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State of Minnesota

HOUSE OF REPRESENTATIVES

NINETY-SECOND SESSION

H. F. No. 1340

1.1 A bill for an act

1.2 relating to children; modifying requirements for the responsible social services

1.3 agency placing children in qualified residential treatment programs; amending

1.4 Minnesota Statutes 2020, sections 245.4885, subdivision 1; 245A.02, by adding

1.5 subdivisions; 245A.041, by adding a subdivision; 260C.007, subdivisions 26c, 31;

1.6 260C.157, subdivision 3; 260C.212, subdivisions 1a, 13; 260C.452; 260C.704;

1.7 260C.706; 260C.708; 260C.71; 260C.712; 260C.714; 260D.01; 260D.05; 260D.06,

1.8 subdivision 2; 260D.07; 260D.08; 260D.14; 260E.36, by adding a subdivision;

1.9 proposing coding for new law in Minnesota Statutes, chapter 245A.

1.10 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.11 **ARTICLE 1**

1.12 **FAMILY FIRST PREVENTION ACT UPDATES**

1.13 Section 1. Minnesota Statutes 2020, section 245.4885, subdivision 1, is amended to read:

1.14 Subdivision 1. **Admission criteria.** (a) Prior to admission or placement, except in the

1.15 case of an emergency, all children referred for treatment of severe emotional disturbance

1.16 in a treatment foster care setting, residential treatment facility, or informally admitted to a

1.17 regional treatment center shall undergo an assessment to determine the appropriate level of

1.18 care if public funds are used to pay for the child's services.

1.19 (b) The responsible social services agency shall determine the appropriate level of care

1.20 for a child when county-controlled funds are used to pay for the child's services or placement

1.21 in a qualified residential treatment facility under chapter 260C and licensed by the

1.22 commissioner under chapter 245A. In accordance with section 260C.157, a juvenile treatment

1.23 screening team shall conduct a screening of a child before the team may recommend whether

1.24 to place a child in a qualified residential treatment program as defined in section 260C.007,

1.25 subdivision 26d. When a social services agency does not have responsibility for a child's

2.1 placement and the child is enrolled in a prepaid health program under section 256B.69, the  
2.2 enrolled child's contracted health plan must determine the appropriate level of care for the  
2.3 child. When Indian Health Services funds or funds of a tribally owned facility funded under  
2.4 the Indian Self-Determination and Education Assistance Act, Public Law 93-638, are to be  
2.5 used for a child, the Indian Health Services or 638 tribal health facility must determine the  
2.6 appropriate level of care for the child. When more than one entity bears responsibility for  
2.7 a child's coverage, the entities shall coordinate level of care determination activities for the  
2.8 child to the extent possible.

2.9 (c) The responsible social services agency must make the child's level of care  
2.10 determination available to the child's juvenile treatment screening team, as permitted under  
2.11 chapter 13. The level of care determination shall inform the juvenile treatment screening  
2.12 team process and the assessment in section 260C.704 when considering whether to place  
2.13 the child in a qualified residential treatment program. When the responsible social services  
2.14 agency is not involved in determining a child's placement, the child's level of care  
2.15 determination shall determine whether the proposed treatment:

2.16 (1) is necessary;

2.17 (2) is appropriate to the child's individual treatment needs;

2.18 (3) cannot be effectively provided in the child's home; and

2.19 (4) provides a length of stay as short as possible consistent with the individual child's  
2.20 ~~need~~ needs.

