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Licensing Forms 622-05-03

(New - 4/1/2024)

[View Archives](#)

Foster care licensing forms can be found at <http://www.nd.eformsgov/eforms>. The forms are fillable and savable. A description of each form and when it should be used is detailed below.

1. [SFN 327](#) "Family Foster Care Claim of Property Damage" is to be completed by the care provider and submitted by the child's custodial case manager within 90 days of the discovery of the property damage. If approved, payment will be made to the party experiencing the damage.
2. [SFN 433](#) "Child Abuse and Neglect Background Inquiry" this form shall be completed by care provider(s) and other adult household members, each year granting the CFS Licensing Unit permission to check the index.
3. [SFN 844](#) "Identified Relative License - Family Foster Homes" is to be completed and signed by prospective foster care provider(s) and reviewed by the Licensing Specialist if the family requires a relative waiver or requests a relative license to provide foster care.
4. [SFN 850](#) "Initial Licensing Specialist Checklist" is to be completed and signed by the licensing specialist completing the home study and working with the prospective care provider.
5. [SFN 851](#) "Annual Licensing Specialist Checklist" is to be completed and signed by the licensing specialist completing the home study and working with the care provider during the annual onsite visit or renewal licensing period.
6. [SFN 863](#) "Licensing Change Checklist" is to be completed when a licensing change occurs in a foster home, this checklist must be

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completed and signed by the licensing specialist and submitted to the CFS Licensing Unit.

7. [SFN 889](#) "Initial Home Study Foster Care For Children" is completed by the licensing specialist thoroughly detailing all information collected while assessing the applicants and household members.
8. [SFN 890](#) "Affidavit of Compliance in lieu of License for Foster Care For Children" must be signed each year by the Tribal Nation licensing the foster care provider on or near the Indian reservation. This is a statement in writing by a representative of the Tribal Nation stating that a specific home does meet federal and state requirements to provide foster care to children.
9. [SFN 893](#) "Application to Provide Family Foster Care For Children" is completed by prospective foster care provider(s). The initial application must be received by the CFS Licensing Unit or an authorized licensing agent in order for the licensing process to begin.
10. [SFN 902](#) "Foster Care Licensing Reference Check" the prospective foster care providers may be asked to provide three names of reference for the authorized licensing agent to discuss the applicant's interest, willingness, and abilities to provide foster care to children in their home.
11. [SFN 974](#) "Physical Exam Verification" the prospective licensed foster care provider(s) shall submit the results of an initial physical examination dated within 12 months of the date of initial application. All foster care providers licensed prior to October 1, 2019, are grandfathered in.
12. [SFN 1017](#) "Foster Care Licensing Amendment Request" is required to be submitted to the CFS Licensing Unit (cfslicensing@nd.gov) by external partners such as a custodial case manager or an authorized licensing agency representative in order for a family foster care provider to receive an amendment to the license.

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13. [SFN 1037](#) "Licensing Packet" is to be completed by the foster care provider inclusive of a checklist of items to be gathered (drivers licenses, fire extinguisher receipts, etc.) each renewal period to ensure initial notice and renewal updates to the family evacuation plan, emergency contacts, fire safety checklist, acknowledgement of placement preferences, and a financial assessment.
14. [SFN 1038](#) "Foster Care Provider Policy and Standards Review" is to be reviewed by the Licensing Specialists with the foster care providers initially and during each renewal period in efforts to ensure understanding of high-level topics that impact licensing of foster care provider educate and clarify any law, rule or policy topics.
15. [SFN 1059](#) "Authorization to Disclose Information" is to be used when a Licensing Specialist is requesting information from any household member and the authorization, in written form for selected information to be disclosed under this authorization in any form.
16. [SFN 1941](#) "Licensing On-Site Visit Report" is completed by the Licensing Specialist. The form will detail relevant information since the date of the last study.
17. [SFN 1974](#) "Request for Electronic Communication of Non-Protected Health Information (non-PHI) by Unencrypted (Unsecure) Means" is required for CFS Licensing Unit Licensing Specialists requesting permission from an applicant/ foster care provider to communicate with alternative means of communication (texting, emails). The form remains valid for the duration of licensing; expiration will occur when/if the license were to close or be requested to discontinue.

Definitions 622-05-05

(Revised 4/1/2024 ML #3803)

[View Archives](#)

1. Affidavit of Compliance with Licensing Requirements: A statement in writing by a representative of a recognized Indian Tribe stating that a specific home on or near an Indian reservation meets federal and state requirements to provide foster care in their home. The statement must be subscribed and sworn before the Tribal chairperson or other authorized person from the Tribal Nation with a State-Tribal Title IV-E agreement.
2. Applicant: Individuals who have completed, signed, dated, and submitted an application to provide foster care for children.
3. Approval: The approval by the Department means, upon submission of tribal licensing standards or in the absence of tribal licensing standards compliance with state standards, of a family located on or near, as identified by the tribe, a recognized Indian reservation in North Dakota, not subject to the jurisdiction of the state of North Dakota for licensing purposes. (NDCC-50-11-00.1)
4. Authorized Licensing agent: Authorized licensing agent means the department or entity identified or licensed by the department to complete the foster care for children, certification or approval home study assessment.
5. Background Check: A background check means a fingerprint-based criminal history record investigation inclusive of child abuse and neglect index check in each state or tribal jurisdiction that the individual has resided in the previous five years.
6. Certified Foster Care Provider: An individual residing in a private residence providing temporary care and safety services to no more than three children placed out of the home, unless otherwise approved by the department.
7. Child and Family Team: Every child in foster care shall have a permanency plan reviewed by a Child and Family Team that meets at least once each quarter in which the human service zone, division of juvenile services, or Tribal Nation acts as the custodial agency supervising the child in foster care.
8. Custodial Agency: Public agency granted custody of a child in foster care; human service zone, division of juvenile services or a Tribal Nation. Also known as the "supervising agency".

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9. Department: Department means North Dakota Department of Health and Human Services including the Children and Family Services (CFS) Licensing Unit.
10. Dwelling: Is a home, townhouse, apartment, condo or manufactured home where an applicant resides and is approved by the Department.
11. Foster Care for Children: Foster care for children means the provision of substitute parental child care for those children who are in need of care for which the child's parent, guardian, or custodian is unable, neglects, or refuses to provide, and includes the provision of food, shelter, security and safety, guidance, and comfort on a twenty-four-hour basis, to one or more children under twenty-one years of age to safeguard the child's growth and development and to minimize and counteract hazards to the child's emotional health inherent in the separation from the child's family. Foster care may be provided in a licensed, certified, identified relative or approved family foster home for children, supervised independent living program, or qualified residential treatment.
12. Family First Prevention Services Act of 2018 (PL 115-123): Implemented October 1, 2019, this law allows North Dakota and Tribal Nations with an approved IV-E agreement, to use federal funds to provide enhanced support to children and families and prevent foster care placement through the provision of mental health and substance abuse prevention and treatment programs, in-home parent skill-based programs and kinship navigator services. This act also seeks to reduce residential placements for children and instead emphasize placements into family foster homes.
13. Foster Care Provider: Foster care provider means an individual residing in a private home who maintains a license, certification, or approval from the department to provide family foster care to children in need of temporary safety services when placed out of the home.
14. Foster Home License: The document issued by the CFS Licensing Unit which authorizes the applicant to provide foster care subject to the limitations as specified on the license, certification or Tribal Affidavit approval. Ex: a license limited to a specific child(ren), age, gender of child(ren), for a two year period or less.
15. Foster Connections to Success and Increasing Adoptions Act of 2008 (Foster Connections): The Fostering Connections Act includes important improvements for children who enter foster care or are at risk of entering foster care. The act offers vulnerable children meaningful family connections and important protections and support, including

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- promoting permanent families for them through relative guardianship and adoption and improving education and healthcare.
16. Identified Relative: The child's grandparent, great-grandparent, sibling, half-sibling, step-parent, aunt, great-aunt, uncle, great-uncle, nephew, niece or first cousin. An individual with a relationship to the children, derived through a current or former spouse of the child's parent, similar to a relationship described in the first sentence. An individual recognized in the child's community as having a relationship with the child. (NDCC 50-11)
 17. Identified relative foster care provider: An individual residing in a private residence providing temporary care and safety services to no more than six relative children placed out of the home, unless otherwise approved by the department.
 18. Licensing Capacity: The maximum number of children in foster care who can live in a foster home at any given time.
 19. Licensed Family Foster Home: Family foster home means an occupied private residence in which foster care is regularly provided by the owner or lessee thereof to no more than six children, unless the CFS Licensing Unit approves otherwise. The CFS Licensing Unit will review requests to increase the bed capacity for a licensed foster home beyond the limitation of six if the home has the physical capacity to accept and care for additional placements and for any of the following reasons:
 - a. To allow a parenting youth in foster care to remain with their own child.
 - b. To allow siblings to remain together.
 - c. To allow a child with an established meaningful relationship with the family to remain with the family.
 - d. To allow a family with special training or skills to provide care to a child who has a severe disability.
 20. License Requirement: No person may furnish care to a child in foster care for more than 30 days during a calendar year without first procuring a license to do so from the Department. the mandatory provisions of this section requiring licensure do not apply when the care is provided in:
 - a. The home of an identified relative; or
 - b. A home or institution under the management and control of the state or a political subdivision
 21. Maintenance Payment: The reimbursement made to the foster care providers to meet the needs of the child(ren) in foster care placed in licensed, certified, identified relative foster care provider or approved (Tribal Affidavit) foster home.
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22. Permanency Planning: The process of assessing and engaging families to best meet the permanent plan of a child which may include returning to the parent(s), relative care, guardianship, adoption (if applicable) or another planned permanent living arrangement.
23. Preventing Sex Trafficking and Strengthening Families Act of 2014 (PL 113-182): This law advanced the protection and prevention of children and youth in foster care from exploitation, from becoming victims of sex trafficking and made improvements to the child welfare system to help advance long term permanency outcomes for children and youth in foster care.
24. Provisional Status: A provisional status is a condition imposed when a foster care provider does not meet compliance with licensing standards. A provisional license is not eligible to receive foster care maintenance payments. Reimbursement can occur again, when the license becomes fully compliant with the State's licensing standards.
25. Reasonable and prudent parent standard: The standard characterized by careful and sensible parental decisions that maintain the health, safety, and best interests of a child while at the same time encouraging the emotional and developmental growth of the child participating in extracurricular, enrichment, cultural, and social activities.
26. Specialized Reimbursement: An excess maintenance payment (EMP) made to eligible foster care providers to meet the needs of children with special needs, in accordance with North Dakota Department of Health and Human Services Manual Chapters 624-05 and 623-05.
27. Substitute Caregiver: A substitute caregiver is a responsible adult, age 21 or older, temporarily providing care for a child in foster care in the absence of the foster care providers. When a child in foster care is placed in substitute care during the absence of the foster care providers, prior approval of the substitute care; must be given by the child's custodial case manager, not to exceed fourteen calendar days. Prior approval is not required for short periods of substitute care such as a portion of one day. A child in foster care may not be removed from this state without the prior approval of the child's custodial case manager.
28. Supervising Agency: Supervising agency means the human service zone, division of juvenile services, or Tribal Nation having care, custody, and control of the child in foster care as ordered by a court of competent jurisdiction or the designee of that agency or person. Also, known as the "custodial agency".
29. The Adoption and Safe Families Act of 1997 (ASFA): The Adoption and Safe Families Act of 1997 (ASFA) seeks to ensure safety, permanency,

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and well-being for children. Foster care provides a temporary safe, alternate setting for a child when the child's family cannot provide care. ASFA emphasizes the need for the foster care experience to be brief, but more intense in terms of planning with the family and others to achieve permanency for the child. ASFA imposed strict timelines on states for meeting certain milestones in foster care case activity. It discourages long-term foster care and eliminates that as one of the permanency options for children. Encouraged are reunification, relative care, guardianship, and adoption. Other options are considered before termination of parental rights and adoption. Concurrent planning is used when appropriate: the agency works on two goals for the child simultaneously; for example, reunification and relative care. Services are provided to the family to ready them for reunification. If that doesn't happen, the relative care option is ready, and the child's permanency is achieved in a more timely manner.

CFS Licensing Unit 622-05-06

(Revised 4/1/24 ML #3803)

[View Archives](#)

ND Department of Health and Human Services, Children and Family Services (CFS) created the CFS Licensing Unit based on legislative intent to redesign service delivery. April 1, 2022, the CFS Licensing Unit was implemented with an overall goal to standardize procedures, offer consistency and efficiencies for providers, case managers and Licensing Specialists. The unit provides training and technical assistance, as well as collaboration with other department sections to best meet the needs of licensed or certified foster care providers, authorized agents and children in foster care.

CFS Licensing Unit tasks include, but are not limited to:

1. Licensing or certification decision for applicants seeking to provide foster care for children across the state.
2. Review of and licensing or certification decision for applicants presented by an authorized agent (Tribal Nation, Nexus PATH, etc.).
3. Level of Care assessment determinations specific to children in foster care.
4. Licensing of Qualified Residential Treatment Programs (QRTP), Licensed Child Placing Agencies (LCPA), Supervised Independent Living Programs, and certified shelter care programs.
5. Oversight of the ND Recruitment and Retention State Plan.

Contact Information

Children and Family Services

CFS Licensing Unit

600 E. Boulevard Ave #325

Bismarck ND 58503

Email: cfslicensing@nd.gov

Phone: 701-328-2322 or 1-888-334-1330

Unit Roles and Responsibilities

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The CFS Licensing Unit requires planned and coordinated activities between the unit employees and foster care case managers, both engaging daily with foster care providers. Despite their interrelatedness with foster care cases, there are clearly defined distinction in roles, activities, and responsibilities. The roles and responsibilities for foster care case managers can be located in policy chapter 624-05-15-30-20.

CFS Licensing Unit Coordinator:

This position is responsible to determine licensing for authorized licensing agents (Tribal Nation, Nexus PATH, etc.), provide direct technical assistance, resource and referral to current and prospective foster care providers. This position will offer coordination of licensing referrals, respond to inquiries, complete prospective foster care provider reference checks, assist with data entry for direct deposits, manage the email inbox and unit call center for immediate communication with constituents. The coordinators will maintain the ND Provider List of current homes licensed by the CFS Licensing Unit, engage in local recruitment and retention coalitions, training of providers and statewide partners, while reviewing compliance of licensing files and providing general technical assistance and quality assurance on behalf of the CFS Licensing Unit.

CFS Licensing Specialist:

This position is responsible to facilitate initial and ongoing face-to-face onsite home study assessments in efforts to license or certify a prospective foster care provider. Assessments include traveling to meet face-to-face with families for interviewing, visual inspection of the home/dwelling and property, review of policy, offering of training, coordination of licensing files and ability to maintain accurate details required of the ND Provider list of providers licensed or certified by the CFS Licensing Unit. This position will provide pre-service training to prospective foster care providers, maintain ongoing relationships, engage in local recruitment and retention coalitions, identify ongoing supports to retain families, while engaging in general quality assurance for the CFS Licensing Unit.

CFS Licensing and Level of Care Specialist:

This position is responsible to facilitate initial and ongoing face-to-face onsite assessments for Qualified Residential Treatment Program (QRTP), Licensed child Placing Agency (LCPA), Supervised Independent Living

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Programs as well as certification of shelter programs. This position is responsible to assist the Licensing and Level of Care Administrator in creating level of care standards to support child welfare case managers in making placement decisions, level of care determinations when children are placed in a licensed child placing agency program or facility treatment setting. This position will manage the statewide shelter and respite program including claim and reimbursement to providers, while offering support and coverage for the CFS Licensing Unit in completing home study assessments for family foster care providers and engaging in general quality assurance for the Licensing Unit.

Recruitment and Retention 622-05-07

(Revised 4/1/24 ML #3803)

[View Archives](#)

ND Recruitment and Retention State Plan highlights coalitions work diligently to create opportunities for prospective applicants to learn more about being a licensed foster care provider. Recruitment and Retention efforts are required of all parties; from licensed foster care providers, to custodial case managers, licensing specialists, licensing coordinators, agency leaders, community members, etc.

