

JAN 3 1 2006
HUMAN RESOURCES

HOUSE FILE 2204
BY SMITH

Passed House, Date _____ Passed Senate, Date _____
Vote: Ayes _____ Nays _____ Vote: Ayes _____ Nays _____
Approved _____

A BILL FOR

1 An Act creating a multidimensional treatment level foster care
2 program.

3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

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HF 2204

1 Section 1. MULTIDIMENSIONAL TREATMENT LEVEL FOSTER CARE
2 PROGRAM.

3 1. PURPOSE. The department of human services shall
4 establish a multidimensional treatment level foster care
5 program on a pilot project basis in accordance with this
6 section. The purpose of the multidimensional treatment level
7 foster care program is to provide a family-based treatment and
8 support program for children who are transitioning from a
9 psychiatric medical institution for children to a family
10 foster care placement while preparing for family
11 reunification.

12 2. DEFINITIONS. For the purposes of this section:

13 a. "Department" means the department of human services.

14 b. "Family foster care" means foster care provided by an
15 individual person or a married couple who is licensed under
16 chapter 237 to provide child foster care in a single-family
17 home environment.

18 c. "Multidimensional treatment level foster care program"
19 or "treatment program" means the program established pursuant
20 to this section.

21 d. "Psychiatric institution" means a psychiatric medical
22 institution for children licensed under chapter 135H.

23 3. ELIGIBILITY. A child is eligible for the treatment
24 program if at the time of discharge from a psychiatric
25 institution the child is unable to return to the child's
26 family home and one of the following conditions is applicable:

27 a. The child has treatment issues which cause the child to
28 be at high risk of failing in a foster care placement unless
29 targeted support services are provided.

30 b. The child has had multiple previous out-of-home
31 placements.

32 4. ELIGIBILITY DETERMINATION. Children who are
33 potentially eligible for a treatment program shall be
34 identified by the administrator of a treatment program at the
35 time of the child's admission to a psychiatric institution.

1 In order to be admitted to the treatment program, the
2 treatment program administrator must determine the child has a
3 need that can be met by the program, the child can be placed
4 with an appropriate family foster care provider, and
5 appropriate services to support the child are available in the
6 family foster care placement. The determination shall be made
7 in coordination with the child's family, department staff, and
8 other persons involved with decision making for the child's
9 out-of-home placement.

10 5. SERVICES. The services provided by a treatment program
11 shall include but are not limited to all of the following:

12 a. Foster family recruitment, training, and retention,
13 which may include support groups, family recreational
14 activities, and certification programs.

15 b. Placement services, which may include intake screening
16 and initial assessment of children and foster families,
17 matching of child and foster family needs and strengths,
18 transition assistance, placement staffing, and an initial
19 treatment plan.

20 c. Foster care treatment-related services, which may
21 include any of the following:

22 (1) Making home visits to monitor progress in implementing
23 the child's treatment plan.

24 (2) Providing counseling to the child, the child's family,
25 and the foster family.

26 (3) Making an initial visit within two business days of
27 the child's placement in the foster family.

28 (4) Providing weekly treatment sessions with the child and
29 the foster family.

30 (5) Providing later treatment sessions involving the
31 child, the child's family, and the foster family as provided
32 in the child's treatment or case permanency plan.

33 (6) Providing services to support the child's successful
34 reunification with the child's family, which may include
35 parent training, supervised visitation, intensive

1 reunification work, and psychological or psychiatric
2 consultation.

3 d. Indirect services, which may include any of the
4 following:

5 (1) Developing a child and family treatment plan.

6 (2) Developing a foster family care plan designed to
7 assist the child in having a successful family foster care
8 placement.

9 (3) Providing for the treatment program administrator to
10 attend child-related court hearings and school conferences.

11 (4) Preparing written reports on the initial thirty days
12 of the child's treatment program participation, each quarter,
13 and a summary of the child's treatment program participation
14 upon the child's discharge from the treatment program.

15 (5) Assembling a life book for the child.

16 e. Crisis intervention available on a twenty-four-hours-
17 per-day, seven-days-per-week basis and respite services
18 available to participating family foster care providers of at
19 least five hours per month.

20 6. AGENCY QUALIFICATIONS. The department shall select two
21 agencies to implement the treatment program pilot project.
22 One of the agencies shall be a psychiatric institution
23 provider licensed for more than 100 beds that is located in a
24 county with a population in excess of 300,000. The other
25 agency shall be a psychiatric institution provider licensed
26 for 60 or more but less than 65 beds that is located in a
27 county with a population between 189,000 and 196,000.

28 7. REIMBURSEMENT PROVISIONS. The families providing the
29 family foster care services under the treatment program shall
30 be directly reimbursed by the department in accordance with
31 the requirements for family foster care reimbursement. In
32 addition, the treatment program shall provide a per diem
33 reimbursement to the family foster care providers
34 participating in the treatment program.

35 8. EVALUATION. The treatment program shall be evaluated

1 over a twenty-four-month period commencing on the
2 implementation date of the pilot project which shall be as
3 close to July 1, 2006, as possible. The evaluation shall be
4 conducted by a person who is independent of the department and
5 the agencies participating in the pilot project. The
6 evaluation components shall include but are not limited to the
7 following information associated with the children and
8 families participating in the treatment program pilot project:
9 quantity and quality of out-of-home placements, family foster
10 care retention and satisfaction, and the participating
11 children's relative length of stay in a psychiatric
12 institution.

13 EXPLANATION

14 This bill directs the department of human services to
15 create a multidimensional treatment level foster care program
16 pilot project for a two-year period.

17 The bill states the purpose of the program is to serve
18 children to be discharged from a psychiatric medical
19 institution for children (PMIC) who are either unable to
20 return to the family home and have treatment issues which
21 cause the children to be at high risk of failing in a foster
22 care placement or who are children with multiple previous out-
23 of-home placements.

24 The bill provides requirements for eligibility
25 determination, services included, qualifications of the two
26 agencies to be selected to participate in the pilot project,
27 reimbursement of family foster care providers participating in
28 the program, and for an independent evaluation to be performed
29 of the pilot project.

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