2.21 (d) When a level of care determination is conducted, the responsible social services  
2.22 agency or other entity may not determine that a screening of a child under section 260C.157  
2.23 or referral or admission to a treatment foster care setting or residential treatment facility is  
2.24 not appropriate solely because services were not first provided to the child in a less restrictive  
2.25 setting and the child failed to make progress toward or meet treatment goals in the less  
2.26 restrictive setting. The level of care determination must be based on a diagnostic assessment  
2.27 of a child that includes a functional assessment which evaluates the child's family, school,  
2.28 and community living situations; and an assessment of the child's need for care out of the  
2.29 home using a validated tool which assesses a child's functional status and assigns an  
2.30 appropriate level of care to the child. The validated tool must be approved by the  
2.31 commissioner of human services and may be the validated tool approved for the child's  
2.32 assessment under section 260C.704 if the juvenile treatment screening team recommended  
2.33 placement of the child in a qualified residential treatment program. If a diagnostic assessment  
2.34 including a functional assessment has been completed by a mental health professional within

3.1 the past 180 days, a new diagnostic assessment need not be completed unless in the opinion  
 3.2 of the current treating mental health professional the child's mental health status has changed  
 3.3 markedly since the assessment was completed. The child's parent shall be notified if an  
 3.4 assessment will not be completed and of the reasons. A copy of the notice shall be placed  
 3.5 in the child's file. Recommendations developed as part of the level of care determination  
 3.6 process shall include specific community services needed by the child and, if appropriate,  
 3.7 the child's family, and shall indicate whether ~~or not~~ these services are available and accessible  
 3.8 to the child and the child's family.

3.9 (e) During the level of care determination process, the child, child's family, or child's  
 3.10 legal representative, as appropriate, must be informed of the child's eligibility for case  
 3.11 management services and family community support services and that an individual family  
 3.12 community support plan is being developed by the case manager, if assigned.

3.13 (f) When the responsible social services agency has authority, the agency must engage  
 3.14 the child's parents in case planning under sections 260C.212 and 260C.708 unless a court  
 3.15 terminates the parent's rights or court orders restrict the parent from participating in case  
 3.16 planning, visitation, or parental responsibilities.

3.17 (g) The level of care determination, ~~and~~ placement decision, and recommendations for  
 3.18 mental health services must be documented in the child's record, as required in chapter  
 3.19 260C.

3.20 **EFFECTIVE DATE.** This section is effective September 30, 2021.

3.21 Sec. 2. Minnesota Statutes 2020, section 260C.007, subdivision 26c, is amended to read:

3.22 Subd. 26c. **Qualified individual.** "Qualified individual" means a trained culturally  
 3.23 competent professional or licensed clinician, including a mental health professional under  
 3.24 section 245.4871, subdivision 27, who is not an employee of the responsible social services  
 3.25 agency and who is not connected to or affiliated with any placement setting in which a  
 3.26 responsible social services agency has placed children.

3.27 When the Indian Child Welfare Act of 1978, United States Code, title 25, sections 1901  
 3.28 to 1963, applies to a child, the county must contact the child's tribe without delay to give  
 3.29 the tribe the option to designate a qualified individual who is a trained culturally competent  
 3.30 professional or licensed clinician, including a mental health professional under section  
 3.31 245.4871, subdivision 27, who is not employed by the responsible social services agency  
 3.32 and who is not connected to or affiliated with any placement setting in which a responsible  
 3.33 social services agency has placed children. Only a federal waiver that demonstrates

4.1 maintained objectivity may allow a responsible social services agency employee or tribal  
 4.2 employee affiliated with any placement setting in which the responsible social services  
 4.3 agency has placed children to be designated the qualified individual.

4.4 Sec. 3. Minnesota Statutes 2020, section 260C.007, subdivision 31, is amended to read:

4.5 Subd. 31. **Sexually exploited youth.** "Sexually exploited youth" means an individual  
 4.6 who:

4.7 (1) is alleged to have engaged in conduct which would, if committed by an adult, violate  
 4.8 any federal, state, or local law relating to being hired, offering to be hired, or agreeing to  
 4.9 be hired by another individual to engage in sexual penetration or sexual conduct;

4.10 (2) is a victim of a crime described in section 609.342, 609.343, 609.344, 609.345,  
 4.11 609.3451, 609.3453, 609.352, 617.246, or 617.247;

4.12 (3) is a victim of a crime described in United States Code, title 18, section 2260; 2421;  
 4.13 2422; 2423; 2425; 2425A; or 2256; ~~or~~

4.14 (4) is a sex trafficking victim as defined in section 609.321, subdivision 7b.; or

4.15 (5) is a victim of commercial sexual exploitation as defined in United States Code, title  
 4.16 22, section 7102(11)(A) and (12).