Statewide Work Group:

The ND Statewide Foster and Adopt Recruitment and Retention Work Group was created in April 2020. This format offered a more consistent statewide representation of agency staff and partners. The goal of the work group is to review the Recruitment and Retention State Plan, analyze data, address systemic issues, while meeting additional requests of the Department. The work group meets quarterly and is facilitated by the CFS Licensing Unit.

Foster Care Provider Task Force:

The ND Foster Care Provider Task Force was created in February 2022. This format offered a platform for Children and Family Services to solicit feedback, gain perspective, request assistance on small projects, while engaging subject-matter experts in system change and growth opportunities. The Task Force meets at least quarterly and is facilitated by the CFS Licensing Unit.

Coalitions:

The purpose of local coalitions is to gather partners to engage in conversation and support for the recruitment and retention of foster care providers as well as adoptive families. The statewide goal is to continue to offer education and awareness surrounding the need for families to open their hearts and homes to children in need of safe placement. Each coalition is inclusive of various agencies including the CFS Licensing Unit,

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CFS Training Center (UND), Human Service Zones, Tribal Nations, Licensed Child Placing Agencies (LCPA), Division of Juvenile Services (DJS) and others. These agencies should have active participants at each meeting. Coalitions are encouraged to secure:

1. Local business leaders with an interest in advertising,
2. Faith-based and volunteer organizations (Churches, Lions Club, Kiwanis, etc.) driven to engage as supports, as well as
3. Foster care providers and adoptive families who have a solution-focused mindset, creativity and desire to assist in messaging, ongoing recognition and support to the child welfare system.

Inquiries:

Information related to foster care and adoption recruitment and retention can be found by accessing the Department of Human Services' website at: <https://www.hhs.nd.gov/cfs/fostercare> or by calling the North Dakota Toll Free Recruitment and Retention line at 1-833-FST-HOME (1-833-378-4663). The inquiry line is managed by the CFS Training Center (UND) contracted to support statewide recruitment and retention efforts. CFSTC manages the local coalitions, marketing, advertising, social media outreach, online support groups, foster care provider spotlight stories, informational panel discussions, booths, event organization, appreciation requests, and more.

Data Management 622-05-08

(NEW 1/1/2026 ML 3957)

[View Archives](#)

The licensing process requires data entry in the North Dakota payment system. The CFS Licensing Unit is responsible to enter pertinent information into the required data management system.

Pertinent Information Required Includes:

1. Provider search to see if the family is already known to the system.
2. Register new foster care provider's unknown to the system or when applicable per licensing standards.
3. Identifying Information of Applicant A and Applicant B needed includes:
 - a. Marital status
 - b. DOB, Race, Ethnic origin, religion
 - c. Gender
 - d. Tribal Affiliation
 - e. SSN is not required, however the system will require a Licensing Specialist to enter a number. Refer to internal procedures.
 - f. Physical Address
 - g. Mailing Address
 - h. Telephone Number/s
 - i. Correspondence Name
 - j. Designated Payee Name
 - k. County where the home resides
4. Home study assessment indicating ages, gender, and number of licensed beds for the home.
5. Documentation to approve or deny the license.

Authorized licensing agents (Nexus-PATH, Tribal Nation, etc.) do not have access to enter data in the data management system. The CFS Licensing Unit will enter the licensing information on their behalf.

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Licensing Application and Determination 622-05-10

**Application to Provide Family Foster Care 622-05-10-05
(Revised 7/1/2025 ML #3925)**

[View Archives](#)

An application([SFN 893](#)) must be completed by the applicant(s) interested in providing care to children in foster care. The application is not complete until the initial fingerprint-based criminal background check results are received.

Applicants can apply to become licensed or certified. Some applicants may also qualify for identified relative waiver. Family provider levels of licensure include:

1. Fully Licensed: Licensed foster care providers can care for no more than six children. Licensed providers are eligible to provide respite care (up to 4 days) and shelter (up to 14 days) or emergency on-call (up to 7 days). Licensed providers may offer regular, treatment or enhanced treatment to children in need of placement (varies by licensing agency).
2. Certified: Certified foster care providers can care for no more than three children, for a maximum of 30 consecutive days. Certified foster care providers are eligible to provide respite care (up to 4 days) and shelter (up to 14 days) or emergency on-call (up to 7 days). Certified providers cannot be utilized back-to-back for the same child. If selected as the primary placement, there must be a 30 day break from date of discharge from the home to placement back into the home. The one-month duration is intended to ensure compliance and fidelity of the certified providers commitment to short-term placements. A certified provider also has the opportunity to transfer their license to a full license in order to maintain placement of the children greater than 30 days.
3. Relative: Those eligible to receive an Identified Relative waiver can care for no more than 6 "related" or relative children. Identified Relative foster care providers are not eligible to provide respite care or shelter/emergency care to "unrelated" children, unless they obtain a full license.

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After receiving an initial foster care license, certification or Tribal Affidavit approval the foster care provider(s) must reapply ([SFN 893](#)) each licensing renewal period. Each renewal period may not exceed 2 years. If a foster care license expires or there is a lapse in licensure (even for one day), the foster care provider will be considered a “prospective foster family” and a new fingerprint-based criminal background check will be required in order to begin the process of licensing, certification or Tribal Affidavit approval again.

Initial Denial of License or Certification 622-05-10-06

(NEW January 1, 2026 ML 3957)

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An application for a foster care license, certification or tribal affidavit approval may be closed or denied at initial application. Once an application is discontinued, a new application and background check will be required to begin the licensing process again.

There are three processes to consider:

1. Personal Choice / Mutual Agreement to Close

Prior to a license or certification being granted, an applicant may choose to voluntarily discontinue an application for a license or certification at any time by submitting written notice to the CFS Licensing Unit or authorized licensing agent. The CFS Licensing Unit or authorized licensing agent must agree to the discontinuation of the application and determine the date of closure.

2. Agency Discontinuation of Application

Prior to a license or certification being granted, the CFS Licensing Unit or authorized licensing agent will provide written notice of deadlines to proceed with the licensing process. If the applicant is not responding to the request to complete the initial licensing process, the CFS Licensing Unit or authorized licensing agent may discontinue the application, if greater than 45 days has passed since receipt of the application.

3. Denial of Licensure

An applicant may be denied initial licensure if the applicant or home does not meet the minimum standards for licensing. Denial criteria is noted in 622-05-10-15.

License, Certification, and Tribal Affidavit Timelines 622-05-10-08

(NEW January 1, 2026 ML 3957)

[View Archives](#)

The CFS Licensing Unit will manage all licensing, certification, or Tribal Affidavit approval requests to provide care for children in foster care. Each request to license an applicant must be approved or denied by the HHS CFS Licensing Unit. NDCC 50-11 requires the Department to review and approve or deny a complete licensing packet within sixty (60) days of receipt. The department has an additional forty-five (45) days to grant or deny a license, certification, or approval if the department notifies the applicant that the additional time is necessary.

Initial Licensing:

1. CFS Licensing Unit: Licensing Specialists will staff the complete licensing packet with their supervisor. Once staffed, Licensing Specialist has seven (7) working days to make a final decision to license or certify an applicant.
2. Authorized Agents: Must submit a complete licensing packet to the CFS Licensing Unit. Once received, the CFS Licensing Unit has seven (7) working days to make a final decision to license, certify or approve an applicant.

Renewal Period:

1. CFS Licensing Unit: Licensing Specialists will initiate renewal paperwork 90 days prior to expiration and must determine continued licensure or certification no less than seven (7) working days prior to expiration.
2. Authorized Agents: Shall initiate renewal paperwork 90 days prior to expiration and must submit a complete licensing renewal packet to the CFS Licensing Unit, no less than fifteen (15) working days prior to expiration. This will allow the CFS Licensing Unit time to make a final decision prior to expiration.

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The CFS Licensing Unit, upon approval of the applicant, will issue a license, certification or Tribal Affidavit approval indicating the foster care provider(s) name, provider number, bed capacity, gender and ages 0 through 20 of children served. Child age preferences can be listed, if applicable. The effective dates of the license, certificate or Tribal Affidavit approval must be present. In addition, the ND seal and signature of a CFS Licensing Unit representative and HHS Commissioner must be present.

Memorandum of Understanding (MOU) of Correction 622-05-10-09

(NEW January 1, 2026 ML 3957)

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A memorandum of understanding (MOU) is an agreement between the foster care provider, authorized licensing agent (if applicable) and the CFS Licensing Unit. MOUs are created to enter into an agreement on a method of correction or licensing violation. A MOU of correction can be issued whenever the CFS Licensing Unit determines that the foster care provider is not in full compliance with NDCC 50-11, NDAC 75-03-14 or 622-05 policy. A foster care licensing MOU of correction is not required for internal agency protocols required by authorized licensing agent. MOUs of correction must be approved by the CFS Licensing Unit prior to issuance.

Foster Care Licensing MOU's of Correction must:

1. Be drafted by the Licensing Specialist and must contain details surrounding what occurred, which law, rule or policy was non-compliant, what is expected of the foster care provider and what timelines are required. It is important to note in the MOU the ramifications of what may occur if there is continued non-compliance.
2. Be reviewed in consultation with a CFS licensing supervisor before a MOU is officially issued to a foster care provider.
3. A MOU of correction must be signed and dated by; the foster care provider, assigned Licensing Specialist, and the Department if submitted by an authorized Licensing Specialist outside of the CFS Licensing Unit. A MOU of correction may require the submission of a corrective action plan by the foster care provider. If a corrective action plan is required, the MOU must also specify a date by which the corrective action plan must be submitted by the foster care provider.
4. Ensure when an MOU is issued for reasons on a method of correction of violation/s or for other assurances, the foster care provider must receive additional monitoring visit(s) to ensure the foster care provider is following the MOU. This visit(s) may be completed by the licensing specialist or the child's custodial agency during the monthly face-to-face visitation.

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A copy of the signed MOU of correction must be given to the foster care provider, maintained in the foster care provider's licensing file.

Applicant Qualifications 622-05-10-10

(Revised 4/1/2024 ML #3803)

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Qualification of an individual applying to be a foster care provider, the applicant must:

1. Be age 21 or greater;
2. Complete a fingerprint based criminal background check and child abuse and neglect index check search;
3. Be financially stable with reasonable income or resources available to meet the needs of the household members and to properly care for a child in foster care; and
4. Have functional literacy, demonstrating their ability to read and engage in all forms of communication delivered by the authorized licensing agent or custodial agency at a level necessary to participate effectively in the provision of service. This includes having phone calls, reading and sending emails, reading and comprehending state policy, trainings, care plans, medication labels, etc. A foster care provider must also be able to engage in common daily communication with children in need of placement.

Prospective foster care providers must:

1. Engage in the licensing home study process and complete all relevant forms.
2. Upon request, provide information of at least three personal references with at least two individuals not related. References may be requested at the discretion of the authorized licensing agent. [SFN 902](#) is to be utilized
3. Complete and track required training hours for initial and ongoing licensure, certification or Tribal Affidavit approval. All required training

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must be documented in the foster care provider licensing file. Access to trainings will be offered by the authorized licensing agent, the licensing agency, Native American Training Institute (NATI) or the University of North Dakota Children and Family Services Training Center (UND-CFSTC).

4. A foster care provider shall comply with the Department's reasonable and prudent parenting standard by allowing children in foster care the opportunity to participate in developmentally and age-appropriate activities.

Provisional Status 622-05-10-12

(NEW January 1, 2026 ML 3957)

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A North Dakota foster care provider's license, certification, or Tribal Affidavit approval may be placed on provisional status due to noncompliance with applicable standards. A provisional license, certification, or Tribal Affidavit approval is temporary and restricted, allowing more time for a licensed family foster care provider to meet full compliance.

A provisional status is:

- Prohibited for initial licensure, certified or Tribal Affidavit approval requests.
- Permitted for currently licensed, certified or Tribal Affidavit approval homes to remedy any circumstance delaying full compliance.

During provisional status, children placed with the foster care provider are not eligible for foster care reimbursement. Examples of circumstances that may prompt the issuance of a provisional license or the placement of a licensing hold include situations where a provider or an adult household member has been charged with a criminal offense and the case is still pending resolution. This precautionary measure allows licensing to assess potential risks, ensure the safety and well-being of children are monitored, while awaiting the outcome of legal proceedings and avoiding potential overpayments.

Termination of License or Certification 622-05-10-15

(NEW January 1, 2026 ML 3957)

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A North Dakota foster care provider's license, certification or tribal affidavit approval may be terminated at any time. Once an ND foster care license, certification or tribal affidavit approval is terminated or closed, a new application and background check will be required to begin the licensing process again.

There are four processes to consider:

1. **Personal Choice / Mutual Agreement to Terminate**

A foster care provider may choose to voluntarily terminate a license or certification. A foster care provider and the licensing agency may come to a mutual agreement to close a license or certification based on extenuating family circumstances. This may include family stability, medical concerns, relationship status, mental health or other. Upon reaching consensus to terminate, the foster care provider must submit written notice to the CFS Licensing Unit or authorized licensing agent. The CFS Licensing Unit or authorized licensing agent must agree to the termination and determine the date of closure.

2. **Expiration**

A foster care provider may choose to allow their license or certification to expire.

3. **Denial of Continued Licensure**

A foster care provider who submits a new application for continued licensure and no longer meets the minimum standards for licensing or certification may be denied at time of re-application.

4. **Revocation of License**

A foster care provider who no longer meets the minimum standards for licensing or certification may be revoked at any time throughout the licensing period.

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Denial / Revocation Process

A foster care provider shall not be denied or revoked, unless the CFS Licensing Unit or authorized licensing agency has provided written notice detailing the reasons for denial or revocation. An authorized licensing agent with a foster care provider facing noncompliance issues is required to provide the details and documentation of noncompliance to the CFS Licensing Unit. The CFS Licensing Unit will collaborate with the authorized licensing agent to finalize the next steps of the process. A denial or revocation of a license or certification can only be made when an applicant or foster care provider has:

1. Not met a condition set forth in section 50-11-02 as prerequisites for the issuance of the license.
2. Submitted an application containing false or misleading information.
3. Submitted an application and intentionally withheld information.
4. Themselves or a household member, not including a child in foster care, violated a provision of NDCC 50-11, NDAC 75-03-14, or 622-05 policy set forth as minimum standards of the Department to obtain or maintain a license or certification to provide foster care to children.
5. Themselves or a household member, not including a child in foster care, been convicted of an offense determined to have a direct bearing upon the person's ability to serve the public or children placed in foster care, or the Department determines, following conviction of any other offense, the person is not sufficiently rehabilitated under section 12.1-33-02.1.
6. Failed to meet any of the five competency categories identified in the pre-service training (PRIDE and/or UNITY).
7. Themselves or a household member has been identified as a confirmed subject in a child protection services assessment.
8. Themselves or a household member has been identified as a subject in a child protection services assessment where present or impending danger is confirmed without a confirmed finding within the home.
9. A child of their own household removed from the home and/or placed under the custody of a public agency. The CFS Licensing Unit must consider if the applicant has been involved in court action in which a child in their household is currently or within the last five years has been removed from the home due to contrary to the welfare judicial findings. Applicants and currently licensed providers are prohibited from

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providing foster care to children if their own children are placed in foster care. N.D.C.C. 50-11-07

10. Has or has had in the last 5 years, their own parental rights terminated for a child.

CFS Licensing Unit Requirements:

1. CFS Licensing Specialist or Coordinator will write the notice, including:
 - a. Specific reasons for denial or revocation (cited law, rule and policy),
 - b. Notice of the right to a hearing before the Department. If the hearing is requested within twenty days after service of the written notice, the Department shall hold the hearing within sixty days after the request, unless the applicant or foster care provider agrees to a later date.
 - c. Notice of their right to be represented by counsel, to examine all files and documents in the custody of the Department regarding the applicant or foster care provider, to present witnesses at the hearing on behalf of the applicant or foster care provider and to present documentary evidence, to present testimony and cross-examine adverse witnesses, and the right to an impartial hearing officer.
 - d. Notice of their right to appeal under the provisions of chapter 28-32 any final decision of the Department regarding the application for or issuance of a license required by this chapter. A foster care provider must complete the SFN 465 requesting an appeal hearing.
2. Licensing Supervisors will provide direct support and supervision to the Licensing Specialist or Coordinator when drafting and finalizing any denial or revocation;
3. Licensing Unit Administrator will offer technical assistance and approval before the denial or revocation notice goes to Legal Advisory for review and finalization; and
4. Upon finalization, the denial or revocation letter must be sent registered mail containing the notification of rights as outlined in NDCC 50-11-08.

