

COMMITTEE ON HEALTH & HUMAN SERVICES
HOUSE OF REPRESENTATIVES AMENDMENTS TO S.B. 1333
(Reference to Senate engrossed bill)

Amendment instruction key:

[GREEN UNDERLINING IN BRACKETS] indicates text added to statute or previously enacted session law.

[Green underlining in brackets] indicates text added to new session law or text restoring existing law.

[~~GREEN STRIKEOUT IN BRACKETS~~] indicates new text removed from statute or previously enacted session law.

[~~Green strikeout in brackets~~] indicates text removed from existing statute, previously enacted session law or new session law.

<<Green carets>> indicate a section added to the bill.

<<~~Green strikeout in carets~~>> indicates a section removed from the bill.

1 The bill as proposed to be amended is reprinted as follows:

2 Section 1. Section 8-469.02, Arizona Revised Statutes, is amended
3 to read:

4 8-469.02. Foster youth permanency pilot project team: duties:
5 confidentiality

6 A. The department shall establish a foster youth permanency pilot
7 project team. The foster youth permanency pilot project team shall:

8 1. Develop a methodology to identify children who are believed to
9 be at risk of exiting the department's custody without a permanency
10 placement.

11 2. Implement solutions to remove barriers to permanency for
12 children who are likely to be in the custody of the department when the
13 child turns eighteen years of age or to begin participating in the
14 extended foster care program pursuant to section 8-521.02.

15 B. The foster youth permanency pilot project team consists of the
16 following members:

17 1. Members who have expertise or experience in social work.

18 2. Members who are attorneys and who have expertise in representing
19 children or experience in child welfare law.

20 3. Members who have served as guardians ad litem.

21 4. Members who have served as court appointed special advocates.

22 5. Members who are familiar with the child's case and who have an
23 understanding of the child's permanency plan preferences.

24 6. Members of national organizations with experience in permanency
25 planning policy and best practices.

26 7. MEMBERS WHO HAVE PERSONAL EXPERIENCE IN FOSTER CARE, INCLUDING
27 FORMER FOSTER CARE YOUTH OR MEMBERS OF A FOSTER CARE FAMILY.

28 C. The foster youth permanency pilot project team shall do all of
29 the following:

30 1. Thoroughly review the child's case file.

31 2. Convene foster youth permanency pilot project team meetings that
32 include the child, the child's caregivers, the child's attorney and

1 members of the foster youth permanency pilot project team who are
2 appointed pursuant to subsection B of this section and who agree to
3 participate in the child's case, as applicable and necessary. At the
4 initial meeting, the foster youth permanency pilot project team shall
5 identify barriers to permanency for each child selected and determine the
6 assistance, resources and tools needed for the child to achieve
7 permanency.

8 3. Review and discuss the permanency plan for the child.

9 4. Convene ongoing meetings of the foster youth permanency pilot
10 project team to evaluate the child's progress towards permanency and to
11 amend the child's permanency action plan as necessary.

12 5. Identify specific options to place a child with individuals or
13 families who are willing and able to provide permanency to a child
14 selected by the foster youth permanency pilot project team.

15 D. The foster youth permanency pilot project team shall have access
16 to all department documents and personnel that are necessary to perform
17 the duties of the foster youth permanency pilot project team.

18 E. The foster youth permanency pilot project team may enter into
19 contracts with any of the following:

20 1. A child or adolescent psychiatrist who has expertise in
21 effective therapies and assessing proper use of psychotropic medications.

22 2. An attorney who has expertise in social security benefits,
23 education, immigration, disability, adoption and department and child
24 welfare policies.

25 3. A private investigator who can successfully locate relatives or
26 kin of children who were not previously identified as placement options.

27 4. A NONPROFIT ORGANIZATION THAT HAS DEMONSTRATED EXPERTISE AND A
28 PROVEN RECORD OF SUCCESSFULLY ESTABLISHING PERMANENCY FOR YOUTH WHO ARE AT
29 RISK OF EXITING THE DEPARTMENT'S CARE WITHOUT ACHIEVING PERMANENCY.

30 F. The foster youth permanency pilot project team shall take
31 reasonable steps to prevent unwarranted invasions of privacy and to
32 protect the privacy and dignity of children who are the subject of a
33 permanency action plan.

34 Sec. 2. Section 8-505, Arizona Revised Statutes, is amended to
35 read:

36 8-505. Issuance of licenses; application; investigation;
37 renewal; public information

38 A. The issuance of initial and renewal licenses for child welfare
39 agencies shall be made by the division.

40 B. A child welfare agency shall not receive any child for care or
41 maintenance or for placement in a foster home unless the agency is
42 licensed by the division. Application for a license shall be made on a
43 form prescribed by the division.

44 C. ~~The division shall,~~ Before issuing a license to an agency, ~~THE~~
45 ~~DIVISION~~ SHALL investigate the activities and standards of care of the
46 agency, its financial stability, the character and training of the

1 applicant, the need for ~~such~~ THE agency, and the adequacy of its intended
2 services to insure the welfare of children. A provisional license may be
3 issued to any agency whose services are needed but ~~which~~ THAT is
4 temporarily unable to conform to the established standards of care. If
5 the applicant meets the standards ~~as~~ established by the division, a
6 regular license shall be issued for a period of one year.

7 D. Each license shall state in general terms the kind of child
8 welfare service the licensee is authorized to undertake, the number of
9 children that can be received if the licensee is a private agency, their
10 ages and sex, and, if authorized to place and supervise children in foster
11 homes, the geographical area the agency is equipped to serve.

