

|-&gt;

Title 22@ Social Security

|-&gt;

Division 2@ Department of Social Services-Department of Health Services

|-&gt;

Part 2@ Health and Welfare Agency-Department of Health Services Regulations

|-&gt;

Subdivision 4@ Institutions and Boarding Homes for Persons Aged 16 and Above

|-&gt;

Chapter 3@ Adoptions Program Regulations [Renumbered]

|-&gt;

Subchapter 5@ Procedures for Agency Adoptions

|-&gt;

Article 11@ Assessment of the Applicant

|-&gt;

Section 35181@ Full Assessment of the Adoptive Applicant

## **35181 Full Assessment of the Adoptive Applicant**

The agency shall have at least 3 separate face-to-face contacts with each applicant for the purpose of interviewing the applicant for the assessment. (1) Up to 2 contacts may be adoption training or preparation class sessions. (2) The contacts shall include, at least, all of the following: (A) At least one interview with the applicant in the home. (B) A separate face-to-face interview with each applicant. (C) A joint interview when there are two applicants. (D) A face-to-face interview with all other individuals residing in the home. (E) Additional interviews as necessary.

### **(1)**

Up to 2 contacts may be adoption training or preparation class sessions.

### **(2)**

The contacts shall include, at least, all of the following: (A) At least one interview with the applicant in the home. (B) A separate face-to-face interview with each applicant. (C) A joint interview when there are two applicants. (D) A face-to-face interview with all other individuals residing in the home. (E) Additional interviews as necessary.

### **(A)**

At least one interview with the applicant in the home.

### **(B)**

A separate face-to-face interview with each applicant.

**(C)**

A joint interview when there are two applicants.

**(D)**

A face-to-face interview with all other individuals residing in the home.

**(E)**

Additional interviews as necessary.

**(b)**

The agency shall obtain from the applicant, at least, all of the following information: (1) Identifying information: (A) Full name, including aliases and maiden names. (B) Current address and telephone number. (C) Date of birth. (D) Sex. (2) Blood relationship to child, if any. (3) Race and ethnic background information. (4) Religion, if any. (5) Verification of employment or income. (6) Marriage certificate, if married. (A) Verification of termination of prior marriages. 1. When verification of the dissolution of all marriages of the applicants is not possible, the marriages preceding a verified divorce decree shall be assumed to be validly dissolved. (7) Names, date of birth, sex of other individuals in the home and personal or biological relationship to the applicant. (8) Names, dates of birth and location of any minor children of the applicant who are not living in the home of the applicant (9) Report of a medical examination of each applicant (A) The report shall be completed by a licensed physician or a nurse practitioner or physician's assistant practicing under a licensed physician. (B) The report shall be completed no more than 6 months before the date of the application to adopt. (C) The agency may substitute a health questionnaire completed by the applicant for the medical report if both of the following conditions exist: 1. The applicant is the current care giver of the child or a relative seeking to adopt a specific child, and 2. The completed questionnaire does not, in the agency's judgment, identify

indicators requiring further evaluation or report.a. If in the agency's judgment, sufficient additional information is obtained from the physician who has been treating a specific condition identified in the questionnaire, additional medical examination is not necessary. (10) A certificate, for each adult residing in the home, stating that the individual is free from communicable tuberculosis. (11) The names of three individuals to be contacted by the agency for the purpose of obtaining references. (12) The results of a screening for any criminal background of the applicant and any other adults residing in the home and, the FBI criminal record, from DOJ. (13) The results of out-of-state child abuse and neglect registry checks for the applicant and any other adult in the household who has lived in another state in the preceding five years. (14) Authorization for information from additional sources to be released to the agency, as necessary, to complete the assessment. (15) Authorization for the adoption agency to release a copy of the written assessment to other adoption and child welfare agencies for the purpose of matching the applicant with a child for adoption.

**(1)**

Identifying information: (A) Full name, including aliases and maiden names. (B) Current address and telephone number. (C) Date of birth. (D) Sex.

**(A)**

Full name, including aliases and maiden names.

**(B)**

Current address and telephone number.

**(C)**

Date of birth.

**(D)**

Sex.

**(2)**

Blood relationship to child, if any.

**(3)**

Race and ethnic background information.

**(4)**

Religion, if any.

**(5)**

Verification of employment or income.

**(6)**

Marriage certificate, if married.(A) Verification of termination of prior marriages. 1.

When verification of the dissolution of all marriages of the applicants is not possible, the marriages preceding a verified divorce decree shall be assumed to be validly dissolved.

**(A)**

Verification of termination of prior marriages. 1. When verification of the dissolution of all marriages of the applicants is not possible, the marriages preceding a verified divorce decree shall be assumed to be validly dissolved.

**1.**

When verification of the dissolution of all marriages of the applicants is not possible, the marriages preceding a verified divorce decree shall be assumed to be validly dissolved.

**(7)**

Names, date of birth, sex of other individuals in the home and personal or biological relationship to the applicant.

**(8)**

Names, dates of birth and location of any minor children of the applicant who are not living in the home of the applicant

**(9)**

Report of a medical examination of each applicant (A) The report shall be completed by a licensed physician or a nurse practitioner or physician's assistant practicing under a licensed physician. (B) The report shall be completed no more than 6 months before the date of the application to adopt. (C) The agency may substitute a health questionnaire completed by the applicant for the medical report if both of the following conditions exist: 1. The applicant is the current care giver of the child or a relative seeking to adopt a specific child, and 2. The completed questionnaire does not, in the agency's judgment, identify indicators requiring further evaluation or report.a. If in the agency's judgment, sufficient additional information is obtained from the physician who has been treating a specific condition identified in the questionnaire, additional medical examination is not necessary.