Appeal

When a denial or revocation is issued to an applicant or licensed, certified or approved foster care provider, the applicant or foster care provider has

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the right to appeal if requested within twenty days after receipt of the written notice. (NDCC §50-11-08)

Ability to Reapply

If an applicant or foster care provider is denied, the individual may not reapply for a ND foster care for children license or certification for a period of two years from the denial date, unless waived by the CFS Licensing Unit after considering the health and safety of children and the licensing history of the applicant.

If a foster care provider is revoked, the individual may not reapply for a ND foster care for children license or certification for a period of five years from revocation date, unless waived by the CFS Licensing Unit after considering the health and safety of children and the licensing history of the applicant.

Tribal Nations

A tribal affidavit home is licensed by the Tribal Nation and approved by the CFS Licensing Unit based on the recommendation of the Tribal Nation. The Department of Health and Human Services does not have jurisdiction to license the home, only to grant approval of the Tribal license. This means the HHS denial and revocation process would not apply. If a Tribal Nation proceeds with a closure, denial or revocation, the CFS Licensing Unit must rescind the HHS approval acknowledging the home does not meet the requirements in the Intergovernmental Tribal State Title IV-E Agreement.

Licensing Requirements 622-05-15

Applicant Qualifications 622-05-15-02

(NEW January 1, 2026 ML 3957)

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Qualification of an individual applying to be a foster care provider, the applicant must:

1. Be age 21 or greater;
2. Complete a fingerprint based criminal background check and child abuse and neglect index check search;
3. Be financially stable with reasonable income or resources available to meet the needs of the household members and to properly care for a child in foster care; and
4. Have functional literacy, demonstrating their ability to read and engage in all forms of communication delivered by the authorized licensing agent or custodial agency at a level necessary to participate effectively in the provision of service. This includes having phone calls, reading and sending emails, reading and comprehending state policy, trainings, care plans, medication labels, etc. A foster care provider must also be able to engage in common daily communication with children in need of placement.

Prospective foster care providers must:

1. Engage in the licensing home study process and complete all relevant forms.
2. Upon request, provide information of at least three personal references with at least two individuals not related. References may be requested at the discretion of the authorized licensing agent. SFN 902 is to be utilized
3. Complete and track required training hours for initial and ongoing licensure, certification or Tribal Affidavit approval. All required training must be documented in the foster care provider licensing file. Access to trainings will be offered by the authorized licensing agent, the licensing agency, Native American Training Institute

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(NATI) or the University of North Dakota Children and Family Services Training Center (UND-CFSTC).

4. A foster care provider shall comply with the Department's reasonable and prudent parenting standard by allowing children in foster care the opportunity to participate in developmentally and age-appropriate activities.

Training Requirements 622-05-15-05

(Revised 4/1/2024 ML #3803)

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Foster care providers must be willing to participate in training sessions made available to enhance their ability to manage child behaviors, engage and enhance relationships, and increase skills and knowledge to positively impact parenting.

Initial Training Requirements

Each licensed or Tribal Affidavit foster care provider must complete

1. The ND assigned pre-service training; either UNITY or PRIDE (27-30 hours) prior to child placement unless approved by CFS Licensing Unit,
2. Fire Safety (2 hours); and
3. Orientation (90 min) training detailing the North Dakota child welfare system and licensing process. During the home study visits, the Licensing Specialist will discuss the orientation training and review the [SFN 1038](#), "Policy and Standard Review".

Pre-service training will be counted as ten hours of the required renewal period training hours.

Each certified or identified relative foster care provider must complete:

1. Abbreviated PRIDE or UNITY 101 (3 hours) prior to child placement;
2. Fire Safety (2 hours); and
3. Orientation (90 mins) training detailing the North Dakota child welfare system and the licensing process. During the home study visits, the Licensing Specialist will discuss the orientation training and review the SFN 1038, "Policy and Standard Review".

Pre-service training will be counted toward the required renewal period training hours.

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Foster care providers must be willing to participate in training sessions made available to enhance their ability to manage child behaviors, engage and enhance relationships, and increase skills and knowledge to positively impact parenting.

Renewal Training Requirements

Each applicant listed on the foster care license must complete at least 16 hours of training each licensing period, which includes one hour of fire safety.

Each applicant listed on the certification or identified relative license must complete at least 8 hours of training each licensing period, which includes one hour of fire safety.

Foster care providers may be exempt from completing mandatory training hours if they are active military and deployed or other circumstances approved by the CFS Licensing Unit. This exemption request from training must be made, in writing, and approved by the CFS Licensing Unit.

Training to support foster care providers is intended to consist of various topics that may include, but is not limited to:

- Adolescent Substance Use
- Behavioral and Mental Health Diagnosis
- Bias
- Child and Adolescent development
- Child Abuse and Neglect
- Complex Behavioral Health Needs
- Cultural Awareness/Humility
- Cultural Competency
- De-escalation Techniques
- Diversity and Inclusion
- Family Engagement Strategies
- Fetal Alcohol Spectrum Disorder (FASD)
- First Aid and CPR
- Grief and Loss
- Home Safety
- Human Sexuality

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- LGBTQIA2S+
- Roles and Responsibilities of Child Welfare Partners
- Self Care
- Sex Trafficking Awareness
- Sexualized Behaviors
- Trauma Informed Care

It is acceptable to consider select professional licensing or certification training hours as part of licensing training hours. Foster care providers must work with their assigned Licensing Specialist to identify the appropriate route to gain pre-approval of any non-approved training providers. Approved training providers include, but are not limited to:

- ND Department of Health and Human Services
- UND Child and Family Services Training Center (CFSTC)
<https://und.edu/cfstc/>
- Native American Training Institute(NATI) <https://nativeinstitute.org/>
- Nexus-PATH Family Healing
- Adults Adopting Special Kids (AASK)
- ND Post-Adopt Network
- NDSU Extension
- National Child Traumatic Stress Network (NCTSN) Learning Center
- Foster Parent College
- ND Children's Advocacy Centers
- Safe Kids

Each applicant on the foster care license must document on the training transcript ([SFN 1037](#)) which trainings have been completed. Each applicant must maintain the training brochure, certificate received or other identifying information as verification of training completion. The CFS Licensing Unit, authorized licensing agents, and approved training providers shall notify foster care providers of training opportunities.

Foster Care Provider Medical 622-05-15-10

(Revised 4/1/2024 ML #3803)

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Prior to the CFS Licensing Unit approving a license, the applicant(s) shall submit the results of a physical examination ([SFN 974](#)), dated within twelve months of the date of the initial application for foster care. Foster care providers must submit their physical examination through personal health insurance. If there are expenditures above and beyond the insurance coverage, the cost can be submitted to the authorized licensing agent if the prospective foster care provider(s) request the financial assistance. Foster care providers licensed prior to October 1, 2019 are grandfathered in and do not require a record of a physical examination in the licensing file.

Certified or identified relative foster care providers are not required to submit results of a physical examination ([SFN 974](#)), unless otherwise determined by the department.

Throughout licensing, if concerns or changes occur for the applicant, an authorized licensing agent may require a physical exam. The agency will specify what information they are seeking from the request of an additional physical examination. If information is available from a previous medical examination, the authorized licensing agent may request the applicant sign a Release of Information ([SFN 1059](#)) to receive necessary reports from a medical provider.

Foster Care Provider and Household Member Health

The health of foster care providers and each member of the household, including children must be discussed during the onsite visit each year. Health requirements of children in foster care are exempt.

Immunizations

The Department may require proof of immunizations for all individuals residing in the foster care provider's home, except a child in foster care. It

is recommended all members of the household be up to date on immunizations as recommended by a health care professional, unless the immunization is contrary to the individual's health as documented by a health care professional or the individual provides written documentation that immunizations are against their religious, philosophical, or moral beliefs. Foster care providers specializing in the care of medically fragile children may be required to receive specific vaccines if the needs of the child require such precaution.

Behavioral Health and Therapeutic Services

Behavioral health and therapeutic services are common interventions for adults and children. The CFS Licensing Unit supports engaging in behavioral health services and encourages ongoing participation as needed. Licensing Specialists are required to assess and address the behavioral health needs of the applicants and household members. This is managed through the initial assessment by reviewing current and historical therapy and counseling services. Annually thereafter, Licensing Specialists will complete an onsite visit where a review of the foster care provider's health and medication use. Licensing Specialist's will also, assess any changes to services or needs the foster care provider or household members may have.

Throughout the assessment, if there are concerns regarding needs of the prospective or current foster care provider/s or household member, the authorized licensing agent or the CFS Licensing Unit has authority to request a statement of support from the individual's therapist or medical professional.

1. The statement of support is intended to gain supplemental information as well as ensure awareness to the therapist or medical professional that the individual is seeking to participate in providing care to children in foster care. Foster care providers engage daily with traumatized children, which can present triggers to past life experiences. The statement of support does not require therapeutic notes or details, only agreement or disagreement of the named individual's ability to perform the duties of a foster care provider.
2. Psychological testing for an applicant or household member may be required, as determined necessary by the Licensing Specialist analysis and home study assessment. The cost of any psychological testing is

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the responsibility of the applicant/foster care provider if not completed by the Department's local Human Service Center. The applicant/foster care provider shall sign a release of information for the Licensing Specialist to review the assessment.

Disability Services

Physical disabilities or age of foster care provider does not impact the ability for CFS Licensing Unit to license, certify or approve a prospective foster care provider if the applicant can show that these factors do not inhibit the ability to provide care to children and efficiently carry on the duties required of them.. (NDAC 75-03-14-04)

Foster Care Provider Financial Stability 622-05-15-12

(NEW January 1, 2026 ML 3957)

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Federal standards require foster care providers to be financially stable with reasonable income or resources available to care for oneself and all members of the household. (NDAC 75-03-14-04) A financial assessment must be completed and signed by each foster care provider before initial licensure, certification or Tribal Affidavit approval and during each renewal period (Licensing Packet [SFN 1037](#)).

The specialist will confirm the information when completing the home study. The Licensing Specialist will consider the income and expenses, discuss the family's financial stability and consider overall management of the household income as being more important than the amount of income.

Foster care reimbursement is provided to offset the cost of caring for a child in foster care. Foster care reimbursement is not income, foster care providers are not paid to provide foster care, rather they are reimbursed for costs associated with caring for a child in foster care. Foster care providers are not taxed and are not issued a W-2 or a 1099 from the Department. Foster care reimbursement shall not be the primary source of income or needed to meet the foster care providers own personal expenses. Foster Care providers shall utilize foster care maintenance payments to meet the needs of the child in foster care. (NDAC 75-03-14-05)

Family Evacuation & Disaster Planning 622-05-15-16
(Revised 4/1/24 ML #3803)

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All providers must develop an evacuation plan that identifies two emergency contacts and an identified evacuation location in the event of a disaster during the initial licensing, certification or approval process. During renewal licensure, certification or Tribal Affidavit approval foster care providers will update their evacuation plan, as needed when changes occur or a family moves.

In the event the foster care provider must evacuate due to a disaster, foster care providers must report their location to the:

1. Legal custodian of the child(ren) placed in the foster care provider home, and
2. Licensing specialist , whom will inform the CFS Licensing Unit, via cfslicensing@nd.gov or by calling 701-328-2322.

Identified Relative Licensure 622-05-15-17

(Revised 4/1/24 ML #3807)

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The Fostering Connections Act of 2008 and 2023 federal relative standards allows, all licensing agencies to waive non-safety related licensing standards when licensing an identified relative's home to provide foster care to relative children. North Dakota may waive non-safety related licensing standards in order to eliminate barriers to place children safely with identified relatives as defined in NDCC 50-11-00.1. The waiver, [SFN 844](#), must be completed and signed by the Licensing Specialist agreeing to the relative waiver in order for the CFS Licensing Unit to license or issue a Tribal Affidavit approval. The [SFN 844](#) is documentation specifically noting identified relative status, relationship, waiver criteria, agreements or terms of the waiver(s) agreed upon by the authorized licensing agent, licensing agency and identified relative caregiver. If an identified relative would prefer to be fully licensed, it is permitted and would make them eligible to care for unrelated children. Identified relative waivers are prohibited if it would result in a danger to the health and safety of any child in foster care cared for by the child's identified relatives.

North Dakota has highlighted specific waiver categories permitted for consideration for relative waivers.

- Age 21; waiver issued to a prospective provider no less than age 18 if determined appropriate for the child.
- Physical characteristics of the home
- Bedrooms/sleeping arrangements
- Background check results (not all results can be waived)
- Transportation
- Functional literacy
- Physical exam
- Full Pre-Service Training
- Other

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Information regarding identified relative licensed or approved providers must be entered into the CCWIPS/FAME systems. Licensing Specialist or Coordinators will check "Yes" behind "Relative Foster Care"; and "Yes" behind "Waiver Granted"; If "Yes" is indicated, a text field is available to indicate what non-safety related licensing standard was waived:

The Department is not required to grant any waivers. A refusal to grant or revoke a waiver is not subject to appeal.

Home Study Related to Interstate Compact Cases 622-05-15-20

(Revised 4/1/24 ML #3807)

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The Safe and Timely Interstate Placement of Foster Children Act of 2006 (PL 109-239) amends Title IV-B and Title IV-E of the Social Security Act. It encourages States to improve protections for children and holds them accountable for the safe and timely placement of children across State lines.

Interstate foster care home study requests made by another State are required to be completed and received by the Children and Family Services ICPC Administrator. Federal ICPC guidelines suggests a response to the sending state within 60 days. The law does not require the State to make placement decisions within this timeframe. The decision for placement will be made when all the information, including criminal background check results, is available and the foster care provider license home assessment is complete.

If a North Dakota family is being asked to care for an out of state child through ICPC, the family must decide if they want to be a:

1. Licensed Foster Care Provider= The home study and licensing process will be managed by the CFS Licensing Unit. If related to the child, the provider can be considered for the identified relative waiver.
2. Unlicensed Caregiver = If the caregiver does not want to obtain a license, certification or Tribal Affidavit approval from CFS Licensing Unit, the local case manager will be responsible to complete the unlicensed caregiver home study ([SFN 399](#)). In addition, it is very likely the local agency will be asked to provide the ICPC courtesy case management for the child placed in North Dakota.

Background Check for Adults 622-05-15-25

(Revised 4/1/24 ML #3803)

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The purpose of the background check is to obtain information that will assist in the assessment of whether the applicant(s) and adult household members are suitable to provide foster care to children. NDCC § 50-11-02(2) requires the background check be conducted prior to licensure, certification or Tribal Affidavit approval. Any family licensed prior to August 1, 1999 was grandfathered in not requiring a fingerprint-based criminal background check on file (NDAC 75-03-04-04.1).

A foster care provider cannot be issued a license, certification, or a Tribal Affidavit approval until the background check process is complete and the Criminal Background Check Unit (CBCU) has forwarded background check clearance to the authorized agent and/or the CFS Licensing Unit. Any criminal history information identified during the background check process can be used when making a licensing decision.

Background Check Process:

The request for a fingerprint-based criminal background check inclusive of a child abuse and neglect index check in each state or tribal jurisdiction must be submitted on every adult household member. The initial background check results are eligible for a timeframe of 180 days (roughly 6 months) from the date of completion, as long as a home study has remained in progress. If 180 days have passed and the prospective foster care provider has not completed the licensing process, all adult household members must complete a new fingerprint-based criminal background check at that time.

Licensing Specialists must thoroughly inform prospective providers of the process to complete all required background check forms. The forms are available online <https://www.hhs.nd.gov/providers/criminal-background-checks>

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Applicants must complete the online forms under “foster care related”:

1. Personal Authorization for Criminal History Record Information Inquiry ([SFN 829](#)) for each adult household member;
2. Criminal History Record Request ([SFN 60688](#)) for each adult household member.
3. Fingerprint Identity Verification Form ([SFN 836](#)). This form must be printed and taken to a ND Department of Health and Human Service Center when fingerprinting is completed.

