
SUBSTITUTE HOUSE BILL 2985

State of Washington

59th Legislature

2006 Regular Session

By House Committee on Children & Family Services (originally sponsored by Representatives Schual-Berke, Clibborn, Appleton, Moeller, Green, Cody, Morrell, Walsh, McIntire, Kagi, Kenney, Hasegawa and Simpson)

READ FIRST TIME 02/02/06.

1 AN ACT Relating to creating a foster care health unit in the
2 department of social and health services; amending RCW 74.13.031;
3 adding a new section to chapter 13.34 RCW; adding a new section to
4 chapter 74.13 RCW; and creating a new section.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

6 NEW SECTION. **Sec. 1.** The legislature recognizes that foster
7 children have enhanced health care needs and that it is necessary to
8 improve the system of providing health care for foster children. The
9 legislature further recognizes the importance of meeting the mental
10 health needs of children in foster care, as well as their medical and
11 dental health care needs. The legislature finds that there must be
12 greater coordination and integration of systems, in particular
13 coordination between children's administration and the health and
14 recovery services administration as well as other agencies that provide
15 or pay for health services for foster youth, to ensure that the health
16 care needs of children in foster care are met in a timely manner.

17 NEW SECTION. **Sec. 2.** A new section is added to chapter 13.34 RCW
18 to read as follows:

1 Whenever a child is ordered removed from his or her home pursuant
2 to this chapter, the agency charged with his or her care may authorize
3 an evaluation and treatment for the child's routine and necessary
4 medical, dental, or mental health care, and all necessary emergency
5 care.

6 **Sec. 3.** RCW 74.13.031 and 2004 c 183 s 3 are each amended to read
7 as follows:

8 The department shall have the duty to provide child welfare
9 services and shall:

10 (1) Develop, administer, supervise, and monitor a coordinated and
11 comprehensive plan that establishes, aids, and strengthens services for
12 the protection and care of runaway, dependent, or neglected children.

13 (2) Within available resources, recruit an adequate number of
14 prospective adoptive and foster homes, both regular and specialized,
15 i.e. homes for children of ethnic minority, including Indian homes for
16 Indian children, sibling groups, handicapped and emotionally disturbed,
17 teens, pregnant and parenting teens, and annually report to the
18 governor and the legislature concerning the department's success in:
19 (a) Meeting the need for adoptive and foster home placements; (b)
20 reducing the foster parent turnover rate; (c) completing home studies
21 for legally free children; and (d) implementing and operating the
22 passport program required by RCW 74.13.285. The report shall include
23 a section entitled "Foster Home Turn-Over, Causes and Recommendations."

24 (3) Investigate complaints of any recent act or failure to act on
25 the part of a parent or caretaker that results in death, serious
26 physical or emotional harm, or sexual abuse or exploitation, or that
27 presents an imminent risk of serious harm, and on the basis of the
28 findings of such investigation, offer child welfare services in
29 relation to the problem to such parents, legal custodians, or persons
30 serving in loco parentis, and/or bring the situation to the attention
31 of an appropriate court, or another community agency: PROVIDED, That
32 an investigation is not required of nonaccidental injuries which are
33 clearly not the result of a lack of care or supervision by the child's
34 parents, legal custodians, or persons serving in loco parentis. If the
35 investigation reveals that a crime against a child may have been
36 committed, the department shall notify the appropriate law enforcement
37 agency.

1 (4) Offer, on a voluntary basis, family reconciliation services to
2 families who are in conflict.

3 (5) Monitor out-of-home placements, on a timely and routine basis,
4 to assure the safety, well-being, and quality of care being provided is
5 within the scope of the intent of the legislature as defined in RCW
6 74.13.010 and 74.15.010, and annually submit a report measuring the
7 extent to which the department achieved the specified goals to the
8 governor and the legislature.

9 (6) Have authority to accept custody of children from parents and
10 to accept custody of children from juvenile courts, where authorized to
11 do so under law, to provide child welfare services including placement
12 for adoption, to provide for the routine and necessary medical, dental,
13 and mental health care, or necessary emergency care of the children,
14 and to provide for the physical care of such children and make payment
15 of maintenance costs if needed. Except where required by Public Law
16 95-608 (25 U.S.C. Sec. 1915), no private adoption agency which receives
17 children for adoption from the department shall discriminate on the
18 basis of race, creed, or color when considering applications in their
19 placement for adoption.

20 (7) Have authority to provide temporary shelter to children who
21 have run away from home and who are admitted to crisis residential
22 centers.

