
**Human Services, Youth, & Early
Learning Committee**

E2SSB 6109

Brief Description: Supporting children and families.

Sponsors: Senate Committee on Ways & Means (originally sponsored by Senators Wilson, C., Boehnke, Braun, Gildon, Hasegawa, Kuderer, Liias, Lovelett, Lovick, Nguyen, Nobles, Saldaña, Short, Warnick and Wilson, J.).

Brief Summary of Engrossed Second Substitute Bill

- Requires courts to give great weight to the lethality of and public health guidance from the Department of Health (DOH) regarding high-potency synthetic opioids during certain stages of child welfare proceedings where the court is determining whether a child should be removed from a parent.
- Includes child abuse or neglect resulting from a high-potency synthetic opioid in a non exhaustive list of what may establish the basis for a determination of imminent physical harm when a child is removed from a parent by court order, law enforcement, or a hospital.
- Expands various services for families, requires DOH to develop information regarding the risks of fentanyl exposure to children, expands training for professionals involved with the child welfare court process, and adds positions within the Department of Children, Youth, and Families.

Hearing Date: 2/14/24

Staff: Luke Wickham

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.

Background:

Removal of a Child from a Parent.

There are three methods that allow a child to be removed from a parent, guardian, or legal custodian, including:

- pursuant to a court order directing that a child be taken into custody;
- by a physician or hospital; and
- by law enforcement.

A court may enter an order directing that a child be taken into custody if:

- a petition is filed with sufficient corroborating evidence to establish that the child is "dependent;"
- the allegation in the petition, if true, establishes that there are reasonable grounds to believe that removal is necessary to prevent imminent physical harm to the child due to child abuse or neglect; and
- an affidavit or declaration is filed by the Department of Children, Youth, and Families (DCYF) in support of the petition setting forth specific factual information evidencing insufficient time to hold a hearing before removal.

A hospital, physician, and law enforcement may detain a child if there is probable cause to believe that detaining the child is necessary to prevent imminent physical harm due to child abuse or neglect.

Child Welfare Court Proceedings.

Anyone, including the DCYF, may file a petition in court alleging that a child should be a dependent of the state due to: abandonment, abuse or neglect, or because there is no parent, guardian, or custodian capable of adequately caring for the child. These petitions must be verified and contain a statement of facts that constitute a dependency and the names and residence of the parents, if known.

When a child is taken into custody, the court is to hold a shelter care hearing within 72 hours. The primary purpose of the shelter care hearing is to determine whether the child can be immediately and safely returned home while the dependency case is being resolved.

If a court finds the need to maintain a child out of the home, the shelter care status remains until a dependency fact-finding hearing is held or the parties enter an agreed order of dependency. The fact-finding hearing must be held within 75 days after the filing of the petition, unless exceptional reasons for a continuance are found.

If a court determines that a child is dependent, the court will hold a dispositional hearing to determine whether the child may remain in the home or be removed from the home and be cared for by a relative, other suitable person, or the DCYF. The child may only be placed out of the parent's care if the court finds that reasonable efforts have been made to prevent or eliminate the need for removal, that prevention services have been offered or provided, and that:

- there is no parent or guardian available to care for the child;
- the parent, guardian, or legal custodian is not willing to take custody of the child; or
- the court finds by clear, cogent, and convincing evidence that a manifest danger exists and the child will suffer serious abuse or neglect if the child is not removed from the home.

Following a fact-finding and dispositional hearing, the court will conduct periodic reviews and make determinations regarding the child's placement, the provision of services by the DCYF, compliance of the parents, and whether progress has been made by the parents.

The DCYF must develop a permanency plan within 60 days from the date that the DCYF assumes responsibility for the child which must identify primary outcome goals for the case. The DCYF must submit this permanency plan to the parties and the court at least 14 days before a permanency planning court hearing. A permanency planning hearing must be held in all cases where the child has remained in out-of-home care for at least nine months, but no later than 12 months following out-of-home placement.

If the court orders a child returned home during a dependency proceeding, casework supervision by the DCYF must continue for at least six months, at which time a review hearing must be held and the court must determine the need for continued intervention.