If any adult household member has lived outside of North Dakota in the past five years, they need to complete an additional out of state authorization form for each state they have lived in. For a complete list of states and forms needed for each state view:

<https://www.hhs.nd.gov/providers/criminal-background-checks>

Foster Care | Health and Human Services North Dakota

Child Abuse & Neglect Index

Federal law requires states to complete a child abuse and neglect index check initially and annually thereafter for each foster care provider and any adult household members.

The CFS Licensing Unit will:

1. During initial licensing, certification or Tribal Affidavit approval, the child abuse and neglect index check results and out of state index search results from any state in which the prospective provider, or other adult residing in the household has resided in the preceding 5 years are gathered during the initial fingerprint based criminal background check process by ND CBCU.
2. During renewal annual onsite visit and renewal period for licensing, certification or Tribal Affidavit approval, a review of the child abuse and neglect index check must be completed for each applicant and every household member. The Child Abuse & Neglect Index check ([SFN 433](#)) must be signed by each adult granting permission to view the state index annually; and
3. During initial each annual onsite and during each renewal period, the CFS Licensing Unit will utilize the data management system to review:

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- a. Any child abuse and neglect report or assessment involving the applicant/foster care provider or any household member within the last 5 years (initial) and 1 year (renewal), and
 - b. If any child of the household (not a child in foster care) is currently under the custody of a public agency or working with a Human Service Zone for in-home services.
4. Authorized licensing agents may choose to utilize the [SFN 1059](#), Authorization to Disclose information, which will grant permission for the CFS Licensing Unit to view the data management system and disclose to the Licensing Specialist:
 - a. Any child abuse and neglect report or assessment involving the applicant/foster care provider or any household member within the last 5 years (initial) and 1 year (renewal), and
 - b. If any child of the household (not a child in foster care) is currently under the custody of a public agency.

North Dakota will comply with any child abuse and neglect index check that is requested from another State. This may include additional forms and/or fees requested by the other State.

Subsequent background checks are required:

1. If there is a lapse of license, certification or Tribal Affidavit approval (even one day); or
2. When a licensed, certified or Tribal Affidavit approved provider or other adult household member is known to have been involved, charged, or convicted of an offense.

Rejected Fingerprints:

In the event that two sets of fingerprints have been accepted and rejected, the FBI will conduct a nationwide name based criminal background check. The name based results will be accepted and used in the determination of criminal history check clearance.

Annual Onsite & Renewal Licensing Requirements 622-05-15-30

(Revised 7/1/2025 ML #3925)

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Providers will be notified by the CFS Licensing Unit or authorized licensing agent at least 90 days in advance of their annual onsite visit or licensure, certification, or Tribal Affidavit approval expiration date. The Licensing Specialist will contact the family to discuss whether they wish to continue to be licensed, certified or Tribal Affidavit approved.

Annual Onsite Visit: Licensed, certified and Tribal Affidavit approved foster care providers are required to receive an in-person onsite visit from the assigned Licensing Specialist at least one time every year. Foster care providers must work with the Licensing Specialist to schedule the onsite visit. Foster care providers are required to compile completed training hours throughout the year.

The Licensing Specialist must:

1. Complete the renewal home study ([SFN 1941](#))
 - a. Complete a North Dakota court public search on every adult household member as part of the licensing renewal period or Annual onsite visit. <http://publicsearch.nd.courts.gov/default.aspx>
 - b. Complete or request a child abuse and neglect background inquiry ([SFN 433](#)) each year for every adult household member.
 - c. Complete or request ([SFN 1059](#)) any child abuse and neglect report or assessment involving any adult household member within the last year.
 - d. Complete or request ([SFN 1059](#)) to view the ND data management system to determine if any child of the household (not a child in foster care) is or was within the last 5 years, under the custody of a public agency and review the impacts of the placement.
2. Complete the Renewal Licensing Checklist ([SFN 851](#)) and submit to the CFS Licensing Unit at least 15 days prior to the expiration date of the current license. This includes collecting receipts or verification of select items that may have expired in the past twelve months. Updated documentation provides proof of compliance for the licensing file. Items

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include but are not limited to fire extinguisher, carbon monoxide alarms, smoke alarms, pet vaccines, medical card of any kind, and well water testing results.

Renewal Licensing Period: At least every two years, the license, certification or Tribal Affidavit approval will be set to expire. The Licensing Specialist will require the foster care provider to complete certification or licensing paperwork as part of the renewal process. Each renewal period:

Foster care provider must work with the Licensing Specialist to schedule the onsite visit and:

1. Complete the application, [SFN 893](#).
2. Complete the licensing packet ([SFN 1037](#))
3. Compile completed training hours if not tracked on the [SFN 1037](#).

Licensing Specialist must:

1. Complete the renewal home study ([SFN 1941](#)).
 - a. Complete a North Dakota court public search on every adult household member as part of the licensing renewal period or Annual onsite visit. <http://publicsearch.nd.courts.gov/default.aspx>
 - b. Complete or request a child abuse and neglect background inquiry ([SFN 433](#)) each year for every adult household member.
 - c. Complete or request ([SFN 1059](#)) any child abuse and neglect report or assessment involving any adult household member within the last year.
 - d. Complete or request ([SFN 1059](#)) to view the ND data management system to determine if any child of the household (not a child in foster care) is or was within the last 5 years, under the custody of a public agency and review the impacts of the placement.
2. Complete the Licensing Checklist ([SFN 851](#)) for renewal and submit to the CFS Licensing Unit at least 15 days prior to the expiration date of the current license. This includes collecting receipts or verification of select items that may have expired in the past twelve months. Updated documentation provides proof of compliance for the licensing file. Items include but are not limited to fire extinguisher, carbon monoxide alarms, smoke alarms, pet vaccines, medical card of any kind, and well water testing results.

Provider Survey 622-05-15-32

(Revised 4/1/24 ML #3803)

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ND licensed foster care providers will be surveyed each year during the annual onsite visit, renewal licensure and upon exit/discontinuation from providing foster care. A virtual survey is available to gain perspective and feedback from providers to generate awareness as well as improve the experiences of foster care providers and the children they provide care to. Participation is voluntary and anonymous.

CFS Licensing Unit will provide the link or QR code.

**Conflict of Interest - Licensing Agency Staff 622-05-15-35
(Revised 4/1/24 ML #3803)**

[View Archives](#)

Conflict of interest is monitored by the CFS Licensing Unit, but is a responsibility of the employee and employer. Conflict exists when an employee can receive a benefit because they have direct knowledge of children in need of placement, access to the North Dakota child welfare data management systems, etc. When such knowledge could compromise judgment, decisions, or actions in the workplace a conflict of interest exists and must be reviewed and approved by the employing agency.

For HHS employees, the CFS Licensing Unit Administrator will review, on a case-by-case basis, if a CFS Licensing Unit employee or other HHS child welfare related staff requests to be a licensed foster care provider. A HHS employee will not be assessing their own home or granting their own license, so the conflict of interest is reduced leaving a decision to either:

1. Maintain the licensing study in the unit, but assign the work to a Licensing Specialist who is not supervised by the same unit supervisor; or
2. Refer the licensing study to be completed by an outside authorized licensing agency (Nexus PATH, Tribal Nation, etc.).

For an employee of an authorized licensed agency (Tribal Nation, Nexus-PATH, etc.) the decision for the employee to become a foster care provider must be discussed with their employer. The employer/agency must ensure parameters are in place to avoid conflict of interest licensing studies and placement decisions.

For an employee of a custodial agency (Human Service Zone, DJS or Tribal Nation) supervising child welfare cases, the decision for the employee to become a foster care provider must be discussed with their employer. The employer/agency must ensure parameters are in place to avoid conflict of interest placement decisions. For example, the child's assigned case manager shall not serve as the child's foster care provider.

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For an employee of a foster care treatment center (PRTF, QRTP, etc.) or certified shelter, the decision for the employee to become a foster care provider must be discussed with their employer. The employer/agency must ensure parameters are in place to avoid conflict of interest placements decisions.

Upon notification of a potential conflict with a foster care provider, the CFS Licensing Unit will request verification and/or documentation from the employer to ensure an understanding of the employee's desire to be a foster care provider. Documentation is intended to verify agreement to proceed and will be placed in the licensing file.

**Multiethnic Placement Act/Interethnic Adoption Provision
(MEPA - IEP) 622-05-15-45**

(Revised 4/1/24 ML #3803)

[View Archives](#)

The Multiethnic Placement Act of 1994 (MEPA) was amended in the Small Business Job Protection Act of 1996. The language of the 1996 provision is as follows:

A person or government that is involved in adoption or foster care placement may not –

1. Deny to any individual the opportunity to become a foster care provider, on the basis of the race, color, or national origin of the individual, or of the child involved; or
2. Delay or deny the placement of a child into foster care on the basis of the race, color, or national origin of the foster care provider, or the child involved.

The purpose of MEPA/IEP is to promote the best interest of children by:

1. Decreasing the length of time that children wait to be adopted.
2. Preventing discrimination in the placement of children on the basis of race, color, or national origin; and
3. Facilitating the identification and recruitment of foster and adoptive families that can meet children's needs.

MEPA/IEP provides for diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed. (Refer to further MEPA/IEP policy in 624-05.)

Licensing 622-05-20

Licensing Files 622-05-20-05

(Revised 4/1/24 ML #3803)

[View Archives](#)

Licensing files are public records covered under the access requirements pursuant to NDCC § 44-04-18.1 or 44-04-18.4. There is, however, certain information in the licensing file that is considered confidential and is not part of an open record request; for example, social security numbers, bank information, protected medical information, psychological evaluation, etc. If an authorized licensing agency or the CFS Licensing Unit receives a request to view a licensing file, redacting confidential information in the file is necessary. Notification of all open records request must be given to the CFS Licensing Unit. If a Human Service Zone receives this request, forward the request to the CFS Licensing Unit.

Note: When contacting individuals named as references, all reference information collected is part of the licensing file and is not a confidential record.

Family Licensing Changes 622-05-20-10

(Revised 10/1/2025 ML #3944)

[View Archives](#)

Foster care providers can experience various changes in their family setting while licensed, certified or Tribal Affidavit approved to provide foster care for children. Foster care providers are required to notify the Licensing Specialist of the changes as soon as they are aware the change is coming or has occurred. Authorized agent licensing staff must immediately notify the CFS Licensing Unit that a change is occurring with a provider. This notification will support timeliness and situational awareness. The [SFN 863](#) "Licensing Change Checklist-Family Foster Homes" must be completed by the Licensing Specialist indicating to the CFS Licensing Unit which changes occurred.

It is critical that during initial and ongoing licensing visits the Licensing Specialist educates the foster care provider/s about the importance of notifying the Licensing Specialist when changes occur or are expected to occur. If a license is out of compliance, it could result in overpayments paid to the foster care provider. If an overpayment occurs due to not notifying the CFS Licensing Unit of a change, the foster care provider would be responsible to reimburse CFS.

Placements: If placements are in the home when a licensing change occurs, the Licensing Specialist must notify the child's custodial case manager as soon as possible. If a provider number changes in the payment system, the placement of the child will need to be updated to the new provider number in the data management system. Provider numbers and child placement information drive payment authorization.

Death of a Foster Care Provider: In the event there is a death of a foster care provider, the license would be closed. The license must end no later than the date of death of the foster care provider. If the surviving applicant wishes to continue as a foster care provider, the original provider number must be closed and the surviving individual be relicensed using a new provider number.

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Changes that require notification to the CFS Licensing Unit include, but are not limited to:

1. **Change in Bed Capacity:** When a foster care provider is seeking to increase or decrease their bed capacity, the authorized agent Licensing Specialist or custodial agency case manager must:
 - a. Submit a [SFN 1017](#), Amendment Request, to the CFS Licensing Unit to provide notification and explanation to change the licensed bed capacity.
 - i. Pre-approval to place a child is required for an increase in bed capacity.
 - ii. No pre-approval required to decrease bed capacity.
 - iii. Nexus-PATH manages provider types within their agency. It is recommended by the department that a Treatment Foster Care provider does not provide care to more than **two children** eligible for the TFC Level of Care at one time.
 - b. The CFS Licensing Unit will
 - i. Review the [SFN 1017](#), amendment request,
 - ii. Amend the license in the payment system to allow for increased or decreased bed capacity,
 - iii. Create and mail a new license (if applicable) to the foster care provider and/or the authorized licensing agency.
 - c. Once the increased bed capacity is identified on the license, the placement of the additional child/ren can be made in the data management system and reimbursed accordingly.
2. **Change in Address:** When a foster care provider is planning to move or has moved to a new location, the Licensing Specialist must:
 - a. Email the CFS Licensing Unit stating the address has or will be changing,
 - b. View the property within 7 days of the move.
 - c. If the new property is not viewed within 7 days, the foster care provider may be considered a "prospective foster family" and a new fingerprint-based criminal background check may be required to begin the process of licensing again. If the foster care

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- provider moves and a child in foster care is placed, an overpayment will exist and payment issues will occur.
- d. Upon notice, the CFS Licensing Unit will enter the new residence and mailing address information into the payment system under the same provider number.
 - e. Follow the [SFN 863](#) checklist and forward the updated paperwork to the CFS Licensing Unit as soon as possible, but no later than 45 days.
3. **Additional Applicant moves into the home:** When a foster care provider has another adult applicant move into the home, the Licensing Specialist must:
- a. Email the CFS Licensing Unit notification that the foster care provider is undergoing changes to the household,
 - b. Follow the [SFN 863](#) checklist and forward the updated paperwork to the CFS Licensing Unit as soon as possible, but no later than 45 days.
4. **Additional Household Members move into the home:** When additional household members; including adults or children, move into the home, the Licensing Specialist must:
- a. Email the CFS Licensing Unit notification that the family is undergoing changes to the household,
 - b. Follow the [SFN 863](#) checklist and forward the updated paperwork to the CFS Licensing Unit as soon as possible, but no later than 45 days.
5. **Applicant Name Change:** When a foster care provider becomes married, divorced or chooses to change his/her name, the Licensing Specialist must:
- a. Email the CFS Licensing Unit notification that the foster care provider is undergoing changes to the applicant name,
 - b. Follow the [SFN 863](#) checklist and forward the updated paperwork to the CFS Licensing Unit as soon as possible, but no later than 45 days.

6. **Applicant Divorce or Separation:** When foster care providers become divorced or separated, the Licensing Specialist must:
- a. Email the CFS Licensing Unit notification that the foster care provider is undergoing changes to the household,
 - b. Discuss the plan moving forward specific to any current placements in the home.
 - i. Some foster providers will choose to take a sabbatical from fostering until the divorce or separation is final to minimize stress for all parties.
 - ii. If there are children in foster care in the home and one of the foster care providers wants to continue fostering upon separation from their spouse, the license must continue under both names as the couple is still married.
 - c. If applicable, create a memorandum of understanding (MOU) regarding supervision and responsibility of children in foster care on behalf of the absent spouse. At the time of licensing renewal, if the divorce is not final and the absent spouse no longer wishes to be a licensed provider or connected to the current license, the MOU should be updated and placed on file. A new application must be entered into CCWIPS specific to the individual that will be re-licensed and a new license/provider number must be issued.
 - d. Follow the [SFN 863](#) checklist and forward the updated paperwork to the CFS Licensing Unit as soon as possible, but no later than 45 days.
8. **Transfer of a License from Agency to Agency:** When a foster care provider remains in their current home, but is planning to transfer from one licensing agent to another, the receiving Licensing Specialist must:
- a. Ask for a signed release of information from the foster care provider to enable the two authorized licensing agents to communicate and share initial and ongoing licensing paperwork.
 - b. Follow the [SFN 863](#) checklist and forward the updated paperwork to the CFS Licensing Unit as soon as possible, but no later than 45 days.
 - c. The CFS Licensing Unit will update and enter pertinent information into the payment system. The CFS Licensing Unit

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must close the current certification and a new provider number must be issued upon transfer to a license.

