

Comments and Responses on ARC 7712B  
 Foster Family Home Licensing and Training and Foster Care and Adoption Services  
 Received April 28, 2009

The following persons and organizations provided written comments, which are included in the summary below:

- Mike Barker, vice president of professional services, Child Connect and Iowa KidsNet
- Katie Bolie, DHS social work supervisor, Council Bluffs
- Cynthia Broadwater, foster parent and registered child care provider, Cedar Rapids
- Caren Brunsvold, social worker and foster parent
- Jim and Laura Carlton, foster parents
- Susan Chandler, assistant attorney general, Sac & Fox Tribe of the Mississippi
- Karen Cummins, registered nurse, Rock Island, Illinois
- Delores DeBow, former foster parent
- Candy Duncan, foster parent and child care provider
- Sherrie Duval, foster parent
- Jean Fell, DHS worker
- Deb Frese, foster and adoptive parent, Cedar Rapids
- Roberta Harris, social worker, DHS service help desk
- Joni Hickman, foster parent
- Christina Hill, foster parent
- Malinda Hintz, foster parent
- J E, foster and adoptive parent and child care provider
- Diane Jenkins, foster parent
- Juliann Jones, administrative assistant, Children & Families of Iowa, Des Moines
- Diane King, foster parent
- Dawn Luetje, Iowa KidsNet retention & support specialist, Lutheran Services of Iowa
- Nancy Magnall, foster parent
- Kelli Malone, Four Oaks, Cedar Rapids, for foster parents & recruitment staff
- Sandy Matthews Hawkins, foster parent and child care provider
- Brenda May, foster parent
- Sonya McDonald, foster parent
- Mike McGuire, foster parent
- Georgeann Norbo, DHS social worker, Scott County
- Tom Persinger, Iowa KidsNet PS-MAPP master trainer, former licensing worker
- Gerald & Sarah Phipps, foster parent and child care provider, Cedar Rapids
- Deb Putman, foster parent
- Lori Salz, foster parent
- Alice Schlichtemeier, foster parent, Clay County
- Kimberly Schmit, foster parent
- Pam & Frank Schumacher, foster parents
- Julie Seemann, foster parent

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## **Foster Parent Licensing Requirements**

### **Bedrooms for Foster Children (113.5)**

COMMENT: I am very concerned about changing the rule for bedroom capacity for foster children from 40 square feet of sleeping space per foster child to "adequate" sleeping space. Adequate is a very subjective term and will be perceived differently by everyone. I am concerned that placing workers and foster parents will perceive "adequate" in terms of their own needs and not the needs of the foster children. The other concerns will be how to decide on capacity and whether a variance is appropriate. Please retain a concrete objective sleeping space requirement for foster children. (Fell)

COMMENT: The 40 square feet expectations...that is scary to leave that up to individuals. If we want statewide expectations, we need statewide guidelines. Especially on something that important! Maybe it could be a guide rather than a rule, but it needs to be in there somewhere. So if a room was 75 square feet we could put two smaller children in there. (Brunsvold)

COMMENT: ...it is my opinion that this rule will not meet the needs of many of our foster children and can compromise safety, boundaries for children, enhance issues around variances and the rule is subject to causing home study workers to bow to the pressure of some foster families to request to take more children than they can possibly handle. Lack of specifics for such an important standard also puts home study workers, many of whom are inexperienced, in a role of subjectivity in their decisions and recommendations. Consistency is needed when homes are evaluated and with no specific standard we have no true evaluation tool.

Foster home licensing standards of some other states:

Illinois: 40 sq. ft. for 1<sup>st</sup> child plus 35 sq. ft. for each additional child; can approve smaller in best interest of child.

Maine: 60 sq. ft. for room for one child; 35 sq. ft. per child in rooms for two or more.

Nebraska: 35 sq. ft. per child

Oregon: "adequate"

Wisconsin: 40 sq. ft. per child (Harris)

COMMENT: ... the rule suggestion of changing the 40 square feet of bedroom space to allowing the licensing worker to decide is a horrible decision. Licensing workers need to provide consistent when they

evaluate homes and an arbitrary rule on room size is subject to being abused. Please reconsider this most disastrous of rule changes. (Persinger)

COMMENT: Adequate space - what is adequate? Who determines? Have denied due to ceiling height and size of room issues. (Bolie)

RESPONSE: We agree to change the rule about bedroom space to read as follows:  
The minimum bedroom area per child shall be 40 square feet. However, the service area manager or designee may approve a smaller room size when approval is in the best interest of specific children placed or to be placed in the home. Such approvals shall: (1) Be in writing; (2) Contain the names and birth dates of the children for whom issued; and (3) Be reviewed at each license renewal.

COMMENT: I agree...that bedrooms for foster children need to have an operable window. ...we currently have some homes that are licensed that the bedrooms do not have operable windows. Some of these homes have been working with foster children for many years and are very good homes. I would hate to see us have to move children out of these homes and close the homes for fostering because they are unable to add the windows. I would like to suggest that these homes be "grandfathered in" and they be allowed to be licensed until they move or give up their license. If that is not possible at least allow the children who are there to remain there until they are ready to go to a more permanent living situation. Thank you for allowing me to give my input. (Barker)

COMMENT: Will there be a "grandfathering in" of the foster homes whose bedrooms under ground without a window, have been approved, and children are placed in those homes and bedrooms? Will children be removed from these homes? **Suggestion:** Provide clarity on a transition period so no child will be displaced from a home that was formally approved but does not comply with new rules. (Malone)

COMMENT: Many homes, whether foster or not do not meet this expectation, therefore it seems unrealistic. (Bolie)

RESPONSE: It is realistic to require windows that are operable, large enough, and can be opened from the inside. Not do so would result in potential fire safety issue for the foster child. No room without a window that an applicant wants to use as a bedroom for a foster child shall be approved. We agree to amend the rule to address currently licensed homes who have a foster child placement in a bedroom with a window that is not large enough for a child to pass through or that will not open from the inside. Amendment:

If a currently licensed home has a bedroom with no window, a foster child cannot use the room for a bedroom. If a bedroom currently occupied by a foster child does not have an operable window, an exception to policy may be requested for that specific child under the following conditions:

1. The recruitment and retention contractor has evaluated the situation and has determined there is no other option for sleeping arrangements for the child;
2. The recruitment and retention contractor has determined there is no reasonable way to make the window operable; and
3. The child would have to be moved to another placement if the exception were not granted.

Any exception to policy will be related to a specific child. When that child is no longer a resident in the foster home, the home will be required to come into compliance regarding working windows.

COMMENT: What if current [foster parents] don't meet these requirements as they change. I.e: permanent walls will they be grandfathered in or not be able to relicence? (Seemann)

RESPONSE: If current licensed foster parents do not have permanent walls and it is not a safety hazard, the Department may waive this requirement when the family has a foster child currently in the bedroom. When that foster child leaves this home, the foster family will need to modify the room to meet the current standards or not use this room as a bedroom for foster children unless again waived by the Department designee.

COMMENT: Does this prohibition of foster children sharing a bedroom with a person over 18 apply to children placed in foster care who turn 18 and voluntarily sign themselves into family foster care to finish High School? If yes, the potential issue may become inadequate space in the home. **Suggestion:** Approval from the SWA or designee is requested so that no child is displaced from the home, when a foster child who shares a bedroom, turns 18, but is voluntarily remaining in foster care. (Malone)

RESPONSE: The proposed rule provides for exceptions approved by the social work administrator or designee.

COMMENT: I have an existing placement and if you change this rule, it would disrupt it. I walk [through] the foster-bedroom to get to mine, is DHS going to pay to remodel my home? I understand not wanting a foster child to walk [through] my bedroom, but then again that is why my bedrooms are arranged this way! (Hill)

RESPONSE: You are referring to the “draft” rules that were posted on the DHS website before these rules were published as a Notice of Intended Action. The draft language regarding “access to any bedroom shall not require passing through another bedroom” is not included in the Noticed rules.

### **Physical Standards (113.5)**

COMMENT: Will this [lead paint] evaluation be paid for by the department???(Hill)

COMMENT: I recognize the importance of protecting all children from exposure to lead-based paint. However, knowing that many of our foster families live in houses built before 1960, I’m concerned about the impact of not only having to do the visual inspection, but more importantly, the financial cost they will incur for “repairing... specialized cleaning, maintenance, painting, and temporary containment.” I have no doubt this requirement will dissuade some families from licensing or relicensing. (Magnall)

RESPONSE: This is a visual assessment completed by the foster parent and there is no cost to do this evaluation. The Iowa Department of Public Health has a booklet on lead poisoning that tells how to complete a visual assessment and what to do if you find a lead-based paint hazard or other lead-based hazard. You can request the booklet at 1-800-972-2026. The financial cost of interim controls would vary.

It is important that any parent deal with a lead-based hazard since it is a hazard for anyone living in the residence. The health care cost could be more than the cost for interim controls. If a foster parent is renting, it is the responsibility of the landlord to deal with the lead-based hazard.