4.17 **EFFECTIVE DATE.** This section is effective September 30, 2021.

4.18 Sec. 4. Minnesota Statutes 2020, section 260C.157, subdivision 3, is amended to read:

4.19 Subd. 3. **Juvenile treatment screening team.** (a) The responsible social services agency  
 4.20 shall establish a juvenile treatment screening team to conduct screenings under this chapter,  
 4.21 chapter 260D, and section 245.487, subdivision 3, for a child to receive treatment for an  
 4.22 emotional disturbance, a developmental disability, or related condition in a residential  
 4.23 treatment facility licensed by the commissioner of human services under chapter 245A, or  
 4.24 licensed or approved by a tribe. A screening team is not required for a child to be in: (1) a  
 4.25 residential facility specializing in prenatal, postpartum, or parenting support; (2) a facility  
 4.26 specializing in high-quality residential care and supportive services to children and youth  
 4.27 who ~~are~~ have been or are at risk of becoming victims of sex-trafficking victims or are at  
 4.28 risk of becoming sex-trafficking victims or commercial sexual exploitation; (3) supervised  
 4.29 settings for youth who are 18 years ~~old~~ of age or older and living independently; or (4) a  
 4.30 licensed residential family-based treatment facility for substance abuse consistent with  
 4.31 section 260C.190. Screenings are also not required when a child must be placed in a facility  
 4.32 due to an emotional crisis or other mental health emergency.

5.1 (b) The responsible social services agency shall conduct screenings within 15 days of a  
5.2 request for a screening, unless the screening is for the purpose of residential treatment and  
5.3 the child is enrolled in a prepaid health program under section 256B.69, in which case the  
5.4 agency shall conduct the screening within ten working days of a request. The responsible  
5.5 social services agency shall convene the juvenile treatment screening team, which may be  
5.6 constituted under section 245.4885 or 256B.092 or Minnesota Rules, parts 9530.6600 to  
5.7 9530.6655. The team shall consist of social workers; persons with expertise in the treatment  
5.8 of juveniles who are emotionally disabled, chemically dependent, or have a developmental  
5.9 disability; and the child's parent, guardian, or permanent legal custodian. The team may  
5.10 include the child's relatives as defined in section 260C.007, subdivisions 26b and 27, the  
5.11 child's foster care provider, and professionals who are a resource to the child's family such  
5.12 as teachers, medical or mental health providers, and clergy, as appropriate, consistent with  
5.13 the family and permanency team as defined in section 260C.007, subdivision 16a. Prior to  
5.14 forming the team, the responsible social services agency must consult with the child if the  
5.15 child is age 14 or older, the child's parents, and, if applicable, the child's tribe to ensure that  
5.16 the team is family-centered and will act in the child's best interest. If the child, child's parents,  
5.17 or legal guardians raise concerns about specific relatives or professionals, the team should  
5.18 not include those individuals. This provision does not apply to paragraph (c).

5.19 (c) If the agency provides notice to tribes under section 260.761, and the child screened  
5.20 is an Indian child, the responsible social services agency must make a rigorous and concerted  
5.21 effort to include a designated representative of the Indian child's tribe on the juvenile  
5.22 treatment screening team, unless the child's tribal authority declines to appoint a  
5.23 representative. The Indian child's tribe may delegate its authority to represent the child to  
5.24 any other federally recognized Indian tribe, as defined in section 260.755, subdivision 12.  
5.25 The provisions of the Indian Child Welfare Act of 1978, United States Code, title 25, sections  
5.26 1901 to 1963, and the Minnesota Indian Family Preservation Act, sections 260.751 to  
5.27 260.835, apply to this section.

