



Tennessee Department of Children's Services

Protocol for Drug and Medication Expectations for Approved Foster Homes

Supplemental to DCS Policy: 16.4, 16.8, 16.20

The Department of Children's Services is committed to promoting the safety and well-being of all children. As part of this commitment, the Department is taking measures to ensure each placement is a substance abuse-free environment and be proactive in reducing maltreatment referrals as they relate to this topic. This protocol applies to DCS and Contract Agency foster homes. Contract Agencies that have a policy or protocol that addresses this topic must at a minimum meet the expectations of this protocol.

Foster Home Maintenance

Information regarding the health and well-being of the foster parents is considered during the home study approval process and upon reconsideration during the foster home's biennial reassessment. As a condition of foster home approval and continued approval, a foster parent or any household member will not:

- a) Use, possess, sell, trade, offer for sale, or offer to buy illegal drugs or otherwise engage in the illegal use of drugs;
- b) Be visibly impaired or possessing in his or her body, blood or urine, illegal drugs in any detectable amount while caring for foster children;
- c) Be impaired by alcohol while caring for foster children;
- d) Sell, trade or offer for sale prescription drugs or use prescription drugs illegally, including using prescription drugs that have not been legally obtained or using prescription drugs in a manner or for a purpose other than as prescribed; or
- e) Tamper with a drug test being administered pursuant to this protocol.

Foster parents should report any significant changes to the home's status to their Foster Parent Support worker, including changes to the health or well-being of any household member, within one (1) business day, including but not limited to: physical injuries suffered at home, car accidents or work-related accidents. Changes to household member medication involving prescribed, controlled substances or psychotropic medications should also be reported as well as discussed during monthly or quarterly home visits with the Foster Parent Support/Contract Agency worker. Refer to the [**Controlled Substance and Medication Work Aid**](#).

Foster parent applicants or approved foster parents who provide false information when completing paperwork or responding to questions related to medication usage will be denied approval or subject to closure of the their home. Other adults or caretakers residing in the home who provide false information related to medication usage will cause the foster parent applicant to be denied approval or result in an approved foster home being placed on suspended admission or closed.

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Supersedes: None

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Guidelines for Foster Parent Support/Contract Agency Staff

1. Upon notification by a foster parent that medication has been prescribed or a change in medication has occurred, Foster Parent Support/Contract Agency staff:
 - a) Document changes in an individual's health status on form [CS-0707, Medical Self-Report](#);
 - b) Discuss current medical situation to assess if temporary or long-term, possible side-effects of new medication and if any temporary changes of care of children placed in the home need to occur.

NOTE: This excludes temporary non-controlled substance prescriptions and over the counter medications such as for colds, allergies and normal aches and pains.
 - c) Document changes to an individual's medication usage in a case recording. If the medication change is long term, the completion of form **CS-0773, Foster Home Addendum** will be uploaded to the electronic record.

NOTE: Foster Parent Support/Contract Agency staff can collaborate with the Nursing Director to ensure that foster parent medications do not pose any risk to the foster parent's ability to care for children under their care.
2. If during the course of a home visit or other interaction with the foster parent, the Foster Parent Support/Family Service Worker/Contract Agency staff observes behavior that poses a risk to the safety of the child by the foster parent or others residing in the home, staff must take reasonable steps to address the concern. Possible measures to be taken include, but are not limited to the following:
 - a) Establish a Safety Plan in collaboration with Family Service Worker and other applicable DCS staff;
 - b) Provide Respite until it is determined how the new medication may affect the foster parent's ability to care for the child;
 - c) Convene a CFTM to determine viability of continued placement with the family.
3. If the worker has a suspicion that the child's safety is at risk, then the worker must make a referral to the DCS Hotline.

Reasonable Suspicion Drug Testing

1. Due to the growing opioid epidemic and increasing usage of illegal street drugs, the Department has implemented an employee reasonable suspicion drug testing program. DCS/Contract Agency employees may request a drug screen from a foster parent when reasonable suspicion of alcohol abuse, illegal drug use, or abuse of legal drugs exists. Refer to Policy [4.7, Reasonable Suspicion-Drug Testing](#) for further details regarding testing and outcomes. Examples of behaviors giving rise to reasonable suspicion include, but are not limited to:
 - a) A DCS/Contract Agency employee witnesses observable behavior, such as direct observation of drug use or alcohol abuse, possession of a drug or underage possession of alcohol, or the physical symptoms of being under the influence of a drug or alcohol;

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- b) The individual exhibits a pattern of abnormal conduct or erratic behavior;
- c) The individual is a suspect or has been convicted in a criminal investigation involving drug possession, drug use, drug distribution/trafficking, or alcohol abuse or has been recently arrested for a drug-related charge or charge involving the abuse of alcohol;
- d) A DCS/Contract Agency employee learns that the individual may have tampered with a drug or alcohol screen in an open or recent case;
- e) DCS has received a recent allegation or has a current allegation of drug-exposed child;
- f) The individual has drug paraphernalia in his or her possession or in the home;
- g) A DCS/Contract Agency employee has reason to believe that the individual is enabling drug use or alcohol abuse;
- h) The individual's social media contains evidence suggestive of alcohol abuse or drug use (e.g., pictures of individuals appearing intoxicated); or
- i) A DCS/Contract Agency employee receives information, from a reliable and credible source or one that is independently corroborated, that the individual is using drugs or abusing alcohol or that any of the above-listed factors (a-h) exist.

Note: DCS/Contract Agency employees may request a drug screen from a household member residing in an approved foster home when reasonable suspicion exists, and the household member is known or suspected to be a caregiver or has supervised/unsupervised access to the child.

2. Positive illegal drug test results based on cause or reasonable suspicion of drug usage or demonstrated abusive behavior of alcohol or other drugs by a foster parent will result in the closure of the foster home in bad standing. If an "other adult" caregiver or household member is deemed to fail a drug screen the foster home will immediately be placed on "suspended admissions" and remain until the staff engages in safety planning or otherwise it is determined the foster home is no longer a viable placement option.