COMMENT: **113.5(4)** *All rooms above ground.* even with Egress windows in place as part of 2 fire exits? I do not agree (Hill)

RESPONSE: Subrule **113.5(4)** does not speak to egress windows. It appears that you are actually referring to 113.5(5) *Rooms below ground.* This rule amendment requires one direct exit to the outside on this level and one inside stairway exit on this level when bedrooms are below ground. It is

important to have more than a window for exiting a belowground room when there is a fire and one may not be able to exit a window and would need to use the stairway as an exit.

COMMENT: Overall, the largest concern is the new rule change regarding fireplaces. We heat our home with a freestanding wood burning stove. As I understand, under the new rules I would be required to provide some type of barrier to keep the children away. While a barrier is not a problem for a conventional fireplace, I cannot fathom any barrier that would be aesthetically pleasing, safe, and allow the heat to flow freely. (Schlichtemeier)

RESPONSE: This comment relates to a provision that was in the draft rules we posted before the Notice of Intended Action was filed. We removed that language and it is not a part of the current Noticed rules.

### **Safety (113.7)**

COMMENT: Will there be grant money to buy the new carbon monoxide detectors and fire extinguishers? Are foster parents going to be expected to pay for these as well? Who is going to monitor them for updated versions? Fire department? The monitor our other licensed facilities in Iowa?? (Brunsvold)

COMMENT: Again, who is paying for this [fire extinguishers]? No wonder foster parents are so hard to retain. (Hill)

RESPONSE: Foster parents have the responsibility to have a working, approved fire extinguisher and carbon monoxide detector.

COMMENT: I can't envision how one could write a safety plan that could reasonably and completely address all of the possible scenarios listed above. The actions taken in any situation would vary greatly depending upon the nature of the disaster, the accident, or the medical issue; the location; whether it directly involved foster children or other family members; the location of the foster children—are they at school? at the foster home? with friends? Are they with the foster parents or not? I would like to give foster parents some credit for having the ability to assess any situation that arises and determine what is the appropriate course of action to take without having to consult a script. If they don't have that ability, perhaps they shouldn't be licensed. (Magnall)

RESPONSE: There will be guidance on safety plans in the revised Foster Parent Handbook. The safety plans should be addressing the safety plan for the home. Your safety plan can address safety for when a foster child is staying at a friend's home. Schools do have safety plans in place.

COMMENT: When we have children with behavioral problems to teach them to open and climb through the window we will have kids climbing down fire escapes etc. This I see as a real safety issue. If this is in here than foster parents could not be held liable or have a founded abuse report for lack of supervision etc if children get outside or get hurt mimicking what they have been taught. (Seemann)

RESPONSE: The amendment adds only that the child be able to open the window. This rule is to assure that if there is a fire in the home that the child can escape through the bedroom window. The licensing worker is charged with the responsibility to ensure there is adequate space to address safety and personal space for the child. The foster parent is still required to provide supervision in accordance with the child's age and development.

COMMENT: I'm concerned about the requirement to have all "poisonous substances" kept in a locked storage container. That term is very broad and I can envision families being in violation of licensing standards simply by having normal substances available in most households not secured by locks. I'm thinking of medicinal products such as rubbing alcohol or hydrogen peroxide, as well as dish detergent, liquid soaps, some cooking ingredients, etc. which could be poisonous to a child if ingested. Of course, anything that could possibly harm a child should be kept out of their reach, but I don't think it's reasonable to expect that a family have every single substance that could possibly be poisonous to a child locked up. (Magnall)

COMMENT: Are you saying that all cleaners have to be locked rather than just out of reach of children?? This is a lot to ask of foster parents. How many children in [foster care] have been harmed as a result of this? I have not heard of 1 in 15 years. (Seemann)

COMMENT: Medication and poisonous substances [should] Not [have to be in] locked [storage] ... I can manage this just fine, I do not need to keep the medications in a lock box; they are out of reach of the children! (Hill)

COMMENT: Currently require that medications be out of reach of children. Is that not sufficient rather than require a locked storage container. (Bolie)

COMMENT: When you say LOCKED medicines...is that a key or padlock or a child safety lock?? (Brunsvold)

RESPONSE: Yes, the term "poisonous substances" is broad. We are specifically looking at known poisonous substances, as it is difficult to identify all normal substances that can be poisonous. If the cleaners are poisonous substances, they are to be kept in a locked storage container out of the reach of children. This is a safety and supervision issue, as many young children can climb up to where you might think the medications are out of their reach. Child safety locks can be used on kitchen cabinets where these substances may be stored. It is also a safety issue for older children.

The rule does not address the type of lock to be used for the locked storage container for medicines. The foster parent should take into consideration the age and development of the foster child to determine the best type of lock to use for medications and where the poisonous substances are stored.

COMMENT: What exactly do I need to put my pets [through]? I understand and agree with vaccinations, but what more am I required to do??? (Hill)

RESPONSE: The rule amendment states: "Household pets and any outdoor animals or pets accessible to foster children shall have a current veterinary health certificate that verifies the animal's routine immunizations as required by local ordinances. The recruitment and retention home study worker shall address in the home study the safety of foster children in relation to any animals that live on the property of the foster parent."

COMMENT: I'm concerned about the inclusion of trampolines as "hazardous items" and the requirement that permission be obtained from the parent or guardian of the foster child to use it. Many foster families have trampolines and use them as part of their family's recreational activities. To exclude a foster child from participating with other children in the home due to lack of parental permission seems excessive and sets the child apart as different from the rest of the family which is contrary to our expectation that the child will be treated the same as other family members. (Magnall)

COMMENT: Permission from a parent for use of the trampoline, I don't agree! (Hill)

RESPONSE: Trampolines can be dangerous—See information below regarding safety issues with trampolines. It is our understanding that anyone who has a trampoline at their home must carry additional homeowners insurance to cover any accidents. In addition, the parents of most of the children in foster care maintain their parental rights and having a signed consent for their child to use equipment or vehicles where safety can be of issue involves them in decisions concerning their child.

The U.S. Consumer Product Safety Commission reports that trampolines are not developmentally appropriate for use with children under age five. Trampoline-related injuries have almost tripled since 1991. According to the National SAFE KIDS Campaign, nearly 82,000 children under age 14 were treated in hospital emergency rooms for trampoline-related injuries in 2000. More than 90% of trampoline-related injuries occur in home-like settings, including childcare. Injuries mostly involve the arms and legs. Since 1990, the U.S. Consumer Product Safety Commission has received reports of eleven deaths involving trampolines with six victims being ages 12-19. The following caused these deaths:

- ◆ Colliding with another person on the trampoline
- ◆ Landing improperly while jumping or doing stunts on the trampoline
- ◆ Falling or jumping off the trampoline
- ◆ Falling on the trampoline springs or frame

COMMENT: I question what is meant by the term “recreational vehicle.” The dictionary defines that as “a van or utility vehicle used for recreational purposes such as camping, often equipped with living facilities.” I think that is what most people think of when they hear the term “recreational vehicle.” However, I’m guessing that is not what DHS intends the term to mean as I think it would be very rare for a foster child to be driving such a vehicle. I think perhaps they mean ATVs (all terrain vehicles) and vehicles of that nature. If that is the case, I think that needs to be made clear so there is no question that permission would need to be obtained from parents for a foster child to drive such a vehicle. (Magnall)

RESPONSE: You are correct that our rule is directed at ATVs and vehicles of that nature. We will change the rule to state “motorized vehicles” instead of “recreational vehicles” and expand on this in the *Foster Parent Handbook*.

COMMENT: I believe further clarification needs to be given on what is meant by “monitor” foster children while they are using the Internet. This is a very broad term that could be interpreted differently by different people. Does that mean direct observation at all times? Installation of filtering software on family computers? Responsibility of parents to check the history of web sites children have visited on the Internet? Knowing if a child has a Facebook or MyStuff page and what has been posted? What about foster children accessing the Internet at school or the library when a foster parent is not present? Foster parents need more complete information on what the expectations will be in order to insure that they are complying with this very important requirement.

COMMENT: [Prohibition on posting pictures or information concerning foster children on the Internet] will separate the foster kids from the rest! Can’t the foster parents just get permission? What about school websites and news info??? This could hurt the children we are trying to nurture! I understand restrictions, but none? What about teenagers who want to post on monitored sites in appropriate ways? This is just not fair. (Hill)

RESPONSE: The rule amendments promote the safety and well-being of the child. Posting information on a foster child on the Internet is a confidentiality violation. We will address monitoring foster children while they are using the Internet in the *Foster Parent Handbook*. The monitoring of foster children while using the Internet is specific to the foster parent home.

