evaluation.
- 5. Complete the evaluation process and document the evaluation results on the Record Check Decision Form 470-2386.
- 6. Proceed with the referral to the RRTS contractor upon supervisory approval to do so if the Record Check Decision indicates that the abuse and or crime would not the subjects from being approved for relative placement.
 - a. Seek supervisory consultation if the record check decision does not recommend the subjects from completing the home study but the court has ordered the home study be completed.

MAKING A REFERRAL TO RRTS

The RRTS contractor has twenty (20) working days from the time a complete referral packet is received to complete a non-ICPC relative home study. Day I for completed referrals will be the next business day following the date the referral is received.

A complete referral packet contains the following:

- I. A complete Relative Home Study Face Sheet.
- 2. SING results screen indicating no record OR Record Check Decision Form.
 - a. Send the Record Check Decision form as soon as it is complete. Please note that the FIRST DAY of the period for completion of the home study begins when ALL referral information is received by the RRTS contractor.
- 3. Send the completed packet by email or mail to the to the approved service area email or mailing address for the geographic area in which the relative home study is requested.
 - a. Email: foster-adopt@fouroaks.org (effective 7/1/23)
 - b. Subject Line: HHS Relative 20 Day HS Referral