12 E. Every license shall expire one year from the date of issuance,
13 and may be renewed annually on application of the agency, except that
14 provisional licenses may be issued for not more than six months from the
15 date of issuance and may not be renewed.

16 F. FINANCIAL STATEMENTS THAT ARE PREPARED BY A CHILD WELFARE AGENCY
17 AS PART OF THE LICENSING PROCESS PURSUANT TO THIS SECTION ARE PUBLIC
18 RECORDS AND ARE SUBJECT TO DISCLOSURE PURSUANT TO SECTION 39-121.01.

19 Sec. 3. Section 8-509, Arizona Revised Statutes, is amended to
20 read:

21 8-509. Licensing of foster homes; fingerprint waiver;
22 restricted license; renewal of license; provisional
23 license; exemption from licensure; immunization
24 requirements; administration of medication; policies
25 and procedures; definition

26 A. The department shall license and certify foster homes. Licenses
27 are valid for a period of two years.

28 B. The department shall not issue a license without satisfactory
29 proof that the foster parent or parents have completed six actual hours of
30 approved initial foster parent training as set forth in section 8-503 and
31 that each foster parent and each other adult member of the household has a
32 valid fingerprint clearance card issued pursuant to section 41-1758.07.
33 The foster parent and each other adult member of the household must
34 certify on forms that are provided by the department and that are
35 notarized whether the foster parent or other adult member of the household
36 is awaiting trial on or has ever been convicted of any of the criminal
37 offenses listed in section 41-1758.07, subsections B and C in this state
38 or similar offenses in another state or jurisdiction.

39 C. A kinship foster care parent shall apply for a fingerprint
40 clearance card pursuant to section 41-1758.07. In its discretion and for
41 good cause, the department may waive the requirement for a kinship foster
42 care parent to obtain a fingerprint clearance card. In evaluating whether
43 good cause exists, the department shall apply the criteria prescribed in
44 section 41-1758.07, subsections B and C. If the department waives the
45 requirement, the department shall issue to the kinship foster care parent

1 a restricted license that applies only to the children placed with the
2 kinship foster care parent for kinship foster care.

3 D. The department shall not renew a license without satisfactory
4 proof that the foster parent or parents have completed twelve actual hours
5 of approved ongoing foster parent training during the two-year period of
6 licensure as set forth in section 8-503.

7 E. If the department determines that completing the training
8 required in subsections B and D of this section would be a hardship to the
9 foster parent or parents, the department may issue a provisional license
10 for a period not to exceed six months. A provisional license may not be
11 renewed.

12 F. Child welfare agencies that submit foster homes for licensing
13 shall conduct an investigation of the foster home pursuant to licensing
14 rules of the department. The department shall conduct investigations of
15 all other foster homes. If the foster home meets all requirements set by
16 the department, the agency shall submit an application stating the foster
17 home's qualifications to the department. The agency may also recommend
18 the types of licensing and certification to be granted to the foster home.

19 G. The department shall accept an adoptive home certification study
20 as a licensing home study if the study has been updated within the past
21 three months to include the information necessary to determine whether the
22 home meets foster care licensing standards.

23 H. This section does not apply if the child is placed in a home by
24 a means other than by court order and if the home does not receive
25 compensation from this state or any political subdivision of this state.

26 I. The department may not prohibit a person operating a licensed
27 foster home from applying for or receiving compensation as a foster home
28 parent due to employment with this state.

29 J. The department shall not require a foster parent to immunize the
30 foster parent's natural or adoptive children as a condition of foster home
31 licensure.

32 K. A licensee may modify the renewal date of a license issued
33 pursuant to this section by submitting an application for modification of
34 renewal date with the department on a form prescribed by the department.
35 The licensee must specify the new month of renewal on the application.
36 The modified renewal date must be before, but not more than six months
37 earlier than, the existing renewal date.

38 L. The foster care review board shall review the cases of children
39 placed by the department in foster homes licensed pursuant to this section
40 as required by section 8-515.03.

41 M. IF A GROUP FOSTER HOME IS LICENSED PURSUANT TO THIS SECTION AND
42 WILL BE ADMINISTERING MEDICATION TO A FOSTER CHILD WHO WILL BE PLACED IN
43 THE GROUP FOSTER HOME, THE GROUP FOSTER HOME SHALL DEVELOP POLICIES AND
44 PROCEDURES THAT IDENTIFY HOW THE GROUP FOSTER HOME WILL MANAGE
45 ADMINISTERING MEDICATION TO A FOSTER CHILD. THE POLICIES AND PROCEDURES
46 SHALL INCLUDE ALL OF THE FOLLOWING:

1 1. HOW THE GROUP FOSTER HOME WILL PROVIDE A FOSTER CHILD WITH
2 QUALIFIED HEALTH CARE ON A TWENTY-FOUR HOURS A DAY, SEVEN DAYS A WEEK
3 SCHEDULE.

4 2. THE GROUP FOSTER HOME'S PROCESS FOR ADMINISTERING MEDICATION TO
5 A FOSTER CHILD.

6 3. THE QUALIFICATIONS OF STAFF MEMBERS OF THE GROUP FOSTER HOME WHO
7 WILL BE ADMINISTERING MEDICATION TO A FOSTER CHILD.

8 4. THE QUALIFICATIONS OF STAFF MEMBERS OF THE GROUP FOSTER HOME WHO
9 WILL BE SUPERVISING A FOSTER CHILD'S SELF-ADMINISTRATION OF MEDICATION.