## **Involvement with Children's Families, Including Visits**

COMMENT: The problem with the ... policy [Refusal of the foster family to engage as a resource to the foster child's birth parents as grounds for denial of a renewal application] is that there are valid reasons for the foster family to refuse to be this resource such as hostility and vocal or threatened physical abuse from the birth family. I believe this should be evaluated as to the reasons of the foster families refusal in this area. Although we never dealt with this I do have friends that have dealt with much abuse from the birth family and then I believe it is the worker's responsibility to handle the interactions between the foster child and their birth family. In this instance the foster family should not be punished for the behavior of the birth family. (Duval)

COMMENT: "If the foster family refuses to engage as a resource to a foster child's birth parents when engagement can be done in a way that does not put the foster family or the foster child at risk of harm." This is my job as a parent (assessing risk), who gets to make this decision? Especially when the placement is leading to termination of parental rights and adoption by resource family! (Hill)

RESPONSE: The foster parent is a part of the team that provides input and guidance to meet the best interest of the child. It is important for the foster parent to contribute to family interaction between the child and the child's parents, as it assists in maintaining the ongoing attachment and bonding of the child and the parents, assists in grief and loss issues, and enhances the parents' skills for reunification with the child. Reunification of a child with the child's parents is the best permanency outcome for a foster child. There may be situations where the team agrees that it is not in the best interest of the child and the foster family to engage as a resource to the foster child's birth parents due to safety issues. Matching is an important component and any risks to placement need to be explored when seeking placement if known.

COMMENT: I definitely feel that budget cuts will only add to the responsibilities of foster parents, with an added need for transporting children (particularly to visits). This push for involvement by the foster parents with contact with the biologic parents just does not set well with me. It is an added responsibility, added driving, added time spent in coordinating and certainly does not provide me the safety I once felt in my own home as I never released information on my address or phone number to biologic parents.

I did have contact and did the driving and made the arrangements for three children on weekend visits with biological parents and even with my efforts, social workers would not give the biological parents the correct limitations of time allowed on the visits, the parents would be late to pick up and deliver children and I just did not feel safe meeting them even at a mall with the other children in my care and found them making no attempt whatsoever to do anything other than to carry on any sort of communication (I had their children and they were just mad) as they would drop the kids off in the parking lot and drive off.

I feel strongly that this could certainly turn into a dangerous situation for foster parents. Add to that the fact that I believe not all children can safely be returned home, but the push to require that I make this effort in these situations just doesn't seem right. (DeBow)

COMMENT: It [the decision on who should drive foster children to visits] can be a conflict between the foster parents and DHS case workers because many foster parents both work and/or the foster mother is caring for children at home. How can DHS expect foster parents to leave work and take children to visits too? Many visits for the birth parents are during the middle of the day- because birth parents are not working (part of the reason their children were removed...). We do not want to meet the birth parents who are sex offenders, who are meth addicts, who have just been released from prison, etc. We do not want birth parents coming to our homes or knowing the address of our homes. We just want to care for the children. (Frese)

RESPONSE: Transportation should be addressed at the family team meeting and in the *Family Case Plan*.

In some cases the safety, risk and permanency service contractor can provide transportation assistance to allow the child's family to access essential services and supports identified in the case plan and to attend parent, child, or sibling visits if they are providing services to the child's family. The child's caseworker may also assist with transportation and when medical services are not available in the community.

Parent and child visits could be potentially arranged after work hours and on weekends for foster parents who work if the parents can work with that schedule and it meets the needs of the children especially those children of school age. The child's parents can also provide transportation to medical and other appointments, including visits with their child, as addressed in the *Family Case Plan*. While some of the foster child's parents may not work, this is not a reason to remove children.

Ordinary transportation is included as part of the foster care maintenance payment. When a foster family's responsibilities in the *Family Case Plan* include providing transportation related to family or pre-placement visits outside the community in which the foster family lives, the Department worker may authorize an additional maintenance payment of \$1 per day. Expenses over the monthly amount may be reimbursed with prior approval of the Department worker.

COMMENT: 113.19(1)"a": *Foster parents shall provide supervision of foster children and children in pre-adoptive placement as dictated by the individual child's specific needs and in agreement with the supervising agency.* "Supervising agency" is associated with our previous system when foster and adoptive parents were assigned to specific private agencies. Suggestion: Revise "supervising agency." (Malone)

RESPONSE: We agree to remove the phrase "in agreement with the supervising agency."

COMMENT: "*transporting and supervising foster children,*" What? Be way more specific, please. A lot of this seems like a DUH that should be caught at the first home study. (Hill)

RESPONSE: This language from the rule introduction is intended to give an overview of the kinds of changes that are being made. The specific language on transportation is found at subrule 113.7(6) and the language on supervising of foster children is found at 113.7(7). If these changes are adopted, they will be addressed in your **Foster Parent Handbook**, and if you need more specifics, you will be able to contact your Iowa KidsNet licensing worker or the Department licensing worker.

## **Other Foster Parent Requirements**

COMMENT: Minimum age - adult siblings of kids have requested to be licensed for placement of siblings and may not meet age requirement thus perhaps ruling out a sibling placement. (Bolie)

RESPONSE: In this situation an exception to policy could be requested.

COMMENT: ...what does [the requirement for a health practitioner's statement that the foster parents have no mental health problems that be a hazard to children placed in their home] mean? what [general practitioner] is going to give a status of mental health, does this mean we have to go to psychiatrist? (Seemann)

RESPONSE: The health practitioner is expected to screen potential foster parents for possible mental health issues. If the health practitioner identifies potential mental health concerns and if there is

evidence that the foster parent is unable to provide necessary care for the foster child the Department or contractor licensing worker or the physician may require additional medical or mental health reports regarding the health of the foster parent. This may mean the foster parent would need to be evaluated by a medical or mental health provider to assure the foster parent can provide the necessary care for the foster child.

COMMENT: I DO NOT agree with finger printing foster parents or household members. (Hill)

RESPONSE: The Department is responsible to ensure the safety of the foster child in substitute care. Fingerprinting of foster and adoptive parent applicants is a federal requirement of the Adam Walsh Act.

COMMENT: Waive the water testing requirement - does Foster Parent have to sign the alternative water agreement annually? Question waiver of the requirement since we don't know if Foster Parent continues to purchase water for use.... who is going to monitor this? . (Bolie)

RESPONSE: The foster parent must sign the *Provisions for Alternate Water Supply* annually for three years after three consecutive annual water testing during which the family has made on-going alternative arrangements for the use of safe, potable water. The licensing worker is charged to ensure the child has safe, potable water.

COMMENT: No requirement that foster parents need to have a landline phone. There have been issues with cell phone service in rural areas, if cell phone with FP kids do not have phone access in case of an emergency etc. (Bolie)

RESPONSE: A landline phone is not required in these rules. The expectation is that the foster family and any foster children placed in the home have a reliable method of contact for emergencies. The foster parent would need to have a cell phone company that provides consistent phone coverage. This may mean changing cell phone providers or other means to assure availability for emergencies. The Department will consider your comment regarding requiring a landline phone for future amendments.

COMMENT: 113.16(4) Religion-If we need placements for teens so badly throughout the state-any change to this, especially the way you have this worded will discourage [foster parents] of faith from taking teen placements they may need to leave home alone. (Seemann)

RESPONSE: The child has a right to participate in the child's culture and religion in consultation with the child's parents. This may be an issue of matching a foster family to meet the needs of the child.

COMMENT: [Regarding the requirement to inform] recruitment and retention contractor within seven working days of: [changes in residents, location, or other significant factors in the foster family home] From this went from 30 to 7days? 10 or 14 is more reasonable... (Hill)

RESPONSE: The number of people in the foster home can affect the home's capacity and possibly the safety of the children living in the home. It is important to know as soon as possible who is residing in the home to assure safety and stability for any foster children in the home.

COMMENT: I am very concerned ...that specifically the smoking regulations would greatly impact all of us. - 6 foster parents who care for only teen age placement have told me that they try to be careful of where they smoke when around foster children, however smoking is not something that they could give

up, or do away from the foster children. Between these 6 foster parents there are 24 teenage foster children who would not have placements if this regulation is approved. Responsible behavior is expected of foster parents and of these 6 foster parents they are 6 of the most highly dedicated and responsible foster parents that we have, however they do smoke cigarettes. They have given so much of themselves and do outstanding jobs of caring for children. We need to be careful to not over regulate our foster parents to the point that we drive people away from being foster parents. (Luetje)

RESPONSE: The rules require the foster parent who smokes to not smoke in the presence of the foster child such as not smoking in the vehicle while the foster child is being transported. The rules do not require that foster parents who smoke to quit smoking. Again, the Department must provide for the safety and well-being of the foster child.

Exposure to second hand smoke is not only unsafe and unhealthy for the foster child, it contributes to many childhood illnesses. The Environmental Protection Agency estimates that secondhand smoke is responsible for approximately 150,000 lower respiratory tract infections in children under 18 months of age annually, resulting in 7,500 to 15,000 hospitalizations each year. Secondhand smoke is estimated to be the third leading cause of preventable death in this country. Many agencies and organizations support these rules concerning smoking around children.

COMMENT: While overall we agree and like the changes to the Policy, we have one concern in one area. That area is that "the foster home shall not be relicensed if they have not taken a placement for 3 years." How will that be determined?... Is it recorded how many times we say YES, but don't get the placement? What is it that this particular decision is being based on. It gets to be frustrating when you are here FOR the kids and yet no one can call you back with a decision. So speaking for ourselves, how does that work, because we would certainly NOT want to lose our license because we didn't get a call back with a placement even after saying YES so many times. (Carlton)

RESPONSE: This language "the foster home shall not be re-licensed if they have not taken a placement for 3 years." is not in the current Noticed rules. It was in the draft rules we had on the DHS Web site, but we took the language out because of the difficulty of tracking.

