



Community Based Care: Hardee, Highlands & Polk Counties

Placement Evaluation Tool PET

Developed by Bill Nunnally

1. Home Study
 - a. Do we have a correctly completed home study from the CPI? If there are any questions as to the validity or thoroughness of the CPI home study, or if we do not have that home study, then the case manager must complete a new home study immediately.
 - b. If the home study is believed to be complete and accurate, all areas of this guideline, starting with Section 2, should be covered with the caregivers, even if that information is part of the home study.
2. Budget
 - a. Is there enough money to support the family along with the additional child(ren)? This should not include subsidies such as relative caregiver funding.
 - b. If there is a shortfall, how will that difference be made up?
 - c. If the expectation is that we will subsidize the family, what would be the alternative plan in the event that the child remains there permanently?
3. Condition of the home
 - a. Is there adequate space for our child(ren)?
 - b. Is there an anticipated need for more space in the future – as in an infant who will need his/her own room at one year of age?
 - c. What is the impact to children already in the home? Example – a child already there who had his/her own room/space and will now have to share that to accommodate a sheltered child.
 - d. Is any child in the home going to be expected to be in a space not previously intended as a bedroom area? For example, a section of a living room is now set up as a sleeping area.
 - e. Is the home safe and free of hazards?
 - f. Is the furniture in good repair and safe? Is there adequate furniture for all of the occupants or will we be asked to buy furniture and/or appliances for the home?
 - g. What is the neighborhood like? Is it safe for children of the age we are placing? How many callouts have there been to this home within the past year? How many callouts have been to the immediate neighborhood (6 square blocks surrounding the home) in the past year?
4. Who lives here and/or comes and goes frequently? Is anyone showing resistance to providing necessary information for background screening?



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5. Caregivers' health

- a. Does anyone in the home have a chronic health condition that requires regular medical intervention?
- b. Are there any health/age conditions that might interfere with the caregivers' ability to interact in a nurturing and healthy way with the child?

6. Caregiver's position in the case and personal history

- a. What is the history with this caregiver's relationships with the birth parents?
- b. Under what circumstances did this caregiver agree to take custody of this child or children? Describe the caregiver's account of first contact and drop off.
- c. Were any promises of adoption or assistance of any kind made to this caregiver upon placement? These may be either from the CPI or the Case Manager.
- d. What is this caregiver's position on the child's potential for future interaction with the birth parents?
- e. Does the caregiver acknowledge any issues or problems that might not appear as part of the researchable public record? For example, a prior substance abuse history which is not documented in the case record.
- f. What is the marital status of this caregiver?
- g. If the caregiver is married, what are the acknowledged relationship issues that exist today or have existed in the past?
- h. What have we observed, if anything, that might give us concern about the current stability of the marriage?
- i. Has the caregiver had other marriages? How many? If so, do we know why those marriages dissolved?
- j. What is the caregiver's current view toward parental reunification?
 - i. If they do not expect reunification, what points do they make to support that view?
- k. What is the caregiver's view toward providing a permanent home for the child(ren) if that is required.
 - i. Do they see themselves as an Adoptions placement?
 - ii. Permanent Guardianship?
 - iii. What do they say to explain their position regarding permanency?
- l. Visitation
 - i. Will the caregiver help to facilitate or supervise visitation? If not, why not?
 - ii. Will they transport the child to visitation? If not, why not?
 - iii. Will they allow the birth parent to visit the child in their home? If not, why not?
- m. Transportation



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- i. Does this caregiver have reliable transportation?
 - ii. Do they have the financial ability to repair or replace their vehicle if need be?
 - iii. Are they willing to transport the child to appointments? If not, why not?
 - iv. Are they willing to transport the child to allow him/her to participate in extracurricular activities? If not, why not?
 - v. Are they willing to transport either or both birth parents to assist with care plan completion? If not, why not?
- n. Normalcy
- i. Do they understand normalcy? If not, the case manager must be able to explain it to them during this conversation.
 - ii. Are they willing to support normalcy? If not, why not?
 - iii. What sort of normalcy activities is the child already involved in?
- o. Medical/Dental
- i. Do they understand the child's need for regular medical and dental care?
 - ii. What behavior by the caregiver demonstrates their willingness and ability to ensure regular medical and/or dental care for the child?
- p. Education
- i. Does the caregiver appear to understand the importance of education in the child's life (if age appropriate)?
 - ii. What behavior by the caregiver demonstrates their willingness to support the child educationally?
 - iii. Is the child lagging behind peers educationally?
 1. If so, what has the caregiver done to assist the child? Tutoring? Seeking assistance from school personnel? Etc.
- q. Special Needs
- i. Does this child have any educational, medical, behavioral or developmental special needs?
 - ii. Is the caregiver fully aware of those needs?
 - iii. Does the caregiver have an understanding of the special services that will be required for the child?
 - iv. What behaviors by the caregiver demonstrate their efforts to address the child's special needs?



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This tool is designed to give the user essential insight into the dynamics of the placement, its viability, and potential issues that may need to be addressed before they become more difficult to manage. It should not be viewed as all inclusive or as needing to be used in its entirety.

Once you have completed the tool, it is recommended that you complete a written evaluation of the information that you collect and staff the case with your immediate supervisor for further decision making.