10 5. THE SUPERVISION, PROCESS AND DOCUMENTATION OF A FOSTER CHILD'S
11 SELF-ADMINISTRATION OF MEDICATION.

12 6. THE DOCUMENTATION PROCESS FOR THE ADMINISTRATION OF MEDICATION,
13 MEDICATION ERRORS AND DRUG REACTIONS.

14 7. THE DOCUMENTATION AND PROCESS OF NOTIFICATION TO A FOSTER
15 CHILD'S HEALTH CARE PROVIDER OF A MEDICATION ADMINISTRATION ERROR OR DRUG
16 REACTION.

17 8. THE PROCEDURES FOR CONTACTING LAW ENFORCEMENT, A HEALTH CARE
18 PROVIDER OR A MEDICAL PROFESSIONAL WHEN A FOSTER CHILD'S REFUSAL TO TAKE
19 MEDICATION PRESCRIBED TO THE FOSTER CHILD ENDANGERS THE FOSTER CHILD'S OR
20 ANOTHER'S HEALTH AND SAFETY AND THE PROCEDURES FOR DOCUMENTING THE FOSTER
21 CHILD'S REFUSAL TO TAKE MEDICATION PRESCRIBED TO THE FOSTER CHILD.

22 N. THE DEPARTMENT MAY REQUIRE A GROUP FOSTER HOME TO EMPLOY
23 ADDITIONAL STAFF WHEN A MEDICALLY COMPLEX CHILD IS PLACED IN THE CARE OF
24 THE GROUP FOSTER HOME. THE DEPARTMENT MAY REQUIRE A GROUP FOSTER HOME TO
25 MODIFY THE GROUP FOSTER HOME'S POLICIES AND PROCEDURES REQUIRED BY
26 SUBSECTION M OF THIS SECTION TO ACCOMMODATE THE NEEDS OF A MEDICALLY
27 COMPLEX CHILD.

28 O. FOR THE PURPOSES OF THIS SECTION, "MEDICALLY COMPLEX CHILD"
29 MEANS A CHILD WHO THE DEPARTMENT HAS DETERMINED HAS OR IS AT RISK FOR A
30 CHRONIC PHYSICAL OR DEVELOPMENTAL CONDITION AND WHO REQUIRES
31 HEALTH-RELATED SERVICES BEYOND THE HEALTH-RELATED SERVICES THAT ARE
32 REQUIRED BY A CHILD IN GENERAL.

33 Sec. 4. Title 8, chapter 4, article 4, Arizona Revised Statutes, is
34 amended by adding section 8-509.02, to read:

35 8-509.02. Licensed foster homes; minimum number required;
36 annual report; applicability; definition

37 A. THE DEPARTMENT SHALL ESTABLISH THE MINIMUM NUMBER OF LICENSED
38 FOSTER HOMES THAT ARE REQUIRED THROUGHOUT THIS STATE AND WITHIN REGIONS
39 THAT ARE DESIGNATED BY THE DEPARTMENT. THE MINIMUM NUMBER OF AVAILABLE
40 LICENSED FOSTER HOMES SHALL BE SUFFICIENT TO PLACE A CHILD IN A LICENSED
41 FOSTER HOME THAT BEST MEETS THE NEEDS OF THE FOSTER CHILD. THE DEPARTMENT
42 SHALL DETERMINE THE MINIMUM NUMBER OF LICENSED FOSTER HOMES NEEDED. THE
43 DEPARTMENT MAY USE AN ESTIMATOR TOOL TO CALCULATE THE MINIMUM NUMBER OF
44 LICENSED FOSTER HOMES IN EACH DESIGNATED REGION. THE DEPARTMENT SHALL
45 ESTIMATE ANNUALLY THE MINIMUM NUMBER OF LICENSED FOSTER HOMES, WHICH SHALL
46 BE EFFECTIVE AT THE BEGINNING OF EACH FISCAL YEAR. THE DEPARTMENT MAY NOT

1 REDUCE THE MINIMUM NUMBER OF LICENSED FOSTER HOMES UNTIL THE ESTIMATE FOR
2 THE NEXT FISCAL YEAR.

3 B. THE DEPARTMENT SHALL CATEGORIZE THE MINIMUM NUMBER OF LICENSED
4 FOSTER HOMES NEEDED PURSUANT TO SUBSECTION A OF THIS SECTION INTO
5 CATEGORIES OF NEED, INCLUDING THE FOLLOWING CATEGORIES OF FOSTER CHILDREN
6 WHO:

- 7 1. HAVE DEVELOPMENTAL DISABILITIES.
- 8 2. HAVE BEHAVIORAL OR EMOTIONAL NEEDS.
- 9 3. HAVE MEDICALLY COMPLEX CONDITIONS.
- 10 4. ARE OVER THIRTEEN YEARS OF AGE.
- 11 5. ARE PART OF A SIBLING GROUP OF THREE OR MORE FOSTER CHILDREN.

12 C. THE DEPARTMENT, IN CONSULTATION WITH NATIONAL EXPERTS, SHALL
13 DESIGN AND BEGIN A CAMPAIGN TO RECRUIT AT LEAST THE MINIMUM NUMBER OF
14 LICENSED FOSTER HOMES REQUIRED IN EACH DESIGNATED REGION. THE DEPARTMENT
15 SHALL REPORT PROGRESS TOWARD MAINTAINING OR EXCEEDING THE MINIMUM NUMBER
16 OF LICENSED FOSTER HOMES PURSUANT TO SECTION 8-526.