## **Training**

COMMENT: I don't understand what this rule means. [Internet training classes shall receive one credit hour for each two program hours.] The internet classes available at the approved website ([www.fosterparents.com](http://www.fosterparents.com)) all are assigned a credit value such as two hours of credit, three hours of credit, or four hours credit based upon the content of the class, not how long it takes a person to complete the material. Students progress through the material at their own pace. Once they complete all of the material required by the course, they are issued a certificate indicating that they have received the number of credit hours assigned to that course.

In the past, foster parents have received full credit for the number of hours indicated on the certificate (up to three hours per training cycle) and I assume that will continue. However, based on what this rule says, I'm not clear if that is the case or not. (Magnall)

COMMENT: Feedback and comments suggest it is understandable to limit the number of classes taken on the internet, but that it is not equitable to give one hour of credit for two hours of class work.

**Suggestion:** Limit the internet classes to 3 hours, but allow credit for the full amount of class work. This will also assist Iowa's rural families with required training completion. (Movies is the exception and should only be one hour of credit for a 2 hour movie) (Malone)

RESPONSE: The rules do not change the amount of credit to be received for completing Internet classes. [My understanding was that Internet classes are not addressed in the current rules.]

COMMENT: I'm unclear as to why an internet class could be repeated for training credit after five years if, as it states later in the rules, no other classes can be repeated for credit. (Magnall).

RESPONSE: We have removed that provision and included Internet classes in the rule language regarding in-service training not being repeated.

COMMENT: This [Except for the classes for mandatory reporters, cardiopulmonary resuscitation, and first aid, training credit will not be allowed for any in-service training class that is repeated.] seems to contradict the rule above that indicates an online class could be repeated for credit after five years. I believe that [allowing repetition] should be the case for any in-service classes. For foster families who have been licensed for many years, there simply aren't enough approved trainings available, particularly in rural areas, for them to get six new hours of training every year, year after year, without ever repeating a course. (Magnall)

COMMENT: 441.117(3) I think there needs to be a time frame, maybe 3 years [for repeating classes]. Otherwise we are going to be out of trainers in support group and if we had to repeat the only ones that could come would be new [foster parents]. Many times you can take the same training and get different things out of it at different times. (Seemann)

COMMENT: It is recommend that in-service training be allowed to be repeated based on the individual needs of the family and if approved by local DHS and the R and R licenser if it is a repeated training. Repeated training may be beneficial to some families. Families may need repeated class based on a specific population or topic if some time has passed and they need the information again. Or, a national trainer may come to Iowa and train on a topic, such as attachment disorder. We would certainly want families who may have taken local training on attachment to attend training from a national presenter and receive credit. (Malone)

COMMENT: In regards to the dropping of IFAPA training, without these trainings we as foster parents are supposed to get 6 hours of training per year to be able to keep our licenses. For the most part these training are very informative. I would like to see more trainings on the changes in DHS rules and regulations by age groups. There has been so much that has changed even in the last 3 years. 6 hours of training is sometimes a lot and sometimes not enough. If you always have placements then the 6 hours should hold, but if you haven't had any placements or calls then maybe the requirement should be dropped.

IFAPA training is very important especially for the foster parents of older foster children. To cut it complexly out would really put the foster parents at a disadvantage with some of the more challenging children. Most of the foster parents go into accepting placements in the dark due to lack of information or very little information about the child's situations. These trainings help the foster parents to understand how to deal with some of the more difficult situations. (Salz)

COMMENT: 6 hours of training is not enough. Our kids have a lot of issues and we need to be prepared to help them in whatever they need. There are not as many trainings on specific disorders which we often need. Besides being people who care about kids, we need to be professional about our teaching. It is very possible and quite easy to love these kids but without an appropriate amount of training, how can we help them deal with all that goes on in their lives? We personally choose to go above the requirements by reading books and attending different trainings because our kids do have a lot of mental illness. Unfortunately, foster-children tend to have a lot of mental health and school issues which cannot effectively be addressed in 6 hours of training. For the success of our foster-children as well as our

foster-parents being able to handle these challenges, I feel the training hours should be increased. (Hickman)

**RESPONSE:** The Department appreciates these concerns. The Department did not drop trainings sponsored by IFAPA. Six hours of in-service training is still required for all foster parents. There are also other trainings available that are not offered through IFAPA. Support groups are a good option for families to get their training hours. Many other training options on different subjects are offered throughout the year. Families will also be required to have an annual training plan that will assist in guiding their training needs.

**COMMENT:** This [training on child abuse] needs to be provided once every 3-6 months free to foster families if this is going to be a requirement!!!! (Hill)

**RESPONSE:** For the required two-hour child abuse training, Iowa Code requires it to be completed within the first 6 months of licensing and every 5 years thereafter. You can elect to take this training more often if you choose. IFAPA offers this training at their annual conference and it is also offered through the Iowa Department of Health via the Internet for a minimal fee.

**COMMENT:** On page 35, 36, & 37 all the training topics have a strike-through. Does this mean that none of these training topics can be used for foster parent training or does this mean rules will no longer contain a listing of approved topics? (Malone)

**RESPONSE:** The rules will no longer provide a list of approved topics and will allow flexibility to address the needs of the foster families.

**COMMENT:** 441-117.7(2) ...when you add what you did to "be specific to developing foster parents skills for addressing the needs of foster children" rather than the list previously provided you rule out foster family issues, such as dealing with your marriage as a foster parent, stress and foster parenting i.e. those issues that relate to the health of the foster family but may not directly deal with the foster child. (Seemann)

**RESPONSE:** Training dealing with a foster parent's marriage and stress could assist the foster parent to better address the needs of the foster child when the foster parent is less stressed and their marriage is healthy. As a result, it is allowable.

**COMMENT:** Does this [117.7(3)] mean that the proposed training cycle supersedes the current rule that foster parents have up to license expiration to complete training requirements? And would a license be denied if training is not complete during their training cycle as opposed to the renewal date? (Malone)

**RESPONSE:** In the transition period, foster parents will have 10 months to complete their annual training. Because Iowa Code chapter 237 provides for annual training, foster parents who complete their training by the renewal date will be approved during the transition.

**COMMENT:** If the foster family has an effective date of September 1, 2009, this family's new training cycle would begin in September 2009, and go until June 30 2010, which addresses the 10 month training cycle--Correct? **Suggestion:** It would be helpful to have a visual (timeline or chart) that demonstrates a complete training cycle for each type of family under the new rules who are: New; in Transition; and Renewing. (Malone)

**RESPONSE:** Yes that is correct. Manual will address the training cycle and training will be developed to address changes in the licensing rules. Your suggestion for how to assist with explaining the training will be considered.

COMMENT: \$100 stipend. This should be \$150 for couples, they can't always attend together. (Hill)

RESPONSE: The \$100 training stipend is to assist in offsetting the cost of training. Foster parents can also seek training with little or no cost (foster parent support groups) or attend the IFAPA conference and get all of the required hours needed at one conference.

COMMENT: Is this form, Foster Parent Training Report, going to be required even if the foster parent has a certificate of completion provided by the trainer? My experience has been that certificates are accepted in lieu of the form. It seems excessive to expect the foster parent to fill out an additional form if they already have a certificate. (Magnall)

RESPONSE: It has always been required that the *Foster Parent Training Report* be submitted along with any training documentation, such as certificates. The Department will consider this recommendation for future changes.

COMMENT: ... training that is not part of IFAPA should still be considered even if the training has already been completed - as long as it is taken within the licensing period. My husband is a LMHC and we often get training opportunities in the mail. Sometimes we have to look at schedules to see if it would even work and by then, we have already missed the 30 day time period. Also, we often don't have the complete information to send in for approval until after he has taken the class. (Hickman)

RESPONSE: While the Department is allowed 30 days to approve the in-service training approval request after receipt of request, the approvals are often reviewed and a response is completed in a couple of days or less. Many training approval requests are submitted in less than 30 days before the training, and may be reviewed and a response completed before the training is provided. The Department cannot guarantee a response to a training request if the request is received in less than 30 days of the date of the training.

COMMENT: If the training hours are a budget problem then we need to think outside of the box, and maybe give the foster parents hourly credit do some of the supervised visitations, hourly credits for taking foster children to appointments. For the 0-2 years give hourly credit for taking them for their WIC check ups. The last I knew these were every 3 months, and usually last about an hour. This is usually donated time to the foster parents anyway. (Salz)

RESPONSE: Supervising parent/child visits and taking foster children to appointments are not considered foster parent training. Required training is to address needed in-service training for improving the skills of the foster parent.