Under certain circumstances after a child has been removed from the custody of a parent for at least six months pursuant to a finding of dependency, a petition may be filed seeking termination of parental rights. The court must order the DCYF to file a petition seeking termination of parental rights if the child has been in out-of-home care for 15 of the last 22 months since the date the dependency petition was filed unless the court makes a good cause exception as to why the filing of a termination of parental rights petition is not appropriate.

Family and Juvenile Court Improvement Grant Program.

A superior court may apply for grants from the Family and Juvenile Court Improvement Grant Program (Grant Program) by submitting a local improvement plan with the Administrative Office of the Courts (AOC). To be eligible for grant funds, a superior court's local improvement plan must meet the criteria developed by the AOC and be approved by the Board for Judicial Administration.

At a minimum, the criteria must require that the court's local improvement plan meet the following requirements:

- commit to a chief judge assignment to the family and juvenile court for a minimum of two years;
- implement the principle of one judicial team hearing all of the proceedings in a case involving one family, especially in dependency cases;
- require court commissioners and judges assigned to family and juvenile courts to receive a minimum of 30 hours of specialized training in topics related to family and juvenile matters within six months of assuming duties in a family and juvenile court; and
- submit a spending proposal.

The Grant Program was established in 2008 and there are currently 10 counties that receive funding through the program: Chelan, Clallam, Island, Jefferson, King, Kitsap, Pierce, Snohomish, Spokane, and Thurston.

Summary of Bill:

Child Welfare Process.

A court must give great weight to the lethality of high-potency synthetic opioids and public health guidance from the Department of Health (DOH) related to high-potency synthetic opioids when considering whether the child may remain in the home of a parent when considering:

- whether to issue a pickup order;
- whether placing or maintaining a child in shelter care is necessary to prevent imminent physical harm to a child;
- whether a parent, guardian, or legal custodian's participation in any prevention services would prevent or eliminate the need for the child's removal; and
- whether a manifest danger exists that the child will suffer serious abuse or neglect if the child is not removed from the home during a dispositional hearing.

The child abuse or neglect establishing the basis for a determination of imminent physical harm during a request for a pickup order, law enforcement removal, and hospital hold may include, but is not limited to, child abuse or neglect resulting from a high-potency synthetic opioid.

"High-potency synthetic opioid" is defined to mean an unprescribed synthetic opioid classified as a Schedule II Controlled Substance or Controlled Substance Analog in state law or by the Pharmacy Quality Assurance Commission in rule including, but not limited to, fentanyl.

Training and information.

The list of topics that must be included in the required judicial training for Family and Juvenile Court Improvement Grant recipients are expanded to include:

- the risk and danger presented to children by high-potency synthetic opioids consistent with public health guidance from the DOH;
- policies and procedures of the Department of Children, Youth, and Families (DCYF) regarding safety and service planning including the differences between safety plans and service plans; and
- the legal standards for removal of a child based on abuse or neglect.

The DOH, in collaboration with the DCYF, must convene a work group on children and exposure to fentanyl to provide information for child welfare workers, juvenile courts, and families regarding the risks of fentanyl exposure for children and child welfare workers in child protective services investigations. The information must be made available to child welfare court professionals.

Services and Staff Positions.

Legal liaison positions within the DCYF are established in at least one of each of the six DCYF regions to work with both the DCYF and the Office of the Attorney General for the purpose of assisting with the preparation of child abuse and neglect court cases.

The DCYF must establish a pilot program for contracted child care slots for infants in child protective services in places with the historically highest rates of child welfare screened-in intake due to exposure or presence of high-potency synthetic opioids in the home.

The DCYF must enter into targeted contracts with existing home visiting programs in locales with the historically highest rates of child welfare screened-in intake to serve families.

The Health Care Authority must expand specific treatment and services to children and youth with prenatal substance exposure who would benefit from evidence-based services impacting their behavioral and physical health.

The DCYF must provide funding and support for two pilot programs to implement an evidence-based, comprehensive, intensive, in-home parenting services support model to serve children and families from birth to age 18 who are involved in child welfare, children's mental health, or juvenile justice systems.

The DOH must provide funding to support promotoras in at least two communities. These promotoras must provide culturally sensitive, lay health education for the Latinx community, and act as liaisons between their community, health professionals, and human and social service organizations.

The DCYF must establish a pilot program to include third-party safety plan participants and public health nurses in child protective services safety planning.

Appropriation: None.

Fiscal Note: Requested on February 12, 2024.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.