17 D. ON OR BEFORE DECEMBER 31 OF EACH YEAR, THE DEPARTMENT SHALL
18 REPORT TO THE GOVERNOR, THE PRESIDENT OF THE SENATE, THE SPEAKER OF THE
19 HOUSE OF REPRESENTATIVES AND THE JOINT LEGISLATIVE OVERSIGHT COMMITTEE ON
20 THE DEPARTMENT OF CHILD SAFETY. THE REPORT MUST CONTAIN THE FOLLOWING:

- 21 1. PROGRESS TOWARD ACHIEVING THE MINIMUM NUMBER OF LICENSED FOSTER
22 HOMES.
- 23 2. OBSTACLES PREVENTING THE DEPARTMENT FROM OBTAINING THE MINIMUM
24 NUMBER OF LICENSED FOSTER HOMES.
- 25 3. SOLUTIONS FOR RECRUITING AND MAINTAINING THE MINIMUM NUMBER OF
26 LICENSED FOSTER HOMES.

27 E. THIS SECTION DOES NOT LIMIT THE DEPARTMENT'S ABILITY TO PLACE A
28 CHILD IN A KINSHIP FOSTER CARE SETTING.

29 F. FOR THE PURPOSES OF THIS SECTION, "MEDICALLY COMPLEX CONDITION"
30 MEANS A CHRONIC PHYSICAL OR DEVELOPMENTAL CONDITION THAT THE DEPARTMENT
31 HAS DETERMINED A CHILD HAS OR IS AT RISK OF HAVING AND THAT REQUIRES
32 HEALTH-RELATED SERVICES BEYOND THE HEALTH-RELATED SERVICES THAT ARE
33 REQUIRED BY A CHILD IN GENERAL.

34 Sec. 5. Section 8-526, Arizona Revised Statutes, is amended to
35 read:

36 8-526. Child welfare; reporting requirements; definitions

37 A. The department shall make available program and outcomes data on
38 its website as provided in this section, in a format that can be
39 downloaded and that is conducive to analysis.

40 B. The department shall make available the following information on
41 a semiannual basis by September 30 for the period ending the prior June 30
42 and by March 31 for the period ending the prior December 31:

- 43 1. Success in meeting training requirements.
- 44 2. Caseloads for child safety workers.
- 45 3. The number of new reports and reports that have been closed.
- 46 4. The number of case-carrying caseworkers in each region.

- 1 5. The number of investigations by region.
- 2 6. The number of children being served in-home and the number of
- 3 children being served out-of-home by each region.
- 4 7. The total number of reports received, by major category and by
- 5 priority.
- 6 8. The number of reports not responded to, by priority, by county
- 7 and statewide.
- 8 9. The number of reports assigned for investigation by priority and
- 9 by major category, by county and statewide for the current and previous
- 10 reporting periods.
- 11 10. The number of reports for investigations completed by priority
- 12 and by major category, by county and statewide for the current and
- 13 previous reporting periods and as categorized by investigations that
- 14 resulted in:
 - 15 (a) A substantiated report.
 - 16 (b) A report currently proposed for substantiation.
 - 17 (c) An unsubstantiated report.
- 18 11. The number of reports assigned for investigation that remain
- 19 open for investigation by priority and by major category, by county and
- 20 statewide for the current and previous reporting periods.
- 21 12. Of the number of children reported to the department, the
- 22 percentage of children placed in out-of-home care by county and statewide.
- 23 13. The number of newborn infants delivered to safe haven providers
- 24 pursuant to section 13-3623.01.
- 25 14. The number of children entering out-of-home care by county
- 26 during the reporting period, and the number and percentage of the children
- 27 entering out-of-home care by county during the reporting period who are
- 28 voluntary placements for children under eighteen years of age.
- 29 15. The number and percentage of children removed during the
- 30 reporting period, by county and statewide, who had been in out-of-home
- 31 care:
 - 32 (a) Within the previous twelve months.
 - 33 (b) Within the previous twenty-four months, excluding the children
 - 34 included in subdivision (a) of this paragraph.
- 35 16. The number and percentage of children who have remained in a
- 36 shelter or receiving home for more than twenty-one consecutive days, by
- 37 the child's age group.
- 38 17. The total number of licensed foster homes, the number of
- 39 licensed foster homes considered kinship homes, the number of licensed
- 40 community foster homes and the number of available spaces in licensed
- 41 community foster homes.
- 42 18. THE MINIMUM NUMBER OF LICENSED FOSTER HOMES THAT ARE REQUIRED
- 43 STATEWIDE, BY CATEGORY AND BY DESIGNATED REGION, AND WHAT PERCENTAGE OF
- 44 THE MINIMUM NUMBER OF LICENSED FOSTER HOMES IS REPRESENTED BY THE CURRENT
- 45 NUMBER OF LICENSED FOSTER HOMES PURSUANT TO SECTION 8-509.02.

1 ~~18.~~ 19. The number of licensed foster homes that receive the
2 required visitation by licensing agency representatives pursuant to
3 section 8-516.

4 ~~19.~~ 20. The number of children placed in the care, custody and
5 control of the department at the end of the reporting period and the
6 number of these children who receive the required visitation by case
7 managers pursuant to section 8-516.