COMMENT: 441-117.9(2) Trainer fees. If you change the fees... you only pay [foster parents] 15.00 per hour you are not going to have [foster parents] as trainers. This should stay the way it is, it already doesn't allow travel time etc. (Seemann)

RESPONSE: The rule on the training fees for foster parents and social workers who are trainers was moved from 156.18(3) into 117.9(2). It states: "Foster parents and social workers who serve as trainers for approved preservice training programs shall each be paid a contract fee per class hour appropriate to community standards based on the education and experience of each trainer. These rates shall be negotiated between the *entity that contracts with the department* and the trainer." This

is the same wording as the current rule except for the italicized part, which was changed to clarify that arranging for preservice training is the responsibility of the Department's recruitment and retention contractor.

COMMENT: 441-117.3(237) You need to put something in for trainers that cancel so we can still get a substitute trainer. (Seemann)

RESPONSE: It is responsibility of the trainer or the agency contracting with the trainer to provide a substitute trainer and not the responsibility of the Department.

COMMENT: 113.18(2) Discipline-regarding training on restraints. A LPHA person doing the assessments often does not provide the services to the family or the individual. So the LPHA assessor would not be teaching this the providers of the remedial services would be. (Seemann)

COMMENT: “*Clarify the requirements on training and discipline of foster children and provide that if the child's treatment plan includes the use of restraints, the foster parents shall receive training in the safe and appropriate use of restraints*”. Yes! Now you've got the idea! Good change! (Hill)

COMMENT: Need some sort of prescribed training for restraint use and identify who approves the training? Will this count toward 6 hour foster parent training? (Bolie)

RESPONSE: This rule amendment is saying the licensed practitioner of the healing arts (LPHA) is to approve as part of the treatment plan the need for the foster parent to receive restraint training. The rule is not stating that the LPHA would be providing the restraint training. DHS will not be providing any training for restraint. The recruitment and retention contractor will assist the foster families when there is a need identified for restraint training and will work with the Department to get approval of that training. If approved, the hours would apply to the training hours for foster parents.

COMMENT: The correct web address is <http://www.fosterparents.com>. (Magnall)

RESPONSE: We have corrected the web address for fosterparents.com.

## **CPR/First Aid**

COMMENT: I'm concerned about the amount of training that is expected of new foster parents in that first ten months after they receive their license. If I'm reading the rules correctly, they need to complete the Mandatory Reporter training, the Universal Precautions booklet, the Medication Management booklet, CPR training, and First Aid training all within ten months. That seems an excessive amount of classes to complete in a short timeframe, especially considering the fact that they will have just completed the 30-hour PS/MAPP training. (Magnall)

COMMENT: I support [foster parents] having CPR, first aid, and med management training. However, it appears that new [foster parents] will need to complete these things as well as mandatory reporting and PS:MAPP and 6 hours of training credit all within a 1 year time frame. This is 43 training hours in a years time. I feel this requirement in this period of time may discourage new foster parents. However, in the past if you look at the list of approved trainings you got training credit for CPR, med management etc. (Seemann)

COMMENT: In the first year of licensure it is clear that families get credit for Medication Management (one hour) and Mandatory child abuse training (2 hours). **Suggestion:** Clarify that families also get credit for CPR and First Aid and designate the number of hours for each. (Malone)

RESPONSE: The 30-hour PS-MAPP training is required pre-service training is completed before licensure. Within the first year of licensing, new foster parents have 10 months to complete the 6 hours of in-service training. Three of the 6 hours of in-service training shall include the two hours of credit for CPR/First Aid classes and one hour of in-service training credit for the Medication Management training (which is a short 12 page booklet that has an open-book 10-question multiple-choice test at the end of it).

COMMENT: I believe that some of the required training additions such as CPR and First Aid classes are requiring the foster family to go beyond what is expected of parents. It is not a requirement for the birth family to have this training to get their children reunited with them. This is not a requirement for a typical family household so that they can have children. Although, I think the thought behind this is good it is just adding more on the foster family who should have already proven through their training and home study that they are equipped to care for children. I do think that if you are taking on certain medical needs then perhaps that could be encouraged but for a typical household it is unnecessary. (Duval)

COMMENT: 911 is who I'd call, if something was required of me before they came, they'd tell you how to do it. With just a little training/knowledge and rarely using it, a time of emergency is not a time to practice or try to remember under duress, how to perform a procedure. It could cause more damage, esp. to younger children. Someone is not using common sense with this proposal. (Schumacher)

RESPONSE: It could be very difficult to try to understand and apply instructions from a 911 operator for CPR when you are in a stressful emergency situation. It is best to be prepared and know CPR before the need arises. The rule requires repeating CPR training every three years, which should assist with retention of the CPR process. The CPR/First Aid training was recommended by the Child Death Review Team and is also a requirement for registered child care homes. The training provides you the knowledge to use in other situations where a person or family member may need CPR or First Aid and you may be able to assist them and save their life.

COMMENT: Will first aid class be required by a foster parent who is a registered nurse with current license? (Putman)

RESPONSE: If you are a registered nurse with a current license, you can provide a copy of your current license with your request for an exception to policy to allow you to not take the First Aid class. If the exception to policy is approved, you will not be required to take the First Aid class as long as you maintain your current license.

COMMENT: Will this [CPR and First Aid] count toward training hours and will it be available free of charge??? ...This should be provided by the department at no cost to foster parents! (Hill)

COMMENT: Where is the money coming to pay for the CPR/First Aid requirements? Foster parents expected to pay out of pocket yet again for these? What if a foster parents cannot pass the physical expectations for the CPR expectations?? Deny them? (Brunsvold)

COMMENT: The cost of the classes (typically \$30-\$40 per person for CPR and \$50-\$60 for First Aid) is also of concern. That would be a significant expense, especially for two-parent families. (Magnall)

RESPONSE: CPR and First Aid training will receive two hours of credit towards the required 6 hours of annual in-service training. The CPR/First Aid classes are required every 3 years, not every year. Foster families will need to seek out the training within the area where they live. There may be a cost associated with the training. Community service organizations may offer these classes free or at a minimal cost. Foster families do receive a \$100 stipend when they renew their license to help defray the cost of training.

If a foster parent does not have the physical ability to perform CPR, the Department would look at this on a case-by-case basis to address this expectation.

COMMENT: Persons are sadly misinformed about the ability to perform CPR via website. It is likely no one has researched what the applicant must do to recertify. (Cummins)

RESPONSE: The Department agrees that CPR classes should not be completed on a website. These rule amendments do not allow foster parents to complete CPR via a website as they must take the CPR class in person as it is important to show how CPR is performed and to test the person in their ability to perform CPR.

## General Comments

COMMENT: The requirements are far above and beyond normal expectations for a typical foster family care placement. If funding matched that of group care payments, maybe we'd consider continuing. Requirements fall within that realm, not a family setting. Children are getting more needy and difficult and children in this category at one time, would have been placed in group homes. They are no longer available, so foster families are receiving them. Pay is minimal but expectations to care for the children with little or no support from the community, plus many licensing requirements, are pushing good families away. You are expecting group care on family care prices. We remain a family, not professional caregivers offering equivalent services from hospitals etc.

Requiring CPR, locked meds, specific size to windows, First Aid classes, force to work with [foster children's biological] families, allowing [biological parents] to determine cultural/religious preference (most likely never had them before but [biological parents] will use that as a power play, if that were the case and they had positive spiritual and cultural training, kids wouldn't be in foster care), pets having to have annual vet visits for immunizations, etc. (many farm animals never see a vet and are perfectly safe/healthy (we don't live on a farm but did at one time and could not have afforded this if we wanted to), and many other proposals that don't really have a lot to do with nurturing a child. If these requirements were mandatory for all parents, we wouldn't have a need for foster care. You are pushing families away.

I do think we have too many families licensed that shouldn't be and they give good families a bad reputation. The same with adopting children. A few would be fine, but folks adopting and having 6+ kids in this day and age do not have the right motives. If SDHS charged to adopt like other agencies, you wouldn't see it happening. If you offer money, dah...they make a career out of it. I work as a counselor in an educational setting and see it all the time. It happened to a sibling group we had recently. Preadopting 4 after having 5 already. Something's not right and the system allows it. That's a problem.

We've been successful for the most part and worked with [biological parents] that demonstrated that was in their best interest, but deciding where we should keep meds, what medical training we should have etc. isn't practical...If families have been caring for children for years and have been successful without all these proposals, maybe those factors should be considered. It's quite evident that legislating morality hasn't worked and legislating foster families to this extent won't either.

It's like the government telling schools how to run themselves or insurance companies dictating to [doctors]. It's not effective and causes further problems. Fix what's broken but don't recreate what doesn't have to be changed. Or consider addressing problem areas with the family, not punish everyone. This system will never be great due to the nature of the client...they are human. Please rethink many areas of proposed changes or plan on fewer foster families willing to provide this service. (Schumacher)

RESPONSE: These requirements for foster parents are less than those for providing child care in a registered child care home.

The foster care maintenance payment has been increased by the Legislature the last four years. Iowa's reimbursement is higher than many states'. The foster care maintenance payment is approximately 70% of the amount that USDA estimates it costs to raise a child in each age range in the Midwest. DHS also provides an additional annual clothing allowance if needed, tangible goods, ancillary services, school fees, and child care.

