

SENATE BILL NO. 468

August 29, 2019, Introduced by Senators BIZON and BULLOCK and referred to the Committee on Families, Seniors and Veterans.

A bill to amend 1973 PA 116, entitled

"An act to provide for the protection of children through the licensing and regulation of child care organizations; to provide for the establishment of standards of care for child care organizations; to prescribe powers and duties of certain departments of this state and adoption facilitators; to provide penalties; and to repeal acts and parts of acts,"

(MCL 722.111 to 722.128) by adding section 13a.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

1 Sec. 13a. (1) In the case of a child in foster care who is

1 placed in a qualified residential treatment program, the following
2 requirements apply:

3 (a) Within 30 days after the start of each placement in a
4 qualified residential treatment program, a qualified individual
5 shall do all of the following:

6 (i) Assess the strengths and needs of the child using an age-
7 appropriate, evidence-based, validated, functional assessment tool
8 approved by the secretary.

9 (ii) Determine whether the needs of the child can be met with
10 family members or through placement in a foster family home or, if
11 not, which setting would provide the most effective and appropriate
12 level of care for the child in the least restrictive environment
13 and be consistent with the short-term and long-term goals for the
14 child, as specified in the child's permanency plan.

15 (iii) Develop a list of child-specific short-term and long-term
16 mental and behavioral health goals.

17 (b) The child placing agency responsible for care and
18 supervision of the child shall assemble a team for the child in
19 accordance with the requirements of subdivision (a) (i) and (ii). The
20 qualified individual conducting the assessment required under
21 subdivision (a) shall work in conjunction with the child's team
22 while conducting and making the assessment.

23 (c) The child's team, as described in subdivision (b), shall
24 consist of all appropriate biological family members, relatives,
25 and other supportive adults of the child, as well as professionals
26 who are a resource to the family of the child, such as teachers,
27 medical or mental health providers who have treated the child, or
28 clergy. In the case of a child who has attained age 14, the team
29 shall include members of the permanency planning team for the child

1 that are selected by the child.

2 (d) The child placing agency responsible for the child's care
3 and supervision shall document in the child's case plan all the
4 following:

5 (i) The reasonable and good-faith effort to identify and
6 include all the individuals described in subdivision (c) on the
7 child's team.

8 (ii) All contact information for members of the team, as well
9 as contact information for other relatives and supportive adults
10 who are not part of the child's team.

11 (iii) Evidence that meetings of the team, including meetings
12 relating to the assessment required under subdivision (a), are held
13 at a time and place convenient for family.

14 (iv) If reunification is the goal, evidence demonstrating that
15 the parent from whom the child was removed provided input to the
16 members of the child's team.

17 (v) Evidence that the assessment required under subdivision
18 (a) is determined in conjunction with the child's team.

19 (vi) The placement preference of the child's team relative to
20 the assessment that recognizes a child should be placed with his or
21 her sibling unless there is a finding by the court that such
22 placement is contrary to the child's best interests.

23 (vii) If the placement preferences of the child's team and the
24 child are not the placement setting recommended by the qualified
25 individual conducting the assessment under subdivision (a), the
26 reason why the preferences of the child's team and of the child
27 were not recommended.

28 (2) If the qualified individual conducting the assessment
29 determines the child should not be placed in a foster family home,

1 the qualified individual shall specify in writing the reason why
2 the needs of the child cannot be met by the family of the child or
3 in a foster family home. A shortage or lack of foster family homes
4 is not an acceptable reason for determining that the needs of the
5 child cannot be met in a foster family home. The qualified
6 individual shall specify in writing why the recommended placement
7 in a qualified residential treatment program is the setting that
8 will provide the child with the most effective and appropriate
9 level of care in the least restrictive environment and how that
10 placement is consistent with the short-term and long-term goals for
11 the child, as specified in the permanency plan for the child.

12 (3) Within 60 days after the start of each placement in a
13 qualified residential treatment program, the court, or an
14 administrative body appointed or approved by the court,
15 independently, shall do the following:

16 (a) Consider the assessment, determination, and documentation
17 made by the qualified individual.

18 (b) Determine whether the needs of the child can be met
19 through placement in a foster family home or, if not, whether
20 placement of the child in a qualified residential treatment program
21 provides the most effective and appropriate level of care for the
22 child in the least restrictive environment and whether that
23 placement is consistent with the goals for the child, as specified
24 in the permanency plan for the child.

25 (c) Approve or disapprove the qualified residential treatment
26 program placement.

27 (4) The written documentation of the determination and
28 approval or disapproval of the placement in a qualified residential
29 treatment program by a court or administrative body under

1 subsection (3) shall be included in and made part of the case plan
2 for the child.

3 (5) As long as a child remains placed in a qualified
4 residential treatment program, the department shall submit evidence
5 at each dispositional review hearing and each permanency planning
6 hearing held with respect to the child that does the following:

7 (a) Demonstrates that ongoing assessment of the strengths and
8 needs of the child continues to support the determination that the
9 needs of the child cannot be met through placement in a foster
10 family home, that the placement in a qualified residential
11 treatment program provides the most effective and appropriate level
12 of care for the child in the least restrictive environment, and
13 that the placement is consistent with the short-term and long-term
14 goals for the child, as specified in the permanency plan for the
15 child.

16 (b) Documenting the specific treatment or service needs that
17 will be met for the child in the placement and the length of time
18 the child is expected to need the treatment or services.

19 (c) Documents the reasonable efforts made by the department to
20 prepare the child to return home or to be placed with a fit and
21 willing relative, a legal guardian, or an adoptive parent, or in a
22 foster family home.

23 (6) At each dispositional review hearing and permanency
24 planning hearing held with respect to the child, the court shall
25 approve or disapprove the qualified residential treatment program
26 placement.

27 (7) In the case of a child who is placed in a qualified
28 residential treatment program for more than 12 consecutive months
29 or 18 nonconsecutive months, or, in the case of a child who has not

1 attained age 13, for more than 6 consecutive or nonconsecutive
2 months, the department shall obtain the signed approval of the
3 director of the department for the continued placement of the child
4 in that setting.

5 (8) The state shall not enact or advance policies or practices
6 that would result in a significant increase in the population of
7 youth in the juvenile justice system.

8 (9) As used in this section:

9 (a) "Department" refers to the department of health and human
10 services.

11 (b) "Qualified individual" means a trained professional or
12 licensed clinician who is not an employee of the department and who
13 is not connected to, or affiliated with, any placement setting in
14 which children are placed by the department. The department may
15 seek a waiver from the secretary to approve a qualified individual
16 who does not meet the criteria in this subdivision to conduct the
17 assessment. The individual must maintain objectivity with respect
18 to determining the most effective and appropriate placement for the
19 child.

20 (c) "Secretary" means the United States Secretary of the
21 Department of Health and Human Services.

22 Enacting section 1. This amendatory act does not take effect
23 unless all of the following bills of the 100th Legislature are
24 enacted into law:

25 (a) Senate Bill No. 466.

26 (b) Senate Bill No. 467.

27 (c) Senate Bill No. 469.