8 ~~20.~~ 21. The number and percentage of children who are in the care,
9 custody and control of the department at the end of the reporting period
10 and who are in out-of-home placement and as categorized by:

- 11 (a) Age.
- 12 (b) Ethnicity.
- 13 (c) Case plan goal.
- 14 (d) Type of out-of-home placement, categorized by age.
- 15 (e) Length of time in out-of-home placement of less than thirty
16 days, thirty-one days to twelve consecutive months, twelve to twenty-four
17 consecutive months and more than twenty-four consecutive months, including
18 the median, average and range of the number of out-of-home placements.
- 19 (f) Primary legal status including voluntary placement for a child
20 under eighteen years of age, temporary custody, adjudicated dependent,
21 free for adoption, voluntary placement for a child over eighteen years of
22 age, dually adjudicated or any other legal status.

23 22. THE NUMBER AND PERCENTAGE OF CHILDREN WHO ARE IN THE CARE,
24 CUSTODY AND CONTROL OF THE DEPARTMENT AT THE END OF THE REPORTING PERIOD
25 AND WHO ARE IN A CONGREGATE CARE PLACEMENT, CATEGORIZED BY:

- 26 (a) AGE.
- 27 (b) ETHNICITY.
- 28 (c) SEX.
- 29 (d) TYPE OF CONGREGATE CARE PLACEMENT.
- 30 (e) REASON FOR CONGREGATE CARE PLACEMENT.
- 31 (f) LENGTH OF TIME IN CONGREGATE CARE PLACEMENT OF LESS THAN THIRTY
32 DAYS, THIRTY-ONE DAYS TO TWELVE CONSECUTIVE MONTHS, TWELVE TO TWENTY-FOUR
33 CONSECUTIVE MONTHS AND MORE THAN TWENTY-FOUR CONSECUTIVE MONTHS, INCLUDING
34 THE MEDIAN, AVERAGE AND RANGE OF THE NUMBER OF CONGREGATE CARE PLACEMENT.
- 35 (g) WHETHER THE CHILD HAS A CONGREGATE CARE PLACEMENT PLAN PURSUANT
36 TO SECTION 8-509.02.
- 37 (h) CHILDREN WHO HAD TWO OR MORE CONGREGATE CARE PLACEMENTS WHILE
38 IN THE CARE, CUSTODY AND CONTROL OF THE DEPARTMENT.

39 ~~21.~~ 23. If the case plan is to return the child to the parent, the
40 percentage of parents who receive the required contact by case managers.

41 ~~22.~~ 24. The number and percentage of children who left the custody
42 of the department during the reporting period by reason for leaving care
43 and as categorized by:

- 44 (a) Age.
- 45 (b) Ethnicity.
- 46 (c) Number of placements.

- 1 (d) Average length of time in care.
- 2 ~~23.~~ 25. The number of children with a petition for termination of
- 3 parental rights granted and not granted during the reporting period by
- 4 county and statewide.
- 5 ~~24.~~ 26. The number and percentage of children with a case plan
- 6 goal of adoption and who are not placed in an adoptive home at the end of
- 7 the reporting period and as categorized by:
- 8 (a) Age.
- 9 (b) Ethnicity.
- 10 (c) Average length of time in care.
- 11 (d) Legal status.
- 12 ~~25.~~ 27. The number and percentage of children with a case plan
- 13 goal of adoption and who are placed in an adoptive home at the end of the
- 14 reporting period and as categorized by:
- 15 (a) Age.
- 16 (b) Ethnicity.
- 17 (c) Average length of time in out-of-home placement.
- 18 (d) Length of time from change of case plan goal to adoptive
- 19 placement.
- 20 (e) Legal status.
- 21 (f) Marital status and relationship of the adoptive parent or
- 22 parents to the child.
- 23 ~~26.~~ 28. The number of children whose adoptive placement was
- 24 disrupted during the reporting period and as categorized by:
- 25 (a) Age.
- 26 (b) Ethnicity.
- 27 (c) Cause of the disruption.
- 28 (d) Marital status and relationship of the adoptive parent or
- 29 parents to the child.
- 30 ~~27.~~ 29. The number of children whose adoptions were finalized
- 31 during the reporting period and as categorized by:
- 32 (a) Average length of time in out-of-home placement before adoptive
- 33 placement.
- 34 (b) Average length of time in adoptive placement before the final
- 35 order of adoption.
- 36 (c) Marital status and relationship of the adoptive parent or
- 37 parents to the child.
- 38 ~~28.~~ 30. The number of children who died while in the custody of
- 39 the department by the county where the death occurred and as categorized
- 40 by:
- 41 (a) The cause of death.
- 42 (b) The type of out-of-home placement at the time of death.
- 43 ~~29.~~ 31. The number of children with an open or active child safety
- 44 services case who died due to abuse, categorized by the person or persons
- 45 who had care or custody of the child at the time of the child's death as
- 46 follows:

1 (a) Biological parent or parents.
2 (b) Other family member.
3 (c) Adoptive parent or parents.
4 (d) Foster care parent or parents.
5 (e) Other out-of-home care provider.
6 ~~30.~~ 32. The number of children with an open or active child safety
7 services case who died due to abuse allegedly caused by an adult household
8 member who is not listed pursuant to paragraph 29 of this subsection.
9 ~~31.~~ 33. The ratio of supervisors to specialists by region.
10 ~~32.~~ 34. The source and use of federal monies in the department.
11 ~~33.~~ 35. The source and use of state monies in the department.
12 ~~34.~~ 36. Information regarding the educational placement of foster
13 children pursuant to section 8-530.04, including:
14 (a) The number of best interest educational placement
15 determinations conducted.
16 (b) The number of children who entered foster care and who did not
17 receive a best interest educational placement determination.
18 (c) The final outcome of each best interest educational placement
19 determination.
20 C. Based on the data presented in each reporting period, the
21 department, in as brief a format as possible, shall describe three to five
22 major challenges the department faces in achieving the goal of safe,
23 permanent homes for abused and neglected children.
24 D. Within three months after the end of each reporting period the
25 department shall submit a written report in as brief a format as possible
26 to the governor, the president of the senate, the speaker of the house of
27 representatives, the chairperson of the house human services committee,
28 the chairperson of the senate family services committee, or their
29 successor committees, and the cochairpersons of the joint legislative
30 committee on children and family services. The department shall submit a
31 copy of the report to the secretary of state.
32 E. The department shall make available the following information on
33 an annual basis:
34 1. The percentage of substantiations upheld by the office of
35 administrative hearings.
36 2. The demographics and number of children placed with relative
37 caregivers.
38 3. The demographics of kinship foster caregivers.
39 4. The number of relative children per kinship foster care family.
40 5. The department's success at maintaining kinship foster care
41 placements.
42 6. The type and cost of services provided to kinship foster care
43 families by licensed and unlicensed caregivers.
44 7. The cost of services provided to kinship foster caregivers
45 compared to the cost of out-of-home placements.

1 8. The number of children and families, by district, receiving
2 services through the housing assistance program during the previous fiscal
3 year.

4 9. The total amount of money spent on the housing assistance
5 program by region.

6 10. A programmatic and fiscal evaluation of the effectiveness of
7 the housing assistance program that includes the amount of foster care
8 expenditures avoided.

9 11. The number of children in the independent living program by
10 age, county and education status.

11 12. Beginning with the 2022 data period, the statewide number of
12 children in substantiated reports for investigation that are received in
13 the twelve months before the current annual reporting period and that
14 allege neglect as defined in section 8-201, paragraph 25, subdivision (c)
15 and the number of children in these reports who were:

16 (a) Removed within thirty days after the date the report is
17 received.

18 (b) Removed within six months after the date the report is
19 received.

20 F. The department shall make available the following information on
21 a monthly basis:

22 1. Operations and workforce data measures that include:

23 (a) Staff vacancy levels by position category and turnover.

24 (b) New hires, separations, turnover and voluntary attrition
25 delineated by field position, safety specialists, hotline staff,
26 caseworkers in training, program, program supervisors, case aides, office
27 of child welfare investigations staff and administrative staff.

28 (c) Hotline performance.

29 (d) Reports received by maltreatment type, priority and response
30 time.

31 (e) Inactive cases by disposition.

32 (f) Open reports.

33 (g) Entries and exits from the foster care population by exit type.

34 (h) Support service provision.

35 (i) Demographics, placement types and case plan goals of the foster
36 care population.

37 (j) The number and type of licensed foster homes that leave the
38 foster care system and the reason for the exit.

39 2. Financial data that compares total expenditures each month and
40 year-to-date as compared to prior year totals, appropriation totals and
41 projected expenditure totals, delineated by appropriation and appropriated
42 fund source.

43 G. The department shall make the information required pursuant to
44 subsection F of this section available within sixty days after the end of
45 the applicable reporting period.

1 H. The department shall notify the president of the senate, the
2 speaker of the house of representatives, the director of the joint
3 legislative budget committee and the director of the governor's office of
4 strategic planning and budgeting when an update is made on information
5 that must be made available pursuant to subsection B or F of this section.

6 I. FOR THE PURPOSES OF THIS SECTION, "CONGREGATE CARE":

7 1. MEANS A CHILD WELFARE AGENCY THAT IS LICENSED BY THE DEPARTMENT
8 TO PROVIDE TWENTY-FOUR HOUR CARE FOR MORE THAN ONE CHILD WHO IS IN THE
9 CARE, CUSTODY AND CONTROL OF THE DEPARTMENT.

10 2. DOES NOT INCLUDE A LICENSED FOSTER HOME OR KINSHIP CARE
11 PLACEMENT.

12 Sec. 6. Title 8, chapter 4, article 4, Arizona Revised Statutes, is
13 amended by adding section 8-530.08, to read:

14 8-530.08. Congregate care; assessment; plans; definitions

15 A. WITHIN THIRTY DAYS AFTER PLACING A CHILD IN A CONGREGATE CARE
16 SETTING, THE DEPARTMENT SHALL DO THE FOLLOWING:

17 1. WORK WITH THE CHILD, IF DEVELOPMENTALLY APPROPRIATE, THE CHILD'S
18 ATTORNEY AND THE CHILD'S FAMILY AND SERVICE TEAM TO DO BOTH OF THE
19 FOLLOWING:

20 (a) ESTABLISH A PLAN TO PLACE A CHILD IN AN APPROPRIATE FAMILY-LIKE
21 SETTING. THE PLAN SHALL BE SPECIFIC TO THE CHILD AND, IF APPLICABLE, THE
22 CHILD'S SIBLINGS AND THE CHILD'S MINOR PARENT OR PARENTS. THE PLAN SHALL
23 INCLUDE STEPS TO IDENTIFY AND RECRUIT AN APPROPRIATE FAMILY-LIKE SETTING
24 FOR THE CHILD. IN DEVELOPING THE PLAN, THE DEPARTMENT SHALL IDENTIFY AND
25 CONSIDER THE PLACEMENT PREFERENCES OF THE CHILD.