Families who adopt sibling groups of children and meet the requirements for adopting special needs children provide permanency for these children. The adoption subsidy payments are similar to the foster care maintenance payments to help support the needs of the child though do not provide 100% of the cost to raise a child. The children are also eligible for Medicaid for health care costs.

COMMENT: I am very disappointed in some of the changes...: not being able to smoke in our own homes, having to have CPR and first aid classes and transporting kids to visits with their families. My rebuttal would be one of does the biological parents have the same rules? We are looking more and more like we are group homes and not foster homes. You want to make all of these changes for us and yet want us to continue with the same pay? I would really like to know who the people are that are making the changes and ask them to walk in our shoes for a month. See how much we already do and why we foster children. I guarantee you that you will lose foster homes and with as many people that I have talked to about the changes and such, who will you have to help recruit other families? Foster families are some of your best recruiters and from what I am hearing, they say that no way would they encourage anyone to get into doing it at this point. Maybe you need to send out a survey to the foster parents and really get their take on things? (Jenkins)

RESPONSE: The Department did post a draft of these rules on our Web site. Many foster parents responded with their comments before these rules were Noticed and we did make some changes to the draft rules in light of their comments before we Noticed them. The Child Death Review committee recommended requiring CPR and First Aid training.

One of the DHS service areas has pre-removal conferences where the child's parents meet the foster parents where the child will be placed. This has significantly reduced the hostility of the child's parents in regards to the foster parents. The Parent Partner program also assists the child's parents in understanding the system, and they are also invited to the pre-removal conferences.

If there is a very hostile situation, the Department can evaluate it on a case-by-case basis and foster parent engagement with the foster child's birth parents could be waived. We do understand that you need to keep your own family safe. We also know that foster parents can provide effective role modeling for birth parents around many aspects of parenting and, if safety is not an issue, then foster families need to be a resource.

## **Licensing Procedures**

COMMENT: Both foster parents should be available for licensing initial & renewal visits. (Bolie)

RESPONSE: We agree that both foster parents need to be at the initial licensing visit and for renewal licensing visits. If both cannot be available at the same time, the licensing worker would still need to set up a visit with each foster parent before licensure is completed.

COMMENT: Since August 2008 approximately 85% of unannounced visits in Scott County were completed the same day as the renewal visit or within 3 weeks after the renewal visit. This seems

inappropriate as it seems a true unannounced visit should be done around 6 months before the renewal visit. Can a time frame be included that requires the unannounced home visit to be done at least 4-6 months prior to license expiration? If there is no specified time frame the current practice will probably continue. (Norbo)

COMMENT: Unannounced visits need to occur prior to certain point in licensing year. Frequently visits occur the same day as the licensing visit but done by a different IKN staff, the day or week prior or in the same month as renewal visit. Maybe the purpose of the announced visits should be better defined. (Bolie)

RESPONSE: Unannounced visits are not to take place the same day as the renewal visit, as the renewal visit is announced. It is important to see the foster family and their home when they are not expecting a visit from the licensing worker. The purpose of the unannounced visit is to assess the quality of the living situation and determine compliance with licensing standards. While the rule does not require an unannounced visit to take place at least 4-6 months before license expiration, it is important not to require a set time for the unannounced visit.

The policy manual does sufficiently address unannounced visits and announced visits. For example, the policy manual states that unannounced visits are “intended to provide a glimpse at an average day in the foster family home. The interaction and quality of care in the home is of major importance. The visit shall occur during periods of the day when the child and the foster parents would normally be at home and awake, unless there is a specific complaint about the family and care of the child.” The issue is a contractor expectation, and DHS will address it through the contract oversight.

COMMENT: Disagree with the proposed requirement that foster parents must submit copies of marriage certificates or divorce decrees. This has no bearing on the recruitment or retention of quality foster parents and marriage or divorce status should not be a determining factor in issuing a license. (McGuire)

RESPONSE: We agree to remove this requirement. However, if the foster family also wants to be approved as an adoptive home, copies of the marriage certificates and divorce decrees are required for approval.

COMMENT: Develop new forms that are multi-page rather than having applicants submit several different forms to become licensed and/or renew their foster care license. Have one application that would cover Foster Care and/or Adoption rather than two separate forms. (Jones)

RESPONSE: The impact and cost of having a multipage-document for the different forms required for becoming a licensed foster parent has not been evaluated. We will consider this option when we update our forms.

## Adoption

COMMENT: [Consideration of the foster family for adoption of a child who has been in] “*care for one year or longer*” The year requirement should not be there at all, maybe 3 to 6 months, at most! Especially for young kids whose permanency SHOULD be addressed within 6 months!!! (Hill)

RESPONSE: The Department agrees to change subparagraph 200.4(3)“b”(4) as follows:  
“(4) Foster parents shall be given consideration for selection as the adoptive family for a child in the foster parents’ care who is legally available for adoption if the child has been in the foster parents’ care for six months or longer, or the child has a significant relationship with the family.”

COMMENT: Change Rule 200.4[3][b][2] to read as follows: “Race, color, or national origin may not be routinely considered in placement selections except when an Indian child is being placed pursuant to Iowa Code Sec. 232.7 and Sec. 232B. Placement decision shall be made consistent with the best interests and special needs of the child.”

**RESPONSE:** The Department agrees to change subparagraph 200.4(3)“b”(2) as follows:  
“Race, color, or national origin may not be routinely considered in placement selections except when an Indian child is being placed pursuant to Iowa Code Sec. 232.7 and Sec. 232B. Placement decision shall be made consistent with the best interests and special needs of the child.”

## Foster Care Services

COMMENT: Change the preamble to Rule 202.6[1] to read as follows: “At the time of placement, the worker shall provide the facility with specific information regarding the child including the case permanency plan; the results of a physical examination; the child’s medical needs including special needs of HIV, behavioral patterns including safety-related information, and educational arrangements; statement as to whether the child is an Indian child, and if so, the identification of the child’s Tribe and Tribal Social Service agency with telephone number and contact person; the placement contract or agreement; and medical authorization, service authorizations, and other releases as needed.” (Chandler)

**RESPONSE:** We agree to add the following requirement to **subrule** 441 202.6 (1): (12) If the child is an Indian, the identification of the child’s tribe and tribal social service agency with telephone number and contact person.

COMMENT: Asthma – not always known at the time of initial placement. Good practice but could lead to multiple moves. (Bolie)

COMMENT: This [*The department shall not place a child with asthma or other respiratory health issues in a foster home where any member of the household smokes.*] is not right at all, especially if smoking is not in the home or in a car the foster child rides in! Maybe OK to require moving a child who has an asthmatic reaction to something in the home including smoke on clothing, but most of the asthmatic kids live with parents that smoke away from them and are just fine. This is not right (Hill)

RESPONSE: Children who have identified respiratory disease need to be placed in a smoke-free environment. DHS is trying to maintain stable, healthy placements in the most appropriate environment. If the child has a physical before being placed into foster care, the placing worker should know if the child has respiratory issues such as asthma.

COMMENT: Genogram - who does this? Is it required for matching i.e. does IKN get/need a copy? (Bolie)

RESPONSE: The Department worker would do a family genogram to determine relatives and other suitable support persons who have a kinship bond with the child when determining the need for a foster care placement. The purpose is to determine whether a relative could be considered for the child’s placement. Iowa KidsNet could have a copy of the genogram to assist with matching .

## Relative Placements

COMMENT: I have found that there is very little mention concerning relative placements [in the Notice of Intended Action]. Page 6 states "add requirements on record checks for relative who may accept

placement of the child", however that is about the only place relatives are mentioned. Is that all that relatives will be required to do to have a child placed in their homes? A background check?

Why do relatives not have to go through PS-MAPP class? Should they not show financial information that they have the ability to provide for a child? Be checked for substance use or abuse by family members? Have someone from Kidsnet in their home, looking in their cupboards and closets, measuring windows and bedrooms? Is the home smoke free, etc....

It appears that relatives are not held to the same standards as foster/adoptive parents? Why are relatives not included in this Notice of Intended Action?...should not the [Notice] read..."foster parent, adoptive parent and relative parent" so that the relatives are held to the same high standards as foster/adoptive parents? (Frese)

RESPONSE: The reason that the proposed rules do not refer to relatives is that the Department was not making changes in the administrative rules specific to relatives. The Notice of Intended Action is to amend some administrative rules for licensing and approval of foster/adoptive families that were not specific to relative placements. There are additional requirements for relative placements beyond those referenced in the proposed rule changes. When reviewing these rule amendments, one needs to look at the whole rule chapter in context with the amendments to better understand the changes.

The federal government expects states to make diligent efforts to locate and assess relatives as potential placement resources for children. The federal government further expects states to place a child with relatives unless the child needs specialized placement (such as residential treatment), relatives are unknown or unwilling to care for the child, or the state has documented the reasons for ruling out placement with relatives.