9. **Transfer of level of licensure:** When a foster care provider begins at one level of licensing and wants to convert/transfer to another, the Licensing Specialist must:
 - a. Email the CFS Licensing Unit notification that the foster care provider is undergoing changes to their level of licensure.
 - b. Follow the [SFN 863](#) checklist and forward the updated paperwork to the CFS Licensing Unit as soon as possible, but no later than 45 days.
 - c. The CFS Licensing Unit will update and enter pertinent information into the payment system. The CFS Licensing Unit must close the current licensing level and a new provider number must be issued upon transfer to a new level of licensing. The only time a new provider number is not warranted is if the provider transfers from relative licensure to full licensure or vice versa.

10. **Household member turns age 18:** When a provider's household member becomes age 18, the Licensing Specialist must:
 - a. Email the CFS Licensing Unit notification that the foster care provider is required to ensure their child completes the required criminal background check. This process can start 30 days prior to the child's 18th birthday.
 - b. Follow the [SFN 863](#) checklist to ensure clarity for the provider and reinforce timelines
 - c. Forward the updated paperwork to the CFS Licensing Unit as soon as possible, but no later than 45 days from the birthday.

When any change occurs to a license, certification or Tribal Affidavit approval that requires a new provider number, the start date of the new certification/license must be consecutive with the close date of the certification/license. The dates cannot overlap and if there is a lapse of days in between the close date and the start date, the provider will be considered a "prospective foster care provider" and a new fingerprint-based criminal background check will be required to begin the process again.

Amending a License 622-05-20-11

(Revised 10/1/2024 ML #3867)

[View Archives](#)

Licensed foster care providers can experience various changes in their family setting while licensed to provide foster care for children. It is common to have a change that may result in an amendment to a license. A licensing amendment can occur at any time and must be approved by the Department.

Requests:

The CFS Licensing Unit must receive requests for an amendment on the SFN 1017, Foster Care Licensing Amendment Request. The form is only required when a request is made by:

1. Authorized Licensing Agent (Nexus PATH, Tribal Nation, etc.) or
2. Custodial agency staff (Zone, DJS or Tribal Nation)

Amendment Requirements:

1. CFS Licensing Unit must review the [SFN 1017](#) in order for a family foster care provider to receive an amendment to the license, certification or Tribal Affidavit approval.
2. If the CFS Licensing Specialist is aware of a requested change from a state home during the renewal period or a quarterly check-in meeting, the amendment form is not required. As employees of the CFS Licensing Unit the amendment or change can be documented as part of the case activity log and a new license issued when appropriate and necessary.
3. The [SFN 1017](#) amendment request is required when the authorized licensing agent or a child's custodial agency is seeking to increase a licensed provider's bed capacity, age limit or gender served in the home. Treatment providers (Nexus PATH) will complete the [SFN 1017](#) for all licensing amendment requests that exceed fourteen days. Nexus PATH will manage internal agency respite or substitute care

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arrangements that last less than seven days via an internal form submitted to CFS Licensing Unit to track placements.

4. Placements made into a licensed, certified or Tribal Affidavit approved provider home without CFS Licensing Unit approval, may result in the child's custodial agency (Zone, DJS, or Tribal Nation) being required to reimburse the foster care provider.
5. For those seeking respite care, DO NOT complete the SFN 1017, instead case managers must follow the respite policy and the [SFN 929](#).

Request Process

It is known that placements do occur after business hours and the CFS Licensing Unit does not have an afterhours on-call system. Custodial agencies are asked to first seek shelter care on-call providers or licensed providers with an open placement status. If a provider is identified, but the placement would put the provider over capacity; an amendment is required. The custodial agency must:

1. During typical work hours (Monday - Friday 8:00am – 5:00pm)
 - a. Contact the CFS Licensing Unit to discuss and gain verbal approval prior to the placement.
 - b. Submit the [SFN 1017](#) within one business day.
2. Outside of typical work hours (Evenings or Weekends)
 - a. Submit the [SFN 1017](#) within one business day of the placement.
 - b. The SFN 1017 will allow for a temporary status of the license.
 - c. The CFS Licensing Unit must review and approve.
 - d. If placement does not exceed 14 calendar days, this form will document the short-term temporary approval. CFS Licensing Unit will be required to increase the beds in the payment system to ensure the licensed provider is eligible for payment, but there will not be a new paper license issued for temporary licensing period.

Information Needed

An amendment request will most likely be requested to increase in bed capacity. When this occurs, it is important for the Department to have basic information regarding the foster care provider's makeup of the home. CFS Licensing Unit is required to make a decision regarding the amendment request with due regard of the sleeping arrangements, bed space and safety planning for the children; while ensuring support for the

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foster care provider. In efforts to make a decision, the amendment form asks for details including:

1. How many children are in the home today,
2. How many children is the custodial agency seeking to add,
3. What are the needs of the children and where is everyone sleeping,
4. Permanent beds versus temporary beds are critically important to the amendment process as a temporary bed cannot be used for greater than 14 calendar days;
5. A brief summary of circumstance and explanation of the request to increase bed capacity (who, what, when, where, why) and specify in detail sleeping arrangements; and
6. Acknowledgment by the custodial case manager or authorized licensing agent that communication with the provider and assessment for safety in the home did occur,
7. Confirmation that the requesting staff believes the provider can manage the increase of beds in the home without undue risk to any children in placement, and
8. Partnering and collaboration with other custodial agencies to review and discuss placements in the home as a means to not disrupt the current household.

Substitute Care: Substitute care may be needed when a foster care provider is temporarily unavailable to care for the foster child; foster care providers make arrangements with one another. This most often occurs when the primary foster care provider is going on vacation, has a funeral that will take them out of town overnight, etc. Substitute care arrangements are intended to be for short periods of time, if the care is needed for greater than a portion of one day, foster care providers are required to gain approval from the child's custodian, not to exceed 14 calendar days. Reimbursement is managed privately and is not maintained or managed by the Department, which does not require a license amendment or placement change. Case managers must approve substitute care arrangements and should assess and address the volume of children in the home, sleeping arrangements including review of temporary vs. permanent bed space and ensure that licensing standards are met and safety plans are in place, as appropriate. Licensed homes are not permitted to serve more than six children at a time, without prior approval.

Transfer of License - Physical Location 622-05-20-12
(Revised 4/1/24 ML #3803)

[View Archives](#)

A North Dakota foster care provider license, certification or Tribal Affidavit approval is not transferable and is valid only for the physical location of the home at the time of issuance. If a foster care provider notifies the Licensing Specialist of a move, the Licensing Specialist must visit and assess the new home within seven (7) days and grant a temporary approval of no greater than 60 days for the new location. The Licensing Specialist must submit all required documentation to the CFS Licensing Unit ensuring the new physical location is in full compliance and meet licensing standards.

This applies only to homes located within the State of North Dakota jurisdiction for licensing. If the family moves out of state, the North Dakota license must close the date of the move.

Family Assessment Process 622-05-20-15

(Revised 4/1/24 ML #3803)

[View Archives](#)

A family assessment is one part of the licensing study process. The family must meet the requirements in NDAC 75-03-14, "Family Foster Care Homes," which is the licensing administrative rules with the force of law. The CFS Licensing Unit requires a Licensing Specialist to complete an assessment incorporating tools and methods available in the pre-service curriculum.

This assessment engages the prospective foster care provider in a process to determine whether fostering is right for them and for the agency. The home study process will provide the opportunity for the agency to be more knowledgeable about the attitudes and skills of the foster care provider/s, and to make better placement decisions for children.

The purpose of a family assessment:

1. To determine if the family is capable of providing foster care for children.
2. To assess the family's strengths and challenges to best determine children in foster care who will match the qualities of the family and adjust to placement into the home.
3. To educate potential foster care provider/s about the child welfare system.
4. To determine if the home meets the basic licensing requirements set forth by North Dakota law, rule and policy.

The home study process:

The home study is completed prior to licensure, certification or Tribal Affidavit approval using the SFN 889 or SFN 1941. The home study shall be completed by a Licensing Specialist who will recommend to the CFS Licensing Unit if the family is in full compliance with standards.

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If throughout the home study process the family does not meet compliance, the Licensing Specialist may work with the prospective foster care provider to counsel them out from continuing the licensing process. If the prospective provider does not agree to be counseled out, the Licensing Specialist may deny the applicant(s). If the prospective foster care provider was working with the CFS Licensing Unit, the Licensing Specialist must follow the denial procedures. If the prospective foster care provider was working with an authorized licensing agent (Tribal Nation, Nexus PATH, etc.) the Licensing Specialist must send a letter to the applicant(s) detailing the rationale for denial; no further action is required regarding submission of licensing paperwork to the CFS Licensing Unit.

Licensing Specialists responsibilities' when completing a home study assessment:

It is the authorized licensing agent's responsibility to conduct the home study of the prospective foster care provider and recommend licensing of the applicant to the CFS Licensing Unit.

The study shall be carried out in a series of planned discussions between the assigned Licensing Specialist and prospective foster care provider(s). The meetings will include individual and combined discussions between the prospective foster care provider(s) and their household members.

The home study includes:

1. Review the home and property for safety. Walk through of the home and the property. Be familiar with full property; ask for a tour of the out-buildings, barn, garage, know what the children will experience when placed in the home.
2. Individual and combined interviews
3. Review SFN 1038 "Foster Care Policy and Standard Review" including:
 - a. Discussion regarding "providing a service" and supports a provider can offer including emergency shelter, shelter care or respite care to children;
 - b. Overview of licensing laws, rules and policy including specifics related to licensing, certification or Tribal Affidavit approval

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- process, maintenance payment, provision of clothing, medical care, education, religion, training, medical transportation, etc.;
- c. Overview of the child welfare system and characteristics of children placed in foster care, including range of behaviors strengths and challenges children in foster care experience including the effects of separation from their own parents, anticipated reactions in relation to their own family, feelings of being different in school and the community;
 - d. Reason for foster care entry;
 - e. Importance of least restrictive environments, continuity of care for child(ren), and how to avoid unnecessary disruption of placement;
 - f. Varying length of time children require foster care;
 - g. Differences between foster care and adoption;
 - h. Special characteristics of being a foster family, and how this differs from their own family in terms of discipline, challenges and satisfaction.

Family Interviews 622-05-20-17

(Revised 4/1/24 ML #3803)

[View Archives](#)

The home study assessment, including interviews with each member of the household, as determined age appropriate, is required. Family interviews shall include, but are not limited to, parents' philosophy of child rearing, behavior management, discipline, problem-solving and any other topics outlined on the home study assessment.

During initial licensing, there shall be a minimum of three interviews with the prospective foster care provider to allow the Licensing Specialist to view the property, meet the household members, experience home structure and routine, interview all parties together and separately, etc. At least one in-person meeting is required, it is best practice to in-person, however, opportunities for virtual meetings are allowable. The Licensing Specialist must determine the sufficient number of visits to gather necessary details to properly assess the prospective foster care provider and make a recommendation to license the home.

Ongoing communication and interviews occur with licensed providers as the assigned Licensing Specialist is required to complete quarterly check ins phone calls and an in-person annual onsite visit each year to meet the requirements of policy 622-05-15-30.

Information to be Obtained:

Information obtained about the prospective foster care provider includes current functioning of household members, structure and engagement of the family unit, past life experiences and pattern of relationships, attitudes, expectations, and motivations. Essential points to be discussed or noted include:

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1. Reasons the family is applying to become a foster care provider. (Motivation of applicants should be evaluated in terms of the reasons which applicants recognize and can verbalize, as well as underlying needs revealed in the study.)
2. Current relationships within the family unit, such as marital relationships and parent-child relationships; attitude and expectations of their own children; problems between children or parents which may affect the child in foster care, etc.
3. Current and historical relationships with relatives, friends, and other members of the community.
4. Education and employment history that will assist in caring out the duties of a foster care provider.
5. Religious affiliations, cultural activities, whether or not the prospective foster care provider can support the child's religious preferences, sexual identity, culture, etc. The foster care providers must make opportunities available for a child in foster care to attend religious and cultural ceremonies chosen by the child in foster care or the child's parents, within the community in which the foster family resides. The foster care provider must respect and not interfere with the religious or cultural beliefs of the child in foster care and the child's family. (NDAC 75-03-14-05)
6. General social, intellectual, and community engagement of the family.
7. Current functioning specific to normal everyday living, and ability to manage stress or crisis.
8. Pattern of the family's daily life, routine, habits, etc.
9. Significant experiences in the history of the family members, including information about separation or loss through death, desertion, divorce, etc. These life experiences may affect the families' feelings about separation from and return of children to their own parents.
10. History of any involvement in sexual abuse, either as a victim or perpetrator, of each prospective foster care provider or household member, even if no charges were filed. If an individual has been involved as a perpetrator, follow-up with questions related to treatment. Secure releases to access treatment records.
11. History of experiences providing care to children and feelings about behaviors, child development, medical needs, etc.
12. Prospective foster care providers feelings, attitudes, and expectations of providing service to a child in foster care.
13. Capacity of applicants to care for a child in foster care and to give proper consideration to the feelings of their own children, positive and negative.

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14. Capacity to absorb the pressure of a child in foster care without undue disruption of the current household; and to accept and work through the child in foster care's feelings about their placement into foster care.
15. Ability to accept the child's parents and relatives and work with the custodial case manager to help the child/ren achieve the case plan goal, while supporting contact between the child(ren) and family.
16. Agreement to participate in pre-service and ongoing training.
17. Agreement to participate in Child and Family Team meetings specific to meet the needs of the child in placement.
18. Agreement to provide reasonable and prudent parenting, which includes opportunity for the child's socialization with other children. Foster care providers shall give every child the opportunity for appropriate social relationships and shall encourage the child to participate in community activities, such as 4H, Boy Scouts, Girl Scouts, school clubs, athletics, etc.

**Dual Licensure/Certification - Family & Adult Foster Care
622-05-20-19**

(Revised 4/1/24 ML #3803)

[View Archives](#)

Foster care providers licensed, certified or Tribal Affidavit approval to provide care for children may also inquire about providing foster care to adults. It is possible for a family to be licensed to provide foster care to both adults and children. Dual licensure is an option if the foster care provider/s and household members meet the law, rule and policy for both levels of licensing. Any request for dual licensure must be discussed and approved by the CFS Licensing Unit Administrator and the Aging Services supervisor.

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Physical Characteristics of Home 622-05-25

Housing 622-05-25-05**(Revised 4/1/25 ML #3904)**[View Archives](#)

The foster home must be a single family dwelling (home, townhouse, apartment, condo or manufactured home), occupied by the applicant(s). The Licensing Specialist shall inspect and approve the entire premises. The onsite visit should also include a tour of any buildings on the property (shed, Quonset, barn, garage, shop, etc), not solely the home where the children will be residing and sleeping. While walking through out-buildings on the property, the Licensing Specialist will provide education and discuss safety with the prospective foster care provider.

The home assessment is in addition to any inspections required as part of the licensing process including:

1. The home and premises must be clean, neat, and free from hazards that jeopardize health and safety of the children.
2. The home shall engage in proper trash disposal and be free from rodent and insect infestation.
3. The home must be equipped with adequate light, heat, ventilation, and plumbing for safe and comfortable occupancy. The home shall have a properly working sink, refrigerator, stove and oven in the kitchen and at least one sink, toilet, and bathtub or shower in the bathroom.
4. The home and grounds shall be in compliance with any state and local zoning requirements. (NDAC 75-03-14-03)
5. The Licensing Specialist shall inform prospective foster care providers where they can get information on state and local zoning requirements.
6. A health inspection may be required if conditions appear questionable, and all conditions as outlined by the Health Department must be met.
7. If a home has video cameras installed inside or outside of the property, the foster care provider/s must disclose this information to the specialists upon purchase of a security system or video cameras for monitoring. Licensing Specialists should be informed of where the cameras are positioned, why they are in use, when they are recording, who is responsible for the camera(s) and what happens to the footage.

