Home Study QA Reviews

Review Period: March 2010 - November 2010

Service Area: Eastern Service Area - KVC Behavioral Healthcare Nebraska

Total Number of Home Studies Reviewed: **10**

GENERAL INFORMATION	#Yes	# App	% Achieved
Contractor identified purpose of home study	**10**	**10**	**100.00%**
Contractor entered ALL face sheet information	**7**	**10**	**70.00%**
All required background checks complete	**9**	**10**	**90.00%**
National Criminal History	10	10	100.00%
Nebraska State Patrol	10	10	100.00%
Sex Offender Registry	10	10	100.00%
CPS-Central Registry	9	10	90.00%
APS-Central Registry	10	10	100.00%
Local Law Enforcement	10	10	100.00%

APPLICANT	#Yes	# App	% Achieved
Date and Place of Birth	**10**	**10**	**100.00%**
Education	**7**	**10**	**70.00%**
Employment:	**6**	**10**	**60.00%**
Personality and Maturity	**9**	**10**	**90.00%**
Family Background and Relationships	**4**	**10**	**40.00%**
Significant Life Experiences	**7**	**10**	**70.00%**
Social Problems	**4**	**9**	**44.44%**
Relationships between adults	**1**	**2**	**50.00%**

CHILDREN	#Yes	# App	% Achieved
Children-Applicable Reviews	**6**	**10**	**60.00%**
Child Information - Name, DOB, etc	**6**	**6**	**100.00%**
Relationship to applicant	**3**	**6**	**50.00%**
Child Description - abilities, special needs, etc	**5**	**5**	**100.00%**
Child Perception of foster care, adoption	**6**	**6**	**100.00%**

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MARRIAGE SECTION	#Yes	# App	% Achieved
Marriage-Applicable Reviews	**8**	**10**	**80.00%**
Description of previous marriages	**6**	**7**	**85.71%**
Information-app w/child - former relationships	**0**	**4**	**0.00%**
Date of current marriage	**1**	**2**	**50.00%**
Overall marital functioning	**1**	**2**	**50.00%**
Decision making process	2	2	100.00%
Resolution of Conflicts	2	2	100.00%
Attitude toward spouse's family	1	2	50.00%
Infertility problems	**1**	**2**	**50.00%**

FAMILY LIFESTYLE	#Yes	# App	% Achieved
Interests, activities and hobbies	**10**	**10**	**100.00%**
Religious background and practices	**7**	**10**	**70.00%**
Accept child with different religious practices	**9**	**10**	**90.00%**
Detials on how applicant will address issues	**7**	**10**	**70.00%**
Physical description of the home	**9**	**10**	**90.00%**
Accomodations for physical handicap	**2**	**3**	**66.67%**
Sleeping arrangements	**10**	**10**	**100.00%**
Overall info regarding financial management	**8**	**10**	**80.00%**
Income and assets	**9**	**10**	**90.00%**
Monthly expenses	**10**	**10**	**100.00%**
Ability to live within income	**8**	**10**	**80.00%**
Insurance plans	**9**	**10**	**90.00%**
Unusual expenditures and circumstances	**9**	**10**	**90.00%**
Overall information - community resources etc.	**4**	**10**	**40.00%**
Extended family and friends	7	10	70.00%
School Supports	10	10	100.00%
Churches, temples, synagogues etc	7	10	70.00%
Medical practitioners & facilities	7	10	70.00%

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PARENTAL	#Yes	# App	% Achieved
Changes in lifestyle after child is placed	8	10	80.00%
Parenting style and experiences with children	10	10	100.00%
Nurturing Style	10	10	100.00%
Methods of discipline	5	10	50.00%
Expectation of children in the home	7	10	70.00%
Understanding and ability to meet child specific needs	9	10	90.00%

MOTIVATION TO	#Yes	# App	% Achieved
How the intention to foster or adopt child came about	6	10	60.00%
Feelings of other family members and children	8	10	80.00%
Attitudes of applic toward child's birth parents and family	7	10	70.00%
Ability and willingness to work with service providers	6	10	60.00%
Understanding and interest in open adoption	4	6	66.67%
Plans for assimilating children with special needs	5	9	55.56%
How will child be told of his/her adoption and background	5	6	83.33%

REFERENCES	#Yes	# App	% Achieved
Minimum of 3 included	7	10	70.00%
Employer reference (for adoption cases)	0	1	0.00%
Incorporated strengths identified by references	10	10	100.00%
Incorporated concerns identified by references	5	6	83.33%
Health Information Report completed	9	10	90.00%
Treatment plan for medical conditions	5	8	62.50%
Identify conditions that may affect parenting ability	3	7	42.86%

EVALUATION	#Yes	# App	% Achieved
Evaluation Complete	6	10	60.00%
Summary of applicant strength	7	10	70.00%
Summary of applicant weaknesses	6	9	66.67%
Recommendations for additional training and support	9	10	90.00%

RECOMMENDATION	#Yes	# App	% Achieved
Explanation of approval or disapproval	10	10	100.00%
Identify type of children to consider for placement	10	10	100.00%
Contractor used the designated form	10	10	100.00%