As a result, the Department works hard to locate and identify relatives that can provide a safe and stable placement when a child must be removed from their parents and placed in foster care. Placing children with relatives benefits a child by:

- Allowing for the least restrictive placement with a family that the child has a relationship with, thereby reducing the trauma of removal and placement.
- Allowing families to rely on their own family members and resources.
- Supporting the family's ability to provide continuity and permanency.
- Supporting the transmission of a child's family identity, culture, and ethnicity.
- Supporting and enhancing opportunities for children to stay connected to their biological relatives (especially siblings) and their own communities.

Research has identified a number of benefits for children that are placed with relatives versus non-relative foster homes including

- Fewer placement changes than children placed with non-kin foster parents; 1
- Less likely to have tried to leave or run away;
- More likely to report wanting their current placement to be their permanent home; and
- Less likely to re-enter foster care after being reunified with their parents (experience greater stability)

(Source: Center for Law And Social Policy report March 2, 2007 by Tiffany Conway and Rutledge Q. Hutson.)

Relatives are held to the same standards as foster/adoptive parents if they apply to be a licensed foster parent or an approved adoptive parent. Relative caregivers that are not licensed are held to all relevant state child protection standards

The primary reason for not requiring relatives to meet all of the licensing/approval standards for foster care/adoption is that doing so could pose an unnecessary barrier to placing children with relatives and would make it very difficult to place children with relatives at the time of initial removal. The Department does complete record checks on relatives before placement and relative home studies are completed.

Relatives are not required by administrative rule or law to complete PS-MAPP classes, unless the relative applies to be a licensed foster parent. PS-MAPP is required only for persons applying to be a licensed foster parent or an approved adoptive parent.

The Department may waive part or all of PS-MAPP training for persons applying to be a licensed foster parent or an approved adoptive parent in certain situations when:

- The applicant has completed relevant training or has a combination of relevant training and experience that is an acceptable equivalent to all or a portion of the required pre-service training; or
- There is good cause for the waiver based upon the circumstances of the child and the applicant.

Relative caregivers can receive training and support through the Iowa Foster and Adoptive Parent Association (IFAPA). IFAPA has the Kinship Connections Project that provides resources, support, and information to relative caregivers.

COMMENT: How does relative placement work? (Frese)

RESPONSE: The Department is required to make every reasonable effort to place the child in the least restrictive, most family-like, and most appropriate setting available, and in close proximity to the parents' home, consistent with the child's best interest. We look first to place children who are removed from their parents' home with relatives who are capable of offering a safe, stable, and appropriate home.

The Department is now also required to notify relatives within 30 days of the date of removal of the child, and to provide them information about the options they have under federal and state law to participate in the care and placement of the child.

This is what a Department caseworker would do in regards to relative placements:

When a potential placement is identified, the person's name, address, phone number, and relationship to the child are obtained. The parent or caretaker signs a release of information so the Department can contact this relative. The Department contacts the relative to see if the relative would care for the child.

As described in the DHS *Employees' Manual* 17-F(3), Topic 7, "Relative Placements," DHS requires that the following activities must be completed to assess the safety of the placement:

- Home visit and identification of all persons living in the home.
- Checks with local law enforcement and the Sex Offender Registry on all individuals over the age of 14 who are living in the home.
- Child abuse and criminal history checks on all adults living in the home.

When an appropriate relative placement is identified:

- A signed consent is obtained from the parent to add the relative to the family team.
- The date of birth and social security number of the relative is obtained.
- A child abuse check and criminal history check is completed.
- The relative signs a statement that confirms that the relative has no prior felony convictions or previous founded child abuse reports.

- Placement evaluation and home inventory for approval, is completed by a DHS or provider worker or licensing person. If a provider worker completes any of the evaluation or home inventory activities, the provider must notify the DHS worker immediately of any safety concerns.
- A home visit is conducted to determine the physical safety of the child and the home.
- An evaluation of the relative's ability to meet the needs of the child is completed, specifically:
  - Safety of the placement.
  - Stability of the placement: the caregiver's relationship with the child and ability to protect, nurture, and care for the child for an extended period.
  - The caregiver's ability to meet the developmental needs of the child, considering the health, age, and special needs of the child.
  - Existing supports, including to maintain the child in the usual school, activities, and structure.
  - History of substance abuse, domestic violence, or mental illness.
  - The caregiver's ability to work cooperatively with the parent, DHS, and the court.

When a child is placed with a relative, waivers for foster care licensing may be considered on a case-by-case basis. Family-centered family safety, risk, and permanency services are available to maintain the child's placement within the home of a relative.

COMMENT: Are relatives paid? Will they be paid in the future? (Frese)

RESPONSE: Relatives can apply for FIP (Family Investment Program) benefits for the child, as the child in most cases will be eligible for Caretaker FIP and Medicaid for the child's health care needs. Currently the maximum FIP grant for one person with no income is \$183 per month. If a relative adopts the child and the child meets the eligibility requirements, the relative could receive an adoption subsidy.

The relative can also become a licensed foster parent. A relative who becomes a licensed foster parent would receive the foster care maintenance payment based upon the needs of the child.

COMMENT: After a child(ren) is placed with a relative, who checks on the child(ren)? How often during the first year of placing the child(ren)? (Frese)

RESPONSE: When the Department has an open case on the child, or when the court has determined the child is a Child in Need of Assistance and is placed with a relative, the Department caseworker must visit the child at least monthly. Juvenile court reviews the case every six months. Once a child is placed with a relative, the oversight and supervision by DHS and the court is no different than for a placement in a non-relative licensed foster family.

## **Foster Family Payments**

COMMENT: 156.10(2)...it appears that the foster family that has the child gets paid for the child being absent but does not appear to pay the pre-adoptive family. In addition there should be some reimbursement for pre-placement visits (foster/adoptive) parents to be compensated for travel expenses at the minimum for going to get the child for pre-placement visit. [Foster parents] are upset that there is not reimbursement for this and no respite payment if they go to get children from PMICs or group care for a pre-placement visit. If you want foster parents to take this kids we need to compensate them. (Seemann)

RESPONSE: The foster parent does receive a reserve bed payment when there is a preplacement visit to another foster care placement or a preadoptive placement, as outlined in 441--paragraphs 156.10(1)"d" and 156.10(2)"d." The Department would need to submit a budget request to pay for

expenses directly related to preplacement visits. However, respite is available for children already placed in your foster home up to 24 days per placement per calendar year that you can request to use when you go to get a child from a PMIC or group care facility.

COMMENT: With payments staying the same in years, I believe we could increase others necessary areas like training hours, and not mandating they take certain things that are costly with no way to reimburse them. (Brunsvold)

RESPONSE: The Iowa Legislature has provided an increase for foster care maintenance payments for the last four years. The basic foster care maintenance rate in state fiscal year 2005 for a child up to 5 years of age was \$14.28 and the current maintenance rate is \$16.36. The training requirements (CPR/First Aid, etc.) attribute to the health, safety, and well-being of the foster child. Foster parents receive \$100 each year to use towards their yearly in-service training when they renew their license.

The Iowa Code requires payment of 65% of the amount that the United States Department of Agriculture (USDA) estimates it costs to raise a child in each age range in the Midwest to foster families caring for foster children. Currently the foster care maintenance payment is approximately 70% of the amount that USDA estimates it costs to raise a child in each age range in the Midwest. The foster care maintenance payment is intended to reimburse the foster family for food, clothing, shelter, school expenses, grooming, ordinary transportation, recreation, and training appropriate for the child's age. See your *Foster Parent Handbook* for a chart around reimbursement rates and coverage. In addition, all children in family foster care are eligible for Medicaid to pay for medical expenses for that child.

COMMENT: [Recovery of overpayments should be made] Only with appropriate time for repayment arrangements, workers can mess up this whole thing and I have had to straighten it out before at least 3x. (Hill)

RESPONSE: The repayment plan will be set up between the foster parent and the DHS placement worker.

COMMENT: 441-156.8(234) clothing allowance-refers to second clothing allowance-does that mean the first clothing allowance remains the same \$250, and that only in extenuating circumstances will a second one be issued in subsequent years? (Seemann)

RESPONSE: These rule amendments did not change the amount that is provided for the clothing allowance. The initial clothing allowance is still \$250. An additional clothing allowance of \$200 for family foster care may be approved not more than once during each calendar year if the foster child needs to replace lost clothing or because of unusual growth or weight change and the child does not have sufficient escrow funds to cover the cost of more clothing. Clarification of the clothing allowance will be addressed in the *Foster Parent Handbook* and DHS manual.

## **Child Care for a Foster Child**

REFERENCE: 156.8(8)“b” Child care services when the foster parents are working, the child is not in school, and the provision of child care is identified in the child's case permanency plan.

(1) Child care services shall be provided by a licensed foster parent or a licensed or registered child care provider when available.