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- a. Video cameras must be made known to all parties entering the home (case managers, child in foster care, etc.) and an explanation granted as to why the cameras are in use.
 - b. Video cameras may not be used to supervise children.
 - c. Indoor video cameras may not be placed in private spaces of a home, such as bedrooms and bathrooms where children in foster care will change clothing or be naturally exposed. Baby monitors with cameras may be used to observe infants and toddlers under age three in their bedroom to ensure safety and awareness etc.
 - d. Video cameras may not be used to intentionally record the child.
8. Bedroom Requirements:
- a. Bedrooms must have at least two means of escape (door and window that opens and is operational, no less than 24 inches H x 20 inches W), allow for proper light and ventilation and the room must have appropriate smoke alarms as recommended by local fire department, state fire marshal or local building codes. U.S. Department of Housing and Urban Development recommends each bedroom's reasonable occupancy is two people, however the size and layout of the space will be assessed by the Licensing Specialist.
 - b. Family rooms used for temporary sleeping arrangements must have two means of escape from the family room. Family rooms and/or playrooms used for the daytime care of children must be equipped with two means of escape from the level of the home, in which the room is located.
 - c. Sleeping arrangements, which require a child in foster care to sleep in a bedroom located in a basement or on a level of the home away from the foster care provider(s), must be discussed. Children in foster care must demonstrate their ability and understanding to depart from all exits.
 - d. The home must have adequate bedrooms to accommodate the size of the household including an individual bed and bedding for each child in foster care. A license to provide foster care for children must not displace a household member from sleep space.
 - e. Co-sleeping or bed sharing with a child in foster care is prohibited.
 - f. Children in foster care age six and older are not to share bedrooms with children of the opposite gender. Adult household members over the age of 18 are not to share bedroom space with children in foster care, regardless of gender. This includes children in foster care in the 18+ Continued Care program (who are viewed as

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adults in all other systems). 18+ youth are not to share bedroom space with children under age 18, unless the 18+ youth and his or her same sex sibling are in need of placement in the same provider home.

- g. Children in foster care age two and older are not to share a bedroom with the foster care provider/s, unless otherwise approved by the CFS Licensing Unit.
- h. Children in foster care must be given adequate space for personal belongings and privacy.
- i. Permanent beds are located in a bedroom and are defined as independent standing furniture such as a twin, full, queen, king, bunk bed, a murphy bed attached to a wall, or a crib, bassinet, pack n' play or toddler bed depending on the size of the child. Safe sleep should be followed and infants must sleep on their back on a flat, firm surface.
- j. Temporary beds may be placed in a bedroom or living/family room and are defined as an air mattress, trundle bed, a hide-a-bed, futon, or couch, which cannot be used as ongoing sleep space.
Temporary bed space:
 - Cannot exceed 14 calendar days.
 - Does not include bean bags, infant incline rockers, yoga mats, or sleeping bags on the floor.
 - Must be discussed if the provider is interested in providing short-term shelter care or respite care in the foster home.
 - All other policy parameters of child's age, gender, location, including no bed sharing must be applied when approving temporary bed space.

9. Doors:

- a. Interior doors, when locked, must allow for entry from the outside in an emergency. For example, a bathroom door must be designed so that the opening of the locked door can be accomplished from the outside, in the event of an emergency.
- b. Exterior doors maintained to permit easy exit.
- c. Doors must prevent a child from being trapped, including closet doors that can open from both the inside and outside.

Secondary Residence: There are times when a foster care provider has two properties and the family lives between two homes as their primary

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residence (Ex: They live in their city home for the fall/winter months and they move to the ND lake cabin for spring/summer). If the family is “living” fulltime at the home, then the home must meet general safety compliance. A Licensing Specialist can make arrangements to view both properties or go onsite to the primary property where the family is spending most of their time throughout the year and follow up with a FaceTime or TEAMS call to complete a virtual tour of the secondary property. If the family is solely visiting the lake cabin or permanent camper site for different weekends throughout the summer, it is not considered their primary residence and is not required to be viewed. Bed capacity discussions must occur to ensure the foster care provider has adequate sleeping space available.

General Safety Guidelines 622-05-25-30

(Revised 7/1/2025 ML #3925)

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Foster care providers are required to maintain a safe and comfortable environment for children in foster care. Below are additional standards set forth by NDAC 75-03-14 to ensure the health and safety of a child in placement.

1. Firearms: Firearms must be kept in locked storage or trigger locks must be used. Ammunition must be kept separate from firearms. A foster care provider with a concealed weapons permit must follow the regulations set forth by NDCC 62.1-04. Individuals permitted to carry have been trained in how to handle and possess the weapon safely. Due diligence is required by the foster care provider to apply the rules of storage to the firearm when not on the person. For example, when the firearm is being carried, it must be secured on that person and cannot be laying freely on the console of the vehicle. In addition, safe storage must be considered when possessing a BB/air gun in the foster home. The weapons are not equivalent to a firearm but do require certain age restrictions to operate. Licensed foster care providers must follow the local city ordinances and consider the age and development of children in placement when storing items to ensure safety.
2. Fire Safety Equipment: The home shall be equipped with smoke alarms, fire extinguisher(s), and carbon monoxide detector(s) as determined necessary for the space. If the home has a source for carbon monoxide through an attached garage, gas furnace, or gas appliances then the home must have at least one carbon monoxide detector/alarm on each floor per recommendation from the ND State Fire Marshal. Combined smoke detectors and carbon monoxide alarms are allowed per fire code.
3. Transportation: Transportation must be available, reliable, legal and safe to transport children in placement.
4. Vehicular Insurance: All foster care providers are required, by law, to carry liability insurance on all vehicles owned by them in which children in foster care may be passengers.

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5. Telephone/Communication Device: The home must have an operational telecommunications device (extra cell phone, landline, ipad, etc.), and residents of the home must have access to it. Immediate means a communication system that is available and functional for notification to emergency medical care, local fire department, police department, or any other entity that could provide life saving services and can be reached in time to maximize the effectiveness of those services to aid the child in foster care and household members in a crisis situation.
6. Emergency Contacts: The home shall post emergency contacts, including poison control at (800) 222-1222.
7. First Aid: The home shall have first aid supplies on hand while a child in foster care is in placement.
8. Pets: Pets belonging to the foster care provider must be properly vaccinated per veterinary guidelines. Pets are defined as animals living in the house with the family and/or engaging daily with those living in the home. Pets requiring vaccinations most commonly include dogs, cats, and ferrets. Ex: A farm dog or cat that sleeps outside but is active with the family is require to be vaccinated.
 - a. The CFS Licensing Unit requires the rabies vaccine at a minimum. If a family pet has a medical condition where getting the rabies vaccine would negatively impact the pet's health and a veterinarian signs a letter indicating such, CFS Licensing Unit will accept the letter in place of the vaccine. If the pet is not vaccinated, further assessment and safety planning must be reviewed with the foster care provider.
 - b. Pets are discussed throughout the initial and renewal home study process. The Licensing Specialists must assess if the pets are friendly to children and strangers, including custodial agency staff who will regularly visit the home and the Licensing Specialists who assess the home for safety.
 - c. Friendly pets have characteristics that include affection, loyalty and ability to readily give up control of food, toys and other objects to its owner, children, and visitors. Pets show signs of a dominance or aggressiveness (biting, nipping, excessive barking,

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- snarling, growling, hissing, etc.) will need to be assessed in greater detail.
- d. If an incident occurs which leads to a change of behavior from a pet, Licensing Specialists must be notified by the applicant and/or current foster care provider. Licensing Specialist will discuss the pet behavior and ensure safety for children in placement, which may include safety planning around the household pet. When a household pets behavior impacts the safety of the household, it could be a barrier to obtaining or maintaining a license to provide foster care.
9. Milk: The milk supply consumed by the family shall be obtained from an approved source. Milk in compliance with regulations for human consumption as noted in section 4.1-25-30 of the North Dakota Century Code.
 10. Food: Food in wholesome condition, free from spoilage or contamination and must be safe for human consumption.

This section is not all inclusive of health and safety standards, the chapter has various safety related topics throughout the manual.

Water Safety 622-05-25-30-02

(Revised 4/1/24 ML #3803)

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Foster care providers must follow reasonable and prudent parenting when engaging in water sports or activities. Foster care providers shall determine the swimming ability of each child prior to water activities and not allow a child in foster care to participate in an aquatic activity without adult supervision.

Swimming pools

Swimming pools with a depth of four feet or greater must have:

1. A barrier to minimize unsupervised access. The barrier must be equipped with a safety lock. A fenced-in back yard does not meet the barrier requirement. In-ground pools with professionally installed safety covers do meet the barrier standard if locked and cannot be unrolled/opened without supervision.
2. A working pump or filtering system, if the pool cannot be drained;
3. A lifesaving device available in the event of an emergency, and
4. Supervision to ensure safety while swimming.

Small wading pools do not require a barrier. The wading pool must be regularly drained. In addition, safety and supervision is required for all water activities.

Hot tubs

Hot tubs on the premises must have a safety cover that is locked when not in use.

Lake Life/Boating

Foster care providers must follow reasonable and prudent parenting when taking children in foster care to the lake to swim or engaging in recreational water activities.

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Foster care providers shall require that all children wear personal flotation devices during aquatic activities, such as water skiing, tubing, and rafting. Prior to riding in a boat, kayak, canoe or on a jet-ski the foster care providers shall provide instruction and rules surrounding the importance of wearing personal flotation devices. Foster care providers must also ensure they have received permission and consent from the custodial agency via the [SFN 1040](#). This consent gives clear direction to the provider regarding permission for the child to engage in various normalcy activities.

Proper Storage of Medication, Alcohol and Other Hazardous Material 622-05-25-30-03

(Revised 10/1/25 ML #3944)

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To ensure the safety and well-being of children in placement, the foster care provider must properly store all potentially harmful items—including medications, alcohol, weapons, poisonous substances, cleaning supplies and other hazardous materials. Storage practices should be appropriate to the age and developmental level of each child in care, preventing unauthorized access and reducing risk of harm. Foster care providers are required to consult with the custodial case manager to assess the child’s developmental understanding and implement safeguards tailored to the child’s needs. This collaborative approach supports a safe living environment.

During the home study, the Licensing Specialist will review this standard and view the home to ensure proper storage of items listed. Foster care providers must use reasonable and prudent parenting to ensure children in foster care placed in the home are safe from consumption or access to potentially dangerous items. Proper storage is required and will vary in each home depending on the cupboard and closet locations and the age of the children in placement.

The goal of this standard is to eliminate access. If foster care providers care to younger children, a childproof lock on a lower cupboard may be sufficient to eliminate access to cleaning supplies. If providing care to teenagers, it may require additional supervision or locking of alcohol, prescription medication, and cleaning supplies especially if the child has a history of substance use.

Medication Management

Children in foster care placed into the foster home may or may not be taking medications. Foster care providers are to keep medications stored safely, out of reach of children and secured or locked, if necessary.

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It will be most common for a child to need over-the-counter (OTC) medications, medications that can be purchased without a prescription from a health care provider. Children in foster care may have a prescription or psychiatric medication which is written by a health care professional for a specific child to meet the needs of their illness and is not to be shared with anyone else. If medications are prescribed, foster care providers are responsible to seek training and technical assistance to understand and follow directions given by the prescribing health care provider including, but not limited to the purpose of the medication, dosage, schedule, duration of use, side effects and how to respond to side effects.

When medication is to be disposed of, collaborate with the child's custodial case manager for directions on how to dispose. The US Food and Drug Administration (FDA) states to not flush medications down the sink or toilet, unless specifically instructed. Many times, custodial case managers will collect the excess medication and deliver to a local disposal site.

Safe Sleep 622-05-25-30-05

(Revised 4/1/24 ML #3803)

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Foster care providers must provide a safe sleeping space including mattress and linens for each individual child, as appropriate for the child's needs and age. Foster care providers must not co-sleep or bed-share with children in foster care.

There are various trainings available for caregivers to become better educated about safe sleep practices. It is important to know:

1. Ways to reduce the risk of sudden infant death syndrome (SIDS) and other sleep-related causes of infant death;
2. What a safe sleep environment looks like; and
3. How bed-sharing can increase risks to the child.

When caring for an infant, foster care providers must know to keep the baby's sleep area close by yet separate from where they sleep. The baby should not sleep on a bed, couch or armchair with adults or other children, but can sleep in the same room as the foster care provider/s, if appropriate and necessary. If the baby falls asleep in a car seat or swing, move him/her to a safe flat sleeping area to continue sleeping.

Caregiver Video:

<https://www.youtube.com/watch?v=7cXwlpSjL08&list=PLdnicNpQpb-GgMSiloCCPIVjvOwh06zVt&index=8>

Child Restraints and Safety Belts 622-05-25-30-07

(Revised 4/1/24 ML #3803)

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NDCC §39-21-41.2 strengthened the North Dakota law related to the use of child restraints/safety belts. The following is a brief summary:

1. Children younger than age 8 are required to ride in a child restraint (car seat or booster seat). The restraint must be used correctly following the manufacturer's instructions.
2. A seat belt may be substituted for children younger than 8 who are more than 57 (4'9") inches tall.
3. Children ages 8 through 17 must be properly secured in a seat belt or child restraint (car seat or booster seat).
4. The driver is responsible for ensuring that all occupants are buckled up in the appropriate restraint.
5. When licensing for either initial or subsequent foster care provider certification, licensing, or Tribal Affidavit approval, the ND child restraint/safety belt requirements must be discussed when assessing for adequate transportation for children in placement.

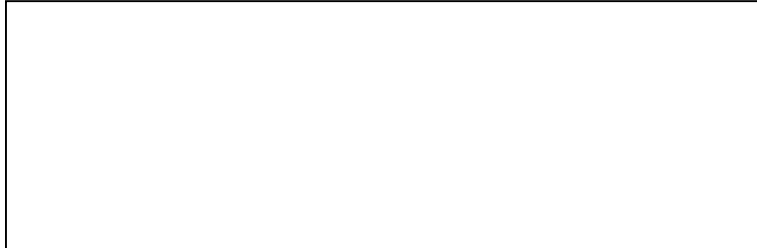
Water Temperature and Testing 622-05-25-30-10

(Revised 7/1/2025 ML #3925)

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The foster care provider must ensure the water temperature in the home is monitored for safety. The water temperature settings should not exceed 120 degrees F. Licensing Specialist will educate the family regarding safe water temperature to prevent injuries.

Length of Exposure Required to Receive a Third-Degree Burn



Well Water Testing:

Water supply in compliance with regulations for human consumption as noted in NDCC 33.1-16.

The water supply must be from an approved municipal water supply system where available. When a municipal system is not available, a water sample must pass the approved drinking water standard bacteriological water analysis test. Well water testing must be done at initial application and annually thereafter.

The foster care provider shall obtain results from an Environmental Protection Agency approved laboratory for testing through licensing with the ND Department of Environmental Quality. The water testing results must be submitted to Children and Family Services (CFS) Licensing Unit in order for payment to be made on behalf of the home.

The CFS Licensing Unit has an agreement to pay for the required water tests (not chemical analysis) for foster care providers from these ND approved laboratories:

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1. ND Department of Health and Human Services State Lab (Bismarck) at 328-6272
2. Fargo Cass Public Health (Fargo) at 476-4089
3. First District Health Unit (Minot) at 852-1376
4. Astro-Chem Lab, Inc. (Williston) at 572-7355
5. Southwest District Health Unit (Dickinson) at 483-0171
6. Grand Forks Environmental Lab (Grand Forks) at 701-746-2595

In order for the water test to be paid by the CFS Licensing Unit, the authorized Licensing Specialist must follow these procedures:

1. The Licensing Specialist conducting the home study will educate the provider on how to request a water bottle test kit from the lab located in closest proximity. When calling verify the laboratory has an account with the CFS Licensing Unit and identify the request is for "Foster Care Licensing".
2. The approved lab may send you specific forms already coded for their purposes. If not, the family must indicate on the paperwork received "Foster Care Licensing" to help the lab identify where to bill the test costs.
3. The foster care provider will draw the water sample and complete the required laboratory form/s.
 - a. Location Information: The home will be indicated as the mailing address/location where the water sample was taken.
 - b. Billing Information: If the vendor is an approved laboratory (listed above) an account has been established for the CFS Licensing Unit to pay for the water testing.
 - c. Water Results: All water testing results must be sent to cfslicensing@nd.gov Attn: Water Testing
4. The foster care provider must send or drop off the water sample to the nearest laboratory immediately. The lab must receive the water sample within 30 hours of the sample being taken or the sample will be thrown out. Also, plan accordingly as many labs have specified days the water samples can be tested.
5. The approved laboratory will send the completed lab report/results to CFS at cfslicensing@nd.gov Attn: Water Testing.
6. CFS Licensing Unit will record and verify the provider results for payment purposes and place results in the licensing file.