26 (b) AS PART OF THE PLAN ESTABLISHED PURSUANT TO SUBDIVISION (a) OF
27 THIS PARAGRAPH, DEVELOP A CHILD-SPECIFIC CONGREGATE CARE IMPLEMENTATION
28 PLAN TO ENSURE THAT THE CHILD'S NEEDS ARE APPROPRIATELY MET WHILE THE
29 CHILD IS PLACED IN A CONGREGATE CARE SETTING.

30 2. CONDUCT AN ON-SITE VISIT OF A GROUP HOME WITHIN FORTY-EIGHT
31 HOURS AFTER PLACING A MEDICALLY COMPLEX CHILD IN A GROUP HOME TO ENSURE
32 THAT ALL STAFF MEMBERS WHO WILL HAVE CONTACT OR CARE RESPONSIBILITIES FOR
33 A MEDICALLY COMPLEX CHILD HAVE PROPER TRAINING.

34 3. DOCUMENT BOTH OF THE FOLLOWING IN THE CHILD'S CASE PLAN:

35 (a) THE PLAN FOR PLACEMENT OF A CHILD IN AN APPROPRIATE FAMILY-LIKE
36 SETTING AND THE CHILD-SPECIFIC CONGREGATE CARE IMPLEMENTATION PLAN
37 PURSUANT TO PARAGRAPH 1, SUBDIVISIONS (a) AND (b) OF THIS SUBSECTION.

38 (b) THE RESULTS AND FINDINGS OF THE GROUP HOME ON-SITE SURVEY, IF
39 APPLICABLE, PURSUANT TO PARAGRAPH 2 OF THIS SUBSECTION.

40 B. FOR THE PURPOSE OF THIS SECTION:

41 1. "FAMILY AND SERVICE TEAM" INCLUDES ANY OF THE FOLLOWING:

42 (a) COACHES.

43 (b) COURT APPOINTED SPECIAL ADVOCATES.

44 (c) DEPARTMENT EMPLOYEES.

45 (d) FORMER FOSTER CAREGIVERS.

46 (e) MENTORS.

1 (f) TEACHERS.

2 (g) ANY OTHER INDIVIDUALS WHO HAVE KNOWLEDGE OF THE CHILD.

3 2. "MEDICALLY COMPLEX CHILD" MEANS A CHILD WHO THE DEPARTMENT HAS
4 DETERMINED HAS OR IS AT RISK FOR A CHRONIC PHYSICAL OR DEVELOPMENTAL
5 CONDITION AND WHO REQUIRES HEALTH-RELATED SERVICES BEYOND THE
6 HEALTH-RELATED SERVICES THAT ARE REQUIRED BY A CHILD IN GENERAL.

7 <<Sec. 7. Section 36-425.06, Arizona Revised Statutes, is amended
8 to read:

9 ~~36-425.06. Secure behavioral health residential facilities;~~
10 ~~placement of foster children; license; annual~~
11 ~~report; definition~~

12 A. The department shall license secure behavioral health
13 residential facilities to provide secure twenty-four-hour on-site
14 supportive treatment and supervision by staff with behavioral health
15 training for persons who have been determined to be seriously mentally
16 ill, who are chronically resistant to treatment for a mental disorder and
17 who are placed in the facility pursuant to a court order issued pursuant
18 to section 36-550.09 or who have been committed pursuant to a court order
19 issued pursuant to section 13-4521. A secure behavioral health
20 residential facility may provide services only to persons placed in or
21 committed to the facility pursuant to a court order issued pursuant to
22 section 36-550.09 or 13-4521 and may not provide services to any other
23 persons on that facility's premises. A secure behavioral health
24 residential facility may not have more than sixteen beds.

25 B. IF A FOSTER CHILD WHO IS IN THE CARE, CUSTODY AND CONTROL OF THE
26 DEPARTMENT OF CHILD SAFETY IS APPROVED FOR PLACEMENT IN A SECURE
27 BEHAVIORAL HEALTH RESIDENTIAL FACILITY, THE SECURE BEHAVIORAL HEALTH
28 RESIDENTIAL FACILITY MAY NOT DENY OR REFUSE PLACEMENT OF THE FOSTER CHILD,
29 SUBJECT TO THE AVAILABILITY OF A BED IN THE SECURE BEHAVIORAL HEALTH
30 RESIDENTIAL FACILITY.

31 B. C. On or before September 1 of each year, the director of the
32 Arizona health care cost containment system administration shall submit a
33 report to the governor, the legislature and the supreme court that
34 includes all of the following information:

35 1. An accounting of where the monies appropriated to the Arizona
36 health care cost containment system administration for secure behavioral
37 health residential facilities were used during the previous year.

38 2. The number of available beds in each secure behavioral health
39 residential facility.

40 C. D. For the purposes of this section, "secure" means premises
41 that limit a patient's egress in the least restrictive manner consistent
42 with the patient's court-ordered treatment plan.