(2) *When foster parents elect to become child care providers, they shall be registered pursuant to 441-Chapter 110. However, foster parents shall not displace a foster child to another child care facility to benefit their child care business.*

COMMENT: I have a childcare business from home. I do not agree that a childcare provider should have to provide care to younger foster children. This would mean that a provider has to always have an opening available at any given time. Also, if a child has challenging behaviors then a provider would not get a break. I have cared for younger foster children and also taken them to a childcare center/provider. It should depend on the children and circumstance. (Schmit)

COMMENT: When I first looked into whether I could charge the state for my foster care children as clients in my home daycare I was told "No". There are many home daycare providers who would make great foster parents but they have to worry about the foster children taking up a spot in their home daycares. If the parents could send the foster to another daycare the child's daycare would be paid for and they could still keep their own daycare at capacity.

I do feel that for some of these young children it might be better to stay at home with their foster parent when that foster parent does home daycare however I feel that the foster parent should then be allowed to bill the state for child care services like any other client in the daycare. As a foster parent and daycare provider I would prefer to keep the foster child in my home and home daycare but it would relieve a financial burden if I could charge the state for the price of the daycare spot that child fills everyday they take up a spot in my home daycare.

... Home daycare providers deserve to make a living and shouldn't have to take a financial hit to their home business just to take in a foster child. I say let the home providers charge the state for the daycare spot the child is filling during the daycare operational hours or let them take the child elsewhere during the day so that the child doesn't fill a spot in the family's home daycare business. (Phipps)

COMMENT: I think this is extremely unfair and prejudicial. If I have to keep my foster child with me that will lower my income and depending on the age of the child it could lower my ratio thus majorly lowering my income. Another point I would like to make is that we foster parents need a break too. If I were to take on a more challenging child and be with them 24/7 this may cause me to have a higher burnout rate where as if that child were to go to another daycare it would provide both of us a break as too not overwhelm either me or the child. I very much enjoy being a foster parent and I would hate to have to give it up because of the change that you are proposing. (Hawkins)

COMMENT: I believe it is neither fair nor realistic to expect a foster parent with an established in-home daycare to "count" the child when they will not be reimbursed for such daycare. Instead of penalizing them for having a home business, why don't we pay for the spot that the child is taking? Please reconsider this punitive change to the foster family policy. (May)

COMMENT: does this mean that there will not be an allowance for that child to have her business, have a foster child but get no extra payment for the [foster child] that if she did not do child care she could get child care paid for? It seems that this needs to be change to not penalize our good child care providers. (Seemann)

COMMENT: I believe that a business should be treated as such. If your income is effected by a foster child(ren) then you should have the right to place the child in a daycare while your hours of business are in operation. The time you would not allow this is if you had adopted the child. (Hintz)

COMMENT: I strongly object to the proposed change that will only affect Foster parents who are day care providers for their income. I am single and the day care income allows me to pay my bills. I do not see any other profession listed that would have to decrease their income by fostering non school age children. Young foster children, day care children and foster parents who do day care are being discriminated against with the new proposal. Please do not make this change. (Broadwater)

COMMENT: ...we are [a Category] A daycare so I have limited spots giving up two spots for my own children, which limits are income as a family business, it takes everyone in the family to make it work. foster parents classes should transfer over to daycare credit hours, my business goes 24/7, holidays, weekends. If we didn't we could not make it. It should be not required to be [registered] to provide daycare, we are registered to provide foster care which takes more time and money and love, energy. (J E)

COMMENT: I do in-home daycare. We take in young foster children as that is what our home is set up for. Our foster children do go to daycare outside of our home for many reasons. Sometimes these children come in on an emergency basis or temporary basis. If this is the case, this affects our household income for a private paid family that could be filling this daycare spot.

Many times these children have visits 2-3 times per week and are not in the home for multiple hours at a time. We could have a paid child using that spot which would affect our income. If you don't have enough income, you cannot take in foster children...

Why is it any different from other people who do work from home and need to put their foster children in daycare so that they can perform their work duties such as home tax preparers, medical transcribers from home, or many of the other employers who are now having employees do their jobs from home to cut costs?

So would this need to be something where we fill a spot with a private paid person, then get a call for a foster child that we get a call for and decide to take, have to give notice on that child who we are getting paid to watch, take the foster child who ends up only staying for two weeks, then we have an open daycare spot and are out that income. Doesn't make a lot of sense. Seems like you may lose some good foster homes at a time when you are desperately trying to recruit homes.

Also with registered daycare, you already dictate our income as it is, so now you are saying that you want to control us even more if we do this favor to society and take in foster children. Isn't that what we are doing is opening up our doors and our life to children who need a loving home and family but now we are going to have our income jeopardized because we do daycare?

In addition, it is very beneficial for children to go somewhere outside of their own home for childcare so when they do go to school that anxiety and attachment to their parents is easier to overcome. If they are never away from their home or parents, it is very difficult for children when they go to school. I think this seriously needs to be reconsidered. (Duncan)

COMMENT: This would effect me greatly as I keep my business and my family life totally separate. My business is my income. I will not be able to have foster children take spots away from my daycare in order to stay with in compliance. I feel you will lose many wonderful foster homes because of this. I simply will no longer be able to provide the much needed emergency foster care and or protective daycare because of this change. I have two spots that I leave open for emergency care which I generally have full at all times. This is very unfair to focus on just in home child care providers when there is many other in home businesses that require foster parents to take their foster children to other daycare while they run their business. Please let me know what else can be done to avoid such a terrible mistake. Iowa can not afford to lose good foster homes. (McDonald)

COMMENT: Are there federal rules that prohibit this? Can there be rules that prevent foster parents from having a day care that is primarily foster children (this is then double dipping); but allow one or two slots to be for their own foster children? How do other states handle this? **Suggestion:** Feedback and comments reflect agreement that no child should be displaced to another child care facility to benefit their business. However, since day care licensing rules limit the number of children allowed in a day care setting, it is suggested that foster parents who run day cares should be paid out of child care funds for those children. (Malone)

RESPONSE: We agree to delete the sentence prohibiting a foster parent from sending a foster child to another child care facility. Please note that the service area manager must authorize reimbursement for child care, and the provision of child care must be identified in the foster child's case permanency plan.

Every case is treated individually based upon the needs of the foster child. There are times when it would be appropriate to have the foster child in child care for a therapeutic need of the foster child. This would be addressed in the foster child's case permanency plan as a need for the foster child and the service area manager or designee would need to approve reimbursement for child care.

~~The foster child shall remain in the foster parent home during the child care hours of business unless there is a documented reason for the foster child to receive child care in a separate setting to meet their special needs.~~ [don't see how we can say this when we took the sentence out.] A family that is having difficulty providing care for a foster child with challenging behaviors should talk with and seek support from Iowa KidsNet and the Department placement worker.

## Medical Approval

COMMENT: Policies that should be in place in some instances are NOT. I had a really bad situation arise with the signing of consents when a pregnant teenager was in my care and about to deliver and the lawyer/guardian would not sign and no one seemed to know the protocol when that came up with a 15-year-old in labor and needing an epidural and then a possible C-section. Nobody seemed to know what to do at DHS and things sure could have turned out differently. (DeBow)

RESPONSE: Page 82 of your *Foster Parent Handbook* addresses "Communicating in an Emergency" and Page 43 of your *Foster Parent Handbook* addresses "Consents and Authorization for Medical Care": "You do not have the authority to consent to medical care. Only the child's parent or guardian may consent to such care, except that the legal custodian may consent to emergency care. If the child needs care and the parent refuses to consent or is unavailable, the court may order medical care. If a medical professional recommends specific treatment or testing for a foster child, contact the child's social worker. The worker will seek the parental consent. If DHS has custody or guardianship of the child, DHS can consent to emergency care. There may be other circumstances where the social worker will seek a court order regarding the medical or dental care for a child."

We do not know whom you spoke to about this situation at DHS. It is unfortunate that they did not connect you with the child's caseworker or a supervisor who could have granted permission if the child's parent was unavailable or did not consent to the needed care. The lawyer or guardian ad-litem for the child cannot grant permission.

## Respite

COMMENT: I am concerned and confused at why we would not be allowed to leave our foster children with a family daughter that is married with her own children and is like an Aunt to the foster child. My teenage foster girls would much rather stay with my married 36 year old daughter with a teenage daughter than have to go to a stranger in respite. This seems very not in the best interest of the child. Who would know them better? Who would know what to watch out for and how to safe guard better, one who is around them or a complete stranger to them. Also there is hardly enough respite givers now, what happens when our family is no longer able to help us out, where do we find respite? (King)

RESPONSE: To be reimbursed, respite must be provided by a licensed foster parent. You can request respite care for children already placed in your foster home for up to 24 days per placement per calendar year. You should contact your Department worker to assist you in finding a respite provider. You can use your adult daughter if you are not requesting payment for respite and this arrangement has been approved by the caseworker for the foster child.

### **Removal of the Foster Child**

COMMENT: 202.13(3) "department furnishes notice" they should be required to furnish notices in WRITING. (Seemann)

RESPONSE: The Department does provide written notice of removal according to 441—202.13(1) which states: “ the facility shall be informed in writing of the date of the removal, the reason for the removal, the recourse available to the facility.” Foster homes are defined as facilities. The process in place for when written notice is required can be found in DHS manual chapter 18-D.