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7. CFS will initiate payment to the approved laboratory upon receipt of the bill or invoice, not to exceed reimbursement once per month.

NOTE: If the above procedure is not followed, the Department cannot pay for the water test.

Testing Preference:

The ND Department of Health and Human Services is the preferred laboratory for water testing, however, the CFS Licensing Unit does understand distance offers great barriers for rural communities outside of Bismarck. If an approved laboratory is not listed above, the lab and cost of the water testing must be pre-approved by CFS in order to develop a process for submitting a sample, obtaining the results and making payment.

Direct Payment to Foster Care Providers:

Providers who pay for the water testing directly will not be reimbursed by the CFS Licensing Unit. The billing must be done through the approved laboratory and follow the procedures listed in policy.

Community Wells:

If a provider has a community well, their community well is not required to be tested for foster care licensing purposes. A community well is considered a municipal water source and receives ongoing monitoring.

Failed Water Testing:

If sampled water is returned as "fail" or "unsatisfactory", a child in foster care is not allowed to consume the water. The water will have to be re-tested until the sample passes the water analysis requirements for the state of ND.

If the water testing results continue to present unsafe water that could be consumed by a child in foster care, further discussions and safety planning must occur between the laboratory specialists, foster family, authorized licensing agent, and CFS Licensing Unit.

Fire Prevention and Safety 622-05-25-35

(Revised 10/1/2024 ML #3867)

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NDCC [50-11](#) mandates fire prevention and safety training during the initial licensure, certification or Tribal Affidavit approval and each renewal period thereafter. In addition, each foster care provider is required to complete and sign a fire safety self-declaration indicating compliance of their home specific to fire safety topics recommended by a local fire inspector, state fire marshal, or building code.

Foster Care Provider(s) Must Complete:

1. Fire prevention and safety training prior to initial licensure (90mins) or renewal (1 hour); and
2. [SFN 1037](#) "Licensing Packet" including fire safety self-declaration and requiring signature by each foster care provider, if applicable.
3. Under certain circumstances, a fire inspection by the local fire department or the State Fire Marshal may be required. NDAC provides authority for this to occur if indicated. (NDAC [75-03-14-03](#))

General Fire Safety Maintenance:

1. Foster care provider homes must be free of obvious fire hazards, such as defective heating equipment or improperly flammable materials.
2. Fire Extinguisher/Smoke Alarm/Carbon Monoxide: The home must comply with the requirements of NDAC 75-03-14-03 regarding checking and maintaining fire extinguishers, smoke detectors/alarms, carbon monoxide detector/alarms.
 - a. Smoke and carbon monoxide detectors/alarms must have batteries changed every year and the alarm unit replaced when expired. Many units expire within 7 to 10 years, providers must replace units when expiration occurs.

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- b. Fire extinguishers must be accessible and maintained with a minimum of one 2A-10BC fire extinguisher on each level of the home. Kitchen and laundry rooms are priority areas. It is highly recommended that purchased fire extinguishers are "serviceable" to ensure proper functionality. Serviceable fire extinguishers must be "serviced" annually. If not serviceable, replacement of the extinguisher must be made in accordance with manufacturer expiration date. If the unit is not serviceable, and there is not an expiration date, then fire extinguishers must be repurchased every 3 years. Verification will be monitored by Licensing Specialists during the annual onsite visit.
3. Heating Systems: Furnace (gas, propane, or coal), chimneys, and boilers must be maintained in accordance with the manufacturer's instructions. No initial or ongoing inspection required. Maintenance is the responsibility of the provider. In efforts to minimize the risk of a fire, special attention must be made to remove items from touching the heat source.
4. Receipts: The foster care provider must provide verification of purchase for all purchased extinguishers or alarms, when applicable, for the licensing file.

Personal Characteristics of Foster Care Providers 622-05-30

(Revised 4/1/25 ML #3904)

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Foster care providers must meet specific home study requirements which includes personal characteristics and life experience. The home study assesses the current circumstance of the household including the applicant(s) and all household members (children or other adults) living in the home.

Applicants on the license must meet the required personal characteristics as primary caregivers to the children in foster care. However, household members living in the home who are not applicants on the license, must also meet requirements and have characteristics that provide a safe and positive placement experience for the child in foster care. The Licensing Specialist must ensure ongoing assessment of the home.

Personal Characteristics:

1. Applicant(s) or adult household member/s shall not have a criminal conviction for a direct bearing offense, nor be on probation where the offense cannot be determined rehabilitated under NDCC § 12.1-33-02.1. The Department shall determine the effect of a conviction or an offense.
2. Applicant(s) must demonstrate an interest in and responsiveness to other people, particularly children.
3. Applicant(s) must understand the importance to give love, affection, and care to a child without expecting the child to return this love and affection.
4. Applicant(s) must acknowledge their own children's feelings and the feelings of family and friends toward children in foster care.
5. Applicant(s) must demonstrate satisfactory and stable adult relationships, which include not only meaningful relationships, but supportive relationships with household members, family and friends. If the applicant's relationship status changes (new relationship, marriage, divorce, separation, widower, etc.), the Licensing Specialist must

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- reassess the stability in the home including but not limited to if the provider(s) need a break from taking the new placements to allow the relationship status time to adjust, etc.
6. Applicant(s) must demonstrate emotional stability, this includes observation that the applicant(s) can remain calm and composed, describe and show signs of resilience, optimism, and impulse control. Emotional stability also highlights the applicant has appropriate understanding and management of anger and rejection.
 7. Applicants will not use any illegal substances, consume alcohol in excess when supervising children in placement, or misuse legal prescription and/or nonprescription drugs by consuming them contrary to what is directed.
 8. Applicant(s) or household member/s, except a child in foster care, may not exhibit symptoms of mental health condition, including substance use, that inhibit their ability to provide care to children.
 - a. Upon initial licensure, certification or Tribal Affidavit approval, an applicant or any household member may not have symptoms of a mental health or behavioral health condition, including substance use, inhibiting the applicant's ability to provide care to children for a period of at least twelve months. (NDAC 75-03-14-04).
 - b. Throughout licensing, certification, or Tribal Affidavit approval periods, if an applicant or household member is experiencing symptoms of a mental health or behavioral health condition, including substance use, and a foster child in foster care is in placement, every effort should be made to keep the placement intact if safety has been assessed and the household member is seeking receiving treatment or services. The authorized licensing agent must reassess the foster care provider's protective capacities to ensure the symptoms do not inhibit the applicant's ability to provide care. The Licensing Specialist must also assess if the foster care provider would prefer or benefit from a temporary break from foster care placements in order to allow time for the family to manage the presented circumstance.
 9. Applicant(s) and household member(s) may not smoke or vape, in the home or in an enclosed area (garage, camper, vehicle) when the child in foster care is present. All providers should be aware of the potential hazards of smoking in the presence of children, particularly infants and children with respiratory or allergic sensitivity.
 - a. Applicant(s) or household members prescribed medical marijuana must notify the licensing specialist. If medical marijuana is

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prescribed to an applicant(s) or household member, they may continue to care for children in foster care. However, an assessment should consider the medical diagnosis requiring the use of medical marijuana, like any other prescribed controlled substance. The Licensing Specialist will review the applicant(s) ability to provide for the safety and well-being of a child in foster care. Discussions must include how, when and where the foster provider will use medical marijuana, etc.

- b. If approved by the Licensing Specialist, the applicant(s) or household member(s) must follow the prescription authorized by the medical professional. If medical marijuana is not issued in pill form, the household member(s) cannot smoke in an enclosed area in the presence of a child in foster care.
10. Applicant(s) must function adequately in their chosen lifestyle. Demonstrating the ability to accept responsibility, support and engage with their family and friends.
11. Applicant(s) have reputable character, values, and ethical standards conducive to the well-being of the children.
12. Applicant(s) must have a practical understanding of the developmental stages of children and their accompanying needs. Flexibility in their expectation, attitudes, and behavior in relationship to meeting the individual needs of children. This requires tolerance to care for a child who has experienced traumatic life experiences and is in need of a positive living environment with patience, flexibility and empathetic redirection.
13. Applicant(s) must demonstrate the maturity to exercise good judgment and appropriate use of authority.
14. Applicant(s) must acknowledge and demonstrate acceptance and resolution of any of their own negative childhood experiences.
15. Applicant(s) must have the capacity to accept placement of a child in foster care without undue disruption of their own family life. The volume of household members is considered and assessed when initially licensing and during each annual onsite visit. Licensing Specialists will assess if the applicant(s) can maintain responsibility and management of the household. Applicant(s) must be able to engage in parental duties, offer quality support, ensure privacy, nurture and emotional/behavioral/mental health needs are met for all household members before adding additional children.
16. Applicant(s) demonstrate and understand the importance of accepting child in foster care's relationship with his or her own parents. The ability

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- to accept a child in foster care's background and family circumstances without passing judgment on the child or the child's family.
17. Applicant(s) must have the capacity to help prepare a child for reunification, for adoptive placement, guardianship, or an alternate permanency arrangement.
 18. Applicant(s) must demonstrate a willingness to accept placements into their home and treat the child as a member of their own family.
 19. Applicant(s) must be willing to cooperate with the custodial agency to obtain any recommended services to best meet the needs of the child in foster care.
 20. Applicant(s) must demonstrate an understanding of the need for each child in foster care to have a nutritional, well-balanced diet, as well as recognize the requirement of ensuring each child in foster care is offered food, eats adequately and obtains the necessary nutrition daily. Special diets must be provided by the foster family when required by the child's condition.
 21. Applicant(s) must comply with the department's approved pre-service training competencies and demonstrate the ability to apply the skills when caring for children in foster care.

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Appropriate Behavior Towards Children in Foster Care 622-05-30-05

Discipline 622-05-30-05-05

(Revised 4/1/24 ML #3803)

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Foster Care providers must engage in appropriate discipline that is constructive or educational in nature and may include diversion, separation, discussions with the child in foster care about the situation, praise for appropriate behavior and gentle therapeutic physical restraint for providers with proper training. Children shall not be subjected to physical harm or humiliation.

1. No child in foster care may be kicked, bitten, punched, spanked, shaken, pinched, roughly handled or struck with an object by foster care providers or any other individual residing in the home.
2. Cruel and unusual punishment are prohibited.
3. Authority to discipline may not be delegated to or be accomplished by children.
4. Separation, when used as discipline, must be brief and appropriate to the age and circumstances of the child in foster care, and when used for discipline a child in foster care must be within hearing of an adult in a safe, lighted, well-ventilated room. A child in foster care may not be separated from the household in a locked room or closet.
5. A child in foster care may not be disciplined for lapses in toilet training.
6. Verbal abuse or derogatory remarks about a child in foster care, the child's family, race, religion, sexual orientation, gender identity or cultural background are not permitted.
7. A child in foster care may not be force fed unless medically prescribed and administered under a physician's care.
8. Deprivation of means, including food, clothing, shelter, hygiene, and medical care is not permitted.

Child Abuse and Neglect Reports 622-05-35

(Revised 5/1/25 ML #3904)

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To report child abuse and neglect: Contact the ND Department of Health and Human Services CPS Intake at 1-833-958-3500

No household member, except a child in foster care, **may** have been the subject of a child abuse or neglect assessment where a confirmed decision was made or impending danger was identified unless the CFS Licensing Unit, after making appropriate consultation with child protective services, approves the issuance or continuance of a license, certification or Tribal Affidavit approval; and

1. The household member has followed the recommendations from the child protection assessment, and
2. The household member can demonstrate adequate protective capacities and/or the elimination of an underlying basis precipitating the confirmed decision.

If a foster care provider or a member of the household is suspected of abuse or neglect ([SFN 960](#)), the concerns will be assessed by a child protective services (CPS) worker or law enforcement. CPS will notify the CFS Licensing Unit of the report and will collaborate to accommodate a joint assessment of safety in the foster home. ND CPS Policy 640-05-30-01 describes in detail what to expect in the event a report of suspected child abuse or neglect is filed against the foster care provider or a household member. Throughout the assessment, if the agency determines that the child in foster care is at risk of harm, the agency will take steps to protect the child, which may include removing the child from the current home.

Placement Decisions:

- If there is reason to believe, after interviews and collection of facts, that impending dangers exist in the home, the CFS Licensing Unit will determine if children in foster care are able to be placed or remain in the foster home.

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- If it is determined that children cannot remain placed in the home, the CFS Licensing Unit will request more information to determine if licensing can continue.
- If it is determined the report does not rise to child abuse and neglect and is administratively assessed by CPS, the CFS Licensing Unit will determine if there is a licensing violation or concern that will need to be managed by the Licensing Specialist.
- If a confirmed decision is made, by law, the license to provide foster care for children will need to be revoked.

Licensing Hold:

The CFS Licensing Unit has authority to place a licensed provider on a hold at any time throughout the licensing period. There are various reasons why a hold would be required. CFS Licensing Unit decides when a provider is placed on a hold and when the hold can be lifted. Holds may include, but are not limited to pending criminal charges, major home remodels impacting safety, family circumstances warranting further assessment, or when a foster care provider is listed as the subject in a child abuse and neglect report.

CFS Licensing Unit is notified by CPS when a report is filed on a foster care provider. CFS Licensing Unit will place the provider license on a "HOLD". During a licensing hold, the provider is not allowed to take additional placements; this includes:

- No respite placements,
- No emergency shelter care placements,
- No substitute care, and
- No foster-to-foster child care arrangements.

After CPS and the Licensing Specialist have communicated about the report and licensing has been given permission to discuss the report, the Licensing Specialist must notify the provider that they are on "HOLD". Licensing will inform the provider they cannot take any new placements until further notice.

Cooperation & Collaboration 622-05-40-05

(Revised 4/1/24 ML #3803)

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Foster care providers work in collaboration with a variety of parties, including the licensing agency, child's custodial case manager, child's family, medical professionals, therapist, schools, court system, law enforcement, community service providers, and many more.

Foster care providers shall ensure the health and safety of children placed in their home, as well as provide a safety service to best meet the needs of the child in foster care. The provision of service can be accomplished in many ways, specifically by meeting the daily needs of the child, supporting family connections, and complying with goals and tasks to assist the child in achieving timely permanency.

It is important that foster care providers follow these standards set forth in NDAC 75-03-14-05:

1. Foster care providers shall allow public officials to enter the provider's home, as determined necessary by the public official to ensure safety. For the purposes of this subsection, "any reasonable time" means a time mutually convenient to the foster care providers and the public official.
2. Foster care providers shall allow entry to the provider's home, at any reasonable time, to personnel of the authorized agent or custodial. For the purposes of this subsection, "any reasonable time" means a time mutually convenient to the foster care providers and authorized licensing agent or custodial agency personnel or any time the authorized licensing agent or the custodial agency's determines that a child in foster care's health, safety, or welfare requires the admittance.
3. Foster care providers shall cooperate with the custodial agency in that agency's efforts to develop plans for the child, implement those plans, and meet the needs of the child and the child's family.
4. Foster care providers shall cooperate with the custodial agency to develop an approved visitation plan with parents or guardian. If it is

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appropriate, visitation may take place in the foster care provider's home or in a community setting to allow for formal or informal mentoring and support by the foster care provider. If visitation occurs in the foster care providers home, the providers do not have to allow entry to any individual who has been using alcohol, drugs, or any other intoxicating substance, or who attempts a visit in a manner that is not in accordance with the approved visitation plan.

5. Foster care providers must inform the authorized licensing agent if a child or adult is moving into the home. All changes in the number of individuals living in the foster care provider's home must be immediately reported.
6. Foster care providers must agree to immediately report to the agency any of the child's illnesses or injuries, change of address, disappearance, or behavior or mental concerns the child may be presenting in the home, school, or community.
7. Foster care provider must provide when requested by the custodial agency or juvenile court, information concerning the child in foster care & the child's family.
8. Foster care providers must maintain confidentiality of all information given by the child's custodial agency. Information may not be disclosed to any person without prior approval of the custodial agency.
9. Foster care providers must be willing to participate in Child & Family Team meetings (CFTM) for the child. Child and family team meetings are held at least quarterly, facilitated by the custodial agency to address and review the permanency plan of the child. This is the appropriate time for the foster care providers to discuss strengths and challenges about the services, case management supports, care and treatment needs of the child. In addition, the meeting provides opportunity to discuss any needs the foster care provider may have, in efforts to best support the child in placement.
10. Foster care providers must cooperate in carrying out the objectives and goals of the permanency plan for the child in foster care developed and implemented in collaboration with the custodial agency and child and family team. Foster care providers shall meet the needs of the child while placed in the foster care providers.
11. Foster care providers must attempt to maintain and accept the relationships between the child in foster care and their family (parents, siblings, grandparents, extended relatives) where appropriate and possible. This includes such things as visitation. The foster care providers shall not make attempts to diminish the relationship between

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the child and their family or between custodial agency and the child in foster care.