23 (8) Have authority to purchase care for children; and shall follow
24 in general the policy of using properly approved private agency
25 services for the actual care and supervision of such children insofar
26 as they are available, paying for care of such children as are accepted
27 by the department as eligible for support at reasonable rates
28 established by the department.

29 (9) Establish a children's services advisory committee which shall
30 assist the secretary in the development of a partnership plan for
31 utilizing resources of the public and private sectors, and advise on
32 all matters pertaining to child welfare, licensing of child care
33 agencies, adoption, and services related thereto. At least one member
34 shall represent the adoption community.

35 (10) Have authority to provide continued foster care or group care
36 for individuals from eighteen through twenty years of age to enable
37 them to complete their high school or vocational school program.

1 (11) Refer cases to the division of child support whenever state or
2 federal funds are expended for the care and maintenance of a child,
3 including a child with a developmental disability who is placed as a
4 result of an action under chapter 13.34 RCW, unless the department
5 finds that there is good cause not to pursue collection of child
6 support against the parent or parents of the child.

7 (12) Have authority within funds appropriated for foster care
8 services to purchase care for Indian children who are in the custody of
9 a federally recognized Indian tribe or tribally licensed child-placing
10 agency pursuant to parental consent, tribal court order, or state
11 juvenile court order; and the purchase of such care shall be subject to
12 the same eligibility standards and rates of support applicable to other
13 children for whom the department purchases care.

14 Notwithstanding any other provision of RCW 13.32A.170 through
15 13.32A.200 and 74.13.032 through 74.13.036, or of this section all
16 services to be provided by the department of social and health services
17 under subsections (4), (6), and (7) of this section, subject to the
18 limitations of these subsections, may be provided by any program
19 offering such services funded pursuant to Titles II and III of the
20 federal juvenile justice and delinquency prevention act of 1974.

21 (13) Within amounts appropriated for this specific purpose, provide
22 preventive services to families with children that prevent or shorten
23 the duration of an out-of-home placement.

24 (14) Have authority to provide independent living services to
25 youths, including individuals eighteen through twenty years of age, who
26 are or have been in foster care.

27 NEW SECTION. **Sec. 4.** A new section is added to chapter 74.13 RCW
28 to read as follows:

29 Within existing resources, the department shall establish a foster
30 care health unit within the children's administration.

31 (1) The health unit shall review and provide recommendations to the
32 legislature by September 1, 2006, regarding issues including, but not
33 limited to, the following:

34 (a) Creation of an office within the department to consolidate and
35 coordinate physical, dental, and mental health services provided to
36 children who are in the custody of the department;

1 (b) Alternative payment structures for health care organization.
2 The department may consider managed care as an alternative structure
3 for health care; however, the department may not implement managed care
4 for health care services for children without authorization from the
5 legislature;

6 (c) Improving coordination of health care for children in foster
7 care, including medical, dental, and mental health care;

8 (d) Improving access to health information available to the
9 children's administration for providers of health services for children
10 in foster care, including the use of the child profile as a means to
11 facilitate access to such information;

12 (e) Establishing a medical home for each child placed in foster
13 care to ensure that appropriate, timely, and necessary quality care is
14 available through a coordinated system of care and analyzing how a
15 medical home might be utilized to meet the unique needs of children in
16 foster care. In establishing a medical home, the department shall
17 consider primary care that is accessible, continuous, comprehensive,
18 family centered, coordinated, compassionate, and culturally effective;

19 (f) Examining how existing resources are being utilized to provide
20 health care for foster children and options for improving how the
21 resources are utilized. Particular emphasis shall be placed on the
22 following:

23 (i) Whether the health care services provided to foster children
24 are evidence-based;

25 (ii) Whether resources are duplicative or redundant between
26 agencies or departments in the provision of medical, dental, or mental
27 health services for children; and

28 (iii) Identification of where resources are inadequate to meet the
29 routine and necessary medical, dental, and mental health needs of
30 children in foster care; and

31 (g) Any other issues related to medical, dental, or mental health
32 care for children in foster care.

33 (2)(a) The foster care health unit, in collaboration with regional
34 medical consultants, shall develop a statewide, uniform role for the
35 regional medical consultants with emphasis placed on the mental health
36 needs of the children in foster care.

37 (b) By September 1, 2006, the department shall implement the

1 utilization of the statewide, uniform role for the regional medical
2 consultants developed in (a) of this subsection.

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