

SB 825 -2, -3 STAFF MEASURE SUMMARY

Senate Committee On Human Services

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Sub-Referral To: Joint Committee On Ways and Means

Meeting Dates: 3/12, 4/2, 4/4

WHAT THE MEASURE DOES:

Directs Department of Human Services to study and make recommendations relating to placement of children in child-caring agencies. Requires report to Legislative Assembly by January 1, 2021.

REVENUE: May have revenue impact, but no statement yet issued.

FISCAL: May have fiscal impact, but no statement yet issued.

ISSUES DISCUSSED:

EFFECT OF AMENDMENT:

-2 Replaces measure. Allows DHS to utilize qualified residential treatment programs (QRTPs) that provide specialized residential care, in order to align with federal funding requirements. Provides definition and requirements for QRTPs. Authorizes DHS to place a child or ward in a child care institution or other congregate care residential setting only if the setting is a child-caring agency and a QRTP, except in specific circumstances as specified. Prohibits placement of child or ward in residential care agency or shelter care home that is not a QRTP for more than 60 consecutive days or 90 cumulative days in a 12-month period, or if such placement also serves adjudicated youth or youth served by OYA or the county juvenile department. Prohibits placement of child or ward in a homeless, runaway or transitional living shelter that is not part of a QRTP for more than 90 consecutive or 120 cumulative days in any 12-month period unless child or ward is homeless or a runaway and accessed placement without support or direction of DHS. Authorizes DHS to place child or ward in another state in specified placements. Requires independent, qualified individual assess strengths and needs of any child or ward placed in QRTP within 30 days. Requires court approval of QRTP placement within 60 days. Requires replacement within 30 days of court order disapproving QRTP. Expands requirements of juvenile court reports to include specified findings for wards placed in QRTPs. Requires judicial approval of voluntary placements in QRTPs. Modifies voluntary placement to require permanency hearing within 14 months and at least annually for duration of placements lasting longer than 12 months. Requires Citizen Review Board to examine each voluntary QRTP placement and make specified findings within six months, and every six months for the duration. Includes county juvenile department as agency having guardianship or legal custody required to file reports and authorized to seek judicial review and determinations in juvenile delinquency matters. Requires court findings to include specific information regarding QRTP placement.. Declares emergency, effective on passage.

REVENUE: May have revenue impact, but no statement yet issued.

FISCAL: May have fiscal impact, but no statement yet issued.

-3 Requires DHS submit report to Legislative Assembly no later than September 1, 2019 summarizing DHS's plan to develop appropriate in-state placements for Oregon children and wards. Requires report describe types of programs and services are necessary to serve children and wards and identify barriers to implementing programs and services in this state.

REVENUE: May have revenue impact, but no statement yet issued.

FISCAL: May have fiscal impact, but no statement yet issued.

BACKGROUND:

The federal Family First Prevention Services Act (Family First) was signed into law as part of the Bipartisan Budget Act on February 9, 2018. Family First reforms the federal child welfare financing streams under title IV-E and title IV-B of the Social Security Act to provide services to families who are at risk of entering the child welfare system, in an effort to prevent children from being removed from their families.

Family First also seeks to improve the well-being of children already in foster care by limiting federal funding for states for children who are placed in a setting that is not a foster family home unless the setting is a Qualified Residential Treatment Program (QRTP). Federal policy makers assert that there is an appropriate role for congregate care placements in the continuum of care, and these placements should be based on the specialized behavioral and mental health needs or clinical disabilities of children. Evidence shows that children do best in a family like setting, and current federal law states that children in foster care have the right to be placed in the least restrictive setting relative to their needs.