12. Foster care providers should be made aware of the cultural background of the children in their care and provide opportunities for children in foster care to learn about and participate in cultural activities that are unique to their particular background as requested by the child in foster care, parents, or custodial agency.

Notice or Right to be Heard - Court Hearings 622-05-40-35

(Revised 10/1/25 ML #3944)

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A licensed foster care providers or unlicensed caregiver must receive timely notice of and the right to be heard by the custodial agency in any proceeding held with respect to the child placed in their home. Ex: foster care providers can submit a letter or feedback on case progress to the Zone which will provide the details to the States Attorney for further action. More information on court proceedings, can be found policy at Child Welfare Court Hearings 624-05-15-13.

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**Native American Foster Families on or near the
Reservation 622-05-45**

Tribal Affidavit Service Area 622-05-45-03

(Revised 4/1/24 ML #3803)

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The Department of Health and Human Services has State Tribal Title IV-E agreements with four ND Tribal Nation; Spirit Lake Nation, Standing Rock Nation, Three Affiliated Tribes, and Turtle Mountain Band of Chippewa. Title IV-E agreements allow for each Tribal Nation to license foster care providers "on or near" the Indian reservation. Each Tribal Nation has the authority to define their service area. The licensing home study is completed by a Licensing Specialists employed by each Tribal Nation. After the home study is complete, the Licensing Specialist will gather licensing paperwork and obtain a signed affidavit for families living on or near the reservation. Licensing paperwork requesting approval, must be submitted to the ND Department of Health and Human Services CFS Licensing Unit. Each Tribal Nation has the authority to license homes to provide foster care on the reservation and within the jurisdiction of the reservation boundaries. Each Tribal Nation has the authority to also license homes located within their defined service area. Below are the defined "near" services areas for each Tribal Nation:

1. **Turtle Mountain Band of Chippewa** defines "near" as the selected area where Turtle Mountain Band of Chippewa enrolled members reside within the boundaries of Rolette County.
2. **Spirit Lake Nation** defines "near" as the selected area where individuals (not required to be enrolled members) reside within the 100-mile radius of the exterior boundary of the Spirit Lake Reservation.
3. **Standing Rock Nation** defines "near" as the selected area where individuals (not required to be enrolled members) reside within the 100-mile radius of the exterior boundary of the Standing Rock Reservation within the North Dakota state lines.
4. **MHA Nation – Three Affiliated Tribes** defines "near" as all areas within the interior boundaries of the state of North Dakota.

Tribal Affidavit of Compliance - Licensing Approval 622-05-45-05

(Revised 4/1/24 ML #3803)

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Title IV-E agreements allow for each Tribal Nation to license providers and submit an affidavit to the CFS Licensing Unit for approval. All licensing forms, checklists and safety measures are to be reviewed or completed by each Tribal Nation's Licensing Specialist prior to submitting licensing and/or identified relative waiver paperwork to the CFS Licensing Unit. A Tribal affidavit foster care provider is not issued a foster care "license" by the CFS Licensing Unit, rather an "approval" to provide foster care for children.

Tribal Nations prospective providers are not eligible for certification unless their agency State Tribal Title IV-E agreement is updated. Certified foster care providers have shorter placement maximums, and if allowed per the Title IV-E agreement, such placement dates must be acknowledged and managed by the Tribal Nation.

Jurisdiction: ND Tribal Nations have authority to license foster care providers on or near tribal jurisdiction, however other ND authorized licensing agents do not have authority to license a home on reservation land. If requested the Tribal Nation can provide permission or enter into an agreement with an agency to complete a foster care for children home study on Tribal lands (Ex. Nexus PATH to assist in licensing a TFC home on the reservation).

If the prospective foster care provider is living on or near a recognized Indian reservation in the state of ND, the CFS Licensing Unit shall accept a signed affidavit from the Tribal Nation. The Tribal affidavit paperwork must be submitted to the CFS Licensing Unit for Department approval. The CFS Licensing Unit will review the licensing paperwork, will either approve or deny the affidavit home. If approved, the affidavit approval will be entered into the payment system.

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Tribal Responsibility: The State Title IV-E Agreement highlights the responsibility of each Tribal Nation to follow the licensing law, rule and policy set forth by the state. Each Tribal Nation is responsible to train, educate, support and prepare prospective individuals or families on the process of becoming a foster care provider. The Tribal Nation continues to support the foster care provider(s) with ongoing training, placement concerns, non- IV-E payments, etc. The Tribal Nation assigned Licensing Specialist will submit the required paperwork to gain "approval" for a foster care provider to receive Title IV-E foster care reimbursement.

Initial Tribal Affidavit "Approval"

In order for the Department to approve the provider assessed by the Tribal Nation, the Tribal Licensing Specialists must submit:

1. [SFN 890](#), Affidavit completed by the Tribal Nation;
2. [SFN 893](#), Application completed by the foster care provider; and
3. Background checks (initial): Need satisfactory completion of a fingerprint based criminal background check. The Tribal Nation must provide documentation that a fingerprint based criminal background check was conducted on each adult living in the home.

The [SFN 850](#), initial licensing checklist, along with supporting documentation is highly recommended to be submitted in efforts to review and assess for licensing approval.

Tribal Affidavit - Annual Onsite

In order for the Tribal Nation to meet ongoing licensing compliance, the assigned Tribal Nation Licensing Specialist must complete an onsite visit to the foster care provider's home. The Licensing Specialists must submit:

1. [SFN 890](#), Affidavit completed by the Tribal Nation;
2. Any pertinent public search records, background checks for new household members, tribal child abuse and neglect checks, etc.

The [SFN 851](#), is annual licensing checklist, along with supporting documentation is highly recommended to be submitted in efforts to review and assess for continued licensing approval.

Renewal Tribal Affidavit "Approval"

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In order for the Department to approve the provider assessed by the Tribal Nation, the Tribal Licensing Specialists must submit:

1. [SFN 890](#), Affidavit completed by the Tribe Nation;
2. [SFN 893](#), Application completed by the foster care provider; and
3. Any pertinent public search records, background checks for new household members, tribal child abuse and neglect checks, etc.

The [SFN 851](#), annual licensing checklist, along with supporting documentation is highly recommended to be submitted in efforts to review and assess for continued licensing approval.

Timeliness: Tribal Affidavit foster care providers, located on or near the reservation, are held to the same timeliness standard as licensed homes licensed by the CFS Licensing Unit.

- Renewal paperwork must be presented to the CFS Licensing Unit at least fifteen (15) working days before the expiration of the approval in order for the previous approval to be continued.
- If the information is not received timely and the approval lapses; the process, including each adult background check, will need to start over. If a foster care provider is not "approved" by the CFS Licensing Unit, no foster care reimbursement can be made until the licensing approval process is complete.

Placement Preferences 622-05-45-10

(Revised 4/1/24 ML #3803)

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Federal law requires custodial agencies to identify a permanency plan for each child in foster care. Foster care providers may be considered, but are not guaranteed, to be a permanent option for a child in foster care. Foster care providers must acknowledge their role as a service provider and recognize, as a foster care provider, they may be considered, but are not guaranteed, to be a permanent option for a child. Foster care providers must sign an acknowledgment (SFN 1037) that federal law establishes a permanency preference for children eligible under Indian Child Welfare act and North Dakota Century Code chapter 27-19.1 and with identified relatives of the child. Further information regarding ICWA policy and placement preferences can be found in permanency policy manual 624-05

Custodial agencies make placement decisions and must include analysis of cultural preference and accommodations to best meet the needs of the child in foster care. All efforts should be made to ensure the placement of a child in foster care is in a location where the parent can have ongoing access to the child without undue economic, physical, or cultural hardship.

Roles and Responsibilities 622-05-50

(Revised 4/1/24 ML #3803)

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The licensing agency, custodial agency, parent/guardian, foster care provider(s), and child (when appropriate) have certain roles and responsibilities that they must perform to ensure that the most safe and adequate care possible are provided to children in foster care. In addition to policy, the ND Foster Care Provider Handbook has a detailed list of the roles and responsibilities. The Foster Care Provider Handbook can be located online at

<https://www.hhs.nd.gov/sites/www/files/documents/DHS%20Legacy/foster-parent-handbook.pdf>.

Custodial Agency

The custodial agency is instrumental in working collaboratively with the foster care provider caring for the child in foster care. Communication, planning and support is offered by the custodial agency case manager. Detailed policy regarding the responsibilities of the custodian can be found in Policy 624-05-12.

Parents/Guardian

The parent and/or guardian of the child in foster care is instrumental in working collaboratively with the custodial agency, foster care provider, the child, therapists, service providers, etc.

Child in Foster Care

The child in foster care, when age appropriate, is instrumental in working collaboratively with the custodial agency, foster care provider, the child, therapists, service providers, etc. It is important that children are educated on house rules, case plan goals and expectations of the case manager and foster care provider.

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Foster Care Provider

The foster care provider is instrumental in working collaboratively with the custodial agency, licensing agency, the child in foster care's family, therapists, service providers, etc. Further responsibilities include, but are not limited to:

1. Provide safety, food, clothing, transportation, daily supervision, shelter, and other services as deemed necessary by the custodial agency to meet the child's needs.
2. Inform the custodial agency of any illness or problems arising with the child, including discipline issues.
3. Work with the custodial case manager to ensure that the child receives appropriate medical care.
4. Follow the laws, rules, and policies set forth by the State of North Dakota to be a licensed, certified or Tribal Affidavit approved foster care provider.
5. Engage in training opportunities to best meet the needs of the child in placement.
6. Maintain ongoing documentation regarding the child's care.
7. Discuss and secure authorization from the custodial agency, from the parents/guardian (when appropriate) for circumstances such as taking a child out-of-state, to engage in high-risk activities (horseback riding, skiing, etc) or other pertinent permissions related to reasonable and prudent parenting.
8. Provide updated information to the custodial agency when traveling or going on extended vacations.
9. Participate in Child & Family Team meetings.
10. Accept feedback, direction and support from the custodial agency.
11. Cooperate with the custodial agency's plan for the child in foster care's family and sibling visitation and contact, and to maintain significant relationships.

HHS Liability 622-05-55

(NEW 1/1/2026 ML# 3957)

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Licensed foster care providers (claimant) and others affiliated with the child in foster care who incur damages to property caused by acts or omissions of a child in foster care are eligible to file a property damage claim. The claimant must file the claim, regardless of whose property was damaged. This policy is the "insurer of last resort" and should be used only when a private insurance policy, such as homeowners, tenants, personal automobile, personal umbrella liability insurances, or any other collectible insurance, will not cover the damages or loss, or their deductible is higher than the cost of the damage.

Coverage

The CFS Licensing Unit will reimburse the lesser of the reasonable cost to repair or to replace damaged property incurred by a claimant and others, if the damage is caused by acts or omissions of a child in foster care. This coverage is subject to the following limitations:

- \$100 Department deductible per claim
- \$5,000 maximum payout per claim
- \$10,000 maximum payout per year/per claimant

The CFS Licensing Unit will cover the difference between \$100 and the amount of the deductible paid. This applies only to claims for damages, which are covered by this policy. In cases where the property damage claim total exceeds \$25,000 the CFS Licensing Unit may further review the claim to assess damage, actual cost, replacement cost, and incident occurrence. The CFS Licensing Unit may cover 25% of remaining personal property damage after insurance payout, not to exceed the \$10,000 annual limit.

Exclusions

The following exclusions apply:

- Property damage due to the operation or use of any aircraft or watercraft.

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- Property damage resulting from dishonest, fraudulent, criminal, malicious, or negligent conduct on the part of the claimant, family members living in the claimant's house, or others.
- Theft of property.
- Bodily injury of any kind.
- Injury to household pets.
- Secondary property damage caused after the incident, not by the child in foster care.

Property damage caused by children who are not in an open foster care program tracked by the ND child welfare system.

Additional exclusions may apply as determined by the CFS Licensing Unit on a case-by-case basis.

Claim Procedure

Custodial case managers must submit these documents to the CFS Licensing Unit Administrator:

1. Written notification from the custodial case manager is required detailing knowledge of the incident and agreement of the claim before a foster care property damage claim can be considered by CFS.
2. A completed Family Foster Care Claim of Property Damage Form ([SFN 327](#)).
 - a. A [SFN 327](#) must be completed for each claim filed with an insurance company; multiple claims should not be included on one [SFN 327](#), unless previously approved by the CFS Licensing Unit.
 - b. If more than one incident occurs in a 24 hour period, resulting in multiple insurance claims, the CFS Licensing Unit will combine the insurance claims into one claim with one CFS Licensing Unit deductible for cases where the payout will not exceed \$1000.
3. A signed W-9 for payment purposes ([SFN 53656](#)) and voided check for payment purposes.
4. Photographs of the damage.
5. A letter from a private insurer denying payment for the damages claimed.
6. A written estimate by a contractor or insurance adjuster, or bill, or receipt of payment made for damages.
7. When applicable, verification of the amount paid by the private insurer.
8. When applicable, proof of the amount of deductible paid by the claimant or others.

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9. Claims need to be postmarked within 90 days after discovery of the damage, and sent via email to the CFS Licensing Unit Administrator at cfslicensing@nd.gov. The Department is not required to consider a claim if it is incomplete or not submitted within the 90-day timeframe.

A review committee consisting of the CFS Licensing Unit Administrator, HHS Fiscal Administration, and Risk Management will review the claims and make a determination within fifteen (15) working days of receipt of a complete claim. If a claim is approved, payment will be made to the party who incurred the damage. If a claim is denied, the foster care providers will be informed of the reason for the denial. If approved, payment will be made to the party who incurred the damage.

Motor Vehicle Operation by Youth in Foster Care 622-05-60

(Revised 4/1/24 ML #3803)

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ND Department of Health and Human Service personnel are not authorized to sign for a minor to secure a permit or driver's license even though it is desirable and would provide normalcy for the child in foster care. However, NDCC §39-06-08 sets out conditions under which an application for an operator's license on behalf of a minor can be made. Permanency policy 624-05-15-50-41 describes the law further.

Foster care providers will be asked to acknowledge they understand the law, rule and policy surrounding children in foster care driving. The acknowledgement (SFN 1037) will be managed by assigned licensing specialist. The Department brochure "North Dakota Foster Youth Driving" (DN 271) is a resource to review with foster care providers at the time of initial licensure, renewal licensure, and as needed thereafter. Brochure can be found online:

<https://www.hhs.nd.gov/sites/www/files/documents/DHS%20Legacy/brochure-foster-care-driving-dn271.pdf>

Foster Care Provider Direct Deposit 622-05-65

(Revised 4/1/24 ML #3803)

[View Archives](#)

The ND Department of Health and Human Services is required by law (NDCC 50-11-03.5 Automated clearing house payments) to issue reimbursement to licensed foster care providers via direct deposit. Each licensed foster care provider must be set up with direct deposit into a personal bank account.

The foster care provider must submit third party verification (voided check or direct deposit letter from the bank) of their account information including:

1. Bank Routing Number;
2. Personal Account number; and
3. Detailing if the account is a "checking or savings".

The foster care provider or authorized licensing agent specialist can scan/email the direct deposit information to cfslicensing@nd.gov or mail the information to:

Children and Family Services
Attn: CFS Licensing Unit
600 East Boulevard Avenue #325
Bismarck, ND 58505

It is very IMPORTANT to forward all banking changes to Children and Family Services immediately in order to ensure correct and timely deposits.

NOTE: The direct deposit law does not apply to Nexus PATH licensed foster care providers, as reimbursement on behalf of children in placement is done directly by Nexus PATH, not the CFS Licensing Unit.