**(A)**

The report shall be completed by a licensed physician or a nurse practitioner or physician's assistant practicing under a licensed physician.

**(B)**

The report shall be completed no more than 6 months before the date of the application to adopt.

**(C)**

The agency may substitute a health questionnaire completed by the applicant for the medical report if both of the following conditions exist: 1. The applicant is the current care giver of the child or a relative seeking to adopt a specific child, and 2. The completed questionnaire does not, in the agency's judgment, identify indicators requiring further evaluation or report.a. If in the agency's judgment, sufficient additional information is obtained from the physician who has been treating a specific condition identified in the questionnaire, additional medical examination is not necessary.

**1.**

The applicant is the current care giver of the child or a relative seeking to adopt a specific child, and

**2.**

The completed questionnaire does not, in the agency's judgment, identify indicators requiring further evaluation or report.a. If in the agency's judgment, sufficient additional information is obtained from the physician who has been treating a specific condition identified in the questionnaire, additional medical examination is not necessary.

**a.**

If in the agency's judgment, sufficient additional information is obtained from the physician who has been treating a specific condition identified in the questionnaire, additional medical examination is not necessary.

**(10)**

A certificate, for each adult residing in the home, stating that the individual is free from communicable tuberculosis.

**(11)**

The names of three individuals to be contacted by the agency for the purpose of obtaining references.

**(12)**

The results of a screening for any criminal background of the applicant and any other adults residing in the home and, the FBI criminal record, from DOJ.

**(13)**

The results of out-of-state child abuse and neglect registry checks for the applicant and any other adult in the household who has lived in another state in the preceding five years.

**(14)**

Authorization for information from additional sources to be released to the agency, as necessary, to complete the assessment.

**(15)**

Authorization for the adoption agency to release a copy of the written assessment to other adoption and child welfare agencies for the purpose of matching the applicant with a child for adoption.

**(c)**

In assessing the adoptive applicant, the agency shall consider the following factors for the applicant, as well as any children or other adults residing in the home: (1) Social history, including the following: (A) Personal characteristics and current functioning. (B) The results of a screening for any criminal record and child abuse index report. (2) A determination of the applicant's commitment and capability to meet the needs of a child including both of the following: (A) Basic needs. (B) The specified needs of an identified child related to the assessment of the child under Sections 35127.1 and .2. (3) The applicant's understanding of the legal and financial rights and responsibilities in adoption. (4) Motivation for seeking adoption and the ability and willingness to assume permanent responsibility for the care, guidance and protection of a child through adoption. (5) Adequacy of housing. (6) Social support system. (7) Financial stability. (8) General characteristics: (9) The preparation or plan the applicant has made for care of the minor in the event of death or incapacity of the adoptive parent or parents. (10) The ability of the applicant to work with a child welfare agency in support of a case plan for a child who is a dependent of the juvenile court. (A) Whether the applicant is willing and able to be a permanency planning family.

**(1)**

Social history, including the following: (A) Personal characteristics and current functioning. (B) The results of a screening for any criminal record and child abuse index

report.

**(A)**

Personal characteristics and current functioning.

**(B)**

The results of a screening for any criminal record and child abuse index report.

**(2)**

A determination of the applicant's commitment and capability to meet the needs of a child including both of the following: (A) Basic needs. (B) The specified needs of an identified child related to the assessment of the child under Sections 35127.1 and .2.

**(A)**

Basic needs.

**(B)**

The specified needs of an identified child related to the assessment of the child under Sections 35127.1 and .2.

**(3)**

The applicant's understanding of the legal and financial rights and responsibilities in adoption.

**(4)**

Motivation for seeking adoption and the ability and willingness to assume permanent responsibility for the care, guidance and protection of a child through adoption.

**(5)**

Adequacy of housing.

**(6)**

Social support system.

**(7)**

Financial stability.



**(8)**

General characteristics:

**(9)**

The preparation or plan the applicant has made for care of the minor in the event of death or incapacity of the adoptive parent or parents.

**(10)**

The ability of the applicant to work with a child welfare agency in support of a case plan for a child who is a dependent of the juvenile court. (A) Whether the applicant is willing and able to be a permanency planning family.

**(A)**

Whether the applicant is willing and able to be a permanency planning family.

**(d)**

If the adoptive applicant is a relative, the agency shall consider the nature of the relationship the relative applicant has with the birth parent or another extended family member.

**(e)**

If the adoptive applicant is a birth parent of the child to be adopted, the following factor shall also be considered: (1) If the child was a dependent of the juvenile court, whether the conditions which led to the child's removal from the parent still exist.

**(1)**

If the child was a dependent of the juvenile court, whether the conditions which led to the child's removal from the parent still exist.

**(f)**

The agency shall identify any resources, services or training needed to facilitate the adoptive applicant's ability to meet the needs of the child.

**(g)**

The agency shall consider whether the applicant would like to enter into a post-adoption contact agreement and, if so, the kind of post-adoption contact the applicant would like to have with the birth parent, another family member, or the child's Indian tribe.