1 <<Sec. 7. Title 36, chapter 4, article 1, Arizona Revised Statutes,
2 is amended by adding section 36-418.01, to read:

3 36-418.01. Dependent children; placement

4 [IF A FOSTER CHILD WHO IS IN THE CARE, CUSTODY AND CONTROL OF THE
5 DEPARTMENT OF CHILD SAFETY IS APPROVED FOR PLACEMENT IN A TREATMENT
6 FACILITY OR PROGRAM LICENSED PURSUANT TO THIS CHAPTER, THE TREATMENT
7 FACILITY'S OR PROGRAM MAY NOT DENY OR REFUSE PLACEMENT OF THE FOSTER CHILD
8 IF THE FOSTER CHILD'S BEHAVIORAL NEEDS ARE WITHIN THE TREATMENT FACILITY
9 OR PROGRAM'S SCOPE OF SERVICES, SUBJECT TO THE AVAILABILITY OF A BED OR
10 SPACE IN THE TREATMENT FACILITY OR PROGRAM.]>>

11 Sec. 8. Section 36-550.05, Arizona Revised Statutes, is amended to
12 read:

13 36-550.05. Community mental health residential treatment
14 services and facilities; prevention services;
15 placement of foster children

16 A. A residential or day treatment facility shall be designed to
17 provide a homelike environment without sacrificing safety or care.
18 Facilities shall be relatively small, with preferably fifteen or fewer
19 beds.

20 B. Individual programs of a community residential treatment system
21 shall include the following:

22 1. A short-term crisis residential treatment program. This program
23 is an alternative to hospitalization for persons in an acute episode or
24 situational crisis requiring temporary removal from the home from one to
25 fourteen days. The program shall provide admission capability twenty-four
26 hours a day, seven days a week in the least restrictive setting possible
27 to reduce the crisis and stabilize the client. Services shall include
28 direct work with the client's family, linkage with prevocational and
29 vocational programs, assistance in applying for income, medical and other
30 benefits and treatment referral.

31 2. A residential treatment program. This program shall provide a
32 full-day treatment program for persons who may require intensive support
33 for a maximum of two years. The program shall provide rehabilitation for
34 chronic clients who need long-term support to develop independence and for
35 clients who live marginally in the community with little or no support and
36 periodically need rehospitalization. Services shall include intensive
37 diagnostic evaluation, a full-day treatment program with prevocational,
38 vocational and special education services, outreach to social services and
39 counseling to assist the client in developing skills to move toward a less
40 structured setting.

41 3. A secure behavioral health residential facility program. This
42 program shall provide secure twenty-four-hour on-site supportive treatment
43 and supervision by staff with behavioral health training only to persons
44 who have been determined to be seriously mentally ill and chronically
45 resistant to treatment pursuant to a court order issued pursuant to
46 section 36-550.09.

1 4. A semisupervised, structured group living program. This program
2 is a cooperative arrangement in which three to five persons live together
3 in apartments or houses as a transition to independent living. The
4 program shall provide an increase in the level of the client's
5 responsibility for the functioning of the household and an increase in the
6 client's involvement in daytime activities outside the house or apartment
7 that are relevant to achieving personal goals and greater
8 self-sufficiency. Services provided by the program shall include
9 counseling and client self-assessment, the development of support systems
10 in the community, a day program to encourage participation in the larger
11 community, activities to encourage socialization and use of general
12 community resources, rent subsidy and direct linkages to staff support in
13 emergencies.

14 5. A socialization or day care/partial care program. This program
15 shall provide regular daytime, evening and weekend activities for persons
16 who require long-term structured support but who do not receive such
17 services in their residential setting. The program shall provide support
18 for persons who only need regular socialization opportunities and referral
19 to social services or treatment services. The program shall provide
20 opportunities to develop skills to achieve more independent functioning
21 and means to reduce social isolation. Services shall include outings,
22 recreational activities, cultural events and contact with community
23 resources, such as prevocational counseling and life skills training.

24 C. Individual and family support prevention services shall provide
25 assistance to the seriously mentally ill residing in their own home. Such
26 prevention services shall include transportation, recreation,
27 socialization, counseling, respite, companion services and in-home
28 training.

29 D. Each individual program shall use appropriate multidisciplinary
30 staff to meet the diagnostic and treatment needs of the seriously mentally
31 ill and shall encourage use of paraprofessionals.

32 E. Each program shall have an evaluation method to assess the
33 effectiveness of the programs and shall include the following criteria:

- 34 1. Prevalence and incidence of the target behavioral problem.
- 35 2. Cost effectiveness.
- 36 3. Potential for implementing the program using available monies
37 and resources through cost-sharing.
- 38 4. Measurability of the benefits.
- 39 5. Effectiveness of intervention strategy.
- 40 6. Availability of resources and personnel.

41 F. Each community residential treatment system shall be designed to
42 provide:

- 43 1. Coordination between each program and other treatment systems in
44 the community.
- 45 2. A case management system to enhance cooperation of elements
46 within the system and provide each client with appropriate services.

1 3. Client movement to the most appropriate and least restrictive
2 service.

3 4. Direct referral of clients for specific programs that does not
4 require the client to pass through the entire system to reach the most
5 appropriate service.

6 G. IF A FOSTER CHILD WHO IS IN THE CARE, CUSTODY AND CONTROL OF THE
7 DEPARTMENT OF CHILD SAFETY IS APPROVED FOR PLACEMENT IN A TREATMENT
8 FACILITY OR PROGRAM PRESCRIBED BY THIS SECTION, THE TREATMENT FACILITY OR
9 PROGRAM MAY NOT DENY OR REFUSE PLACEMENT OF THE FOSTER CHILD [IF THE
10 FOSTER CHILD'S BEHAVIORAL HEALTH NEEDS ARE WITHIN THE TREATMENT FACILITY'S
11 OR PROGRAM'S SCOPE OF SERVICES], SUBJECT TO THE AVAILABILITY OF A BED OR
12 SPACE IN THE TREATMENT FACILITY OR PROGRAM.

13 Enroll and engross to conform

14 Amend title to conform

And, as so amended, it do pass

SELINA BLISS
CHAIRMAN

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