5.28 (d) If the court, prior to, or as part of, a final disposition or other court order, proposes  
5.29 to place a child with an emotional disturbance or developmental disability or related condition  
5.30 in residential treatment, the responsible social services agency must conduct a screening.  
5.31 If the team recommends treating the child in a qualified residential treatment program, the  
5.32 agency must follow the requirements of sections 260C.70 to 260C.714.

5.33 The court shall ascertain whether the child is an Indian child and shall notify the  
5.34 responsible social services agency and, if the child is an Indian child, shall notify the Indian  
5.35 child's tribe as paragraph (c) requires.

6.1 (e) When the responsible social services agency is responsible for placing and caring  
6.2 for the child and the screening team recommends placing a child in a qualified residential  
6.3 treatment program as defined in section 260C.007, subdivision 26d, the agency must: (1)  
6.4 begin the assessment and processes required in section 260C.704 without delay; and (2)  
6.5 conduct a relative search according to section 260C.221 to assemble the child's family and  
6.6 permanency team under section 260C.706. Prior to notifying relatives regarding the family  
6.7 and permanency team, the responsible social services agency must consult with the child  
6.8 if the child is age 14 or older, the child's parents and, if applicable, the child's tribe to ensure  
6.9 that the agency is providing notice to individuals who will act in the child's best interest.  
6.10 The child and the child's parents may identify a culturally competent qualified individual  
6.11 to complete the child's assessment. The agency shall make efforts to refer the assessment  
6.12 to the identified qualified individual. The assessment may not be delayed for the purpose  
6.13 of having the assessment completed by a specific qualified individual.

6.14 (f) When a screening team determines that a child does not need treatment in a qualified  
6.15 residential treatment program, the screening team must:

6.16 (1) document the services and supports that will prevent the child's foster care placement  
6.17 and will support the child remaining at home;

6.18 (2) document the services and supports that the agency will arrange to place the child  
6.19 in a family foster home; or

6.20 (3) document the services and supports that the agency has provided in any other setting.

6.21 (g) When the Indian child's tribe or tribal health care services provider or Indian Health  
6.22 Services provider proposes to place a child for the primary purpose of treatment for an  
6.23 emotional disturbance, a developmental disability, or co-occurring emotional disturbance  
6.24 and chemical dependency, the Indian child's tribe or the tribe delegated by the child's tribe  
6.25 shall submit necessary documentation to the county juvenile treatment screening team,  
6.26 which must invite the Indian child's tribe to designate a representative to the screening team.

6.27 (h) The responsible social services agency must conduct and document the screening in  
6.28 a format approved by the commissioner of human services.

6.29 **EFFECTIVE DATE.** This section is effective September 30, 2021.

6.30 Sec. 5. Minnesota Statutes 2020, section 260C.212, subdivision 1a, is amended to read:

6.31 Subd. 1a. **Out-of-home placement plan update.** (a) Within 30 days of placing the child  
6.32 in foster care, the agency must file the child's initial out-of-home placement plan with the

7.1 court. After filing the child's initial out-of-home placement plan, the agency shall update  
7.2 and file the child's out-of-home placement plan with the court as follows:

7.3 (1) when the agency moves a child to a different foster care setting, the agency shall  
7.4 inform the court within 30 days of the child's placement change or court-ordered trial home  
7.5 visit. The agency must file the child's updated out-of-home placement plan with the court  
7.6 at the next required review hearing;

7.7 (2) when the agency places a child in a qualified residential treatment program as defined  
7.8 in section 260C.007, subdivision 26d, or moves a child from one qualified residential  
7.9 treatment program to a different qualified residential treatment program, the agency must  
7.10 update the child's out-of-home placement plan within 60 days. To meet the requirements  
7.11 of section 260C.708, the agency must file the child's out-of-home placement plan ~~with the~~  
7.12 ~~court as part of the 60-day hearing and~~ along with the agency's report seeking the court's  
7.13 approval of the child's placement at a qualified residential treatment program under section  
7.14 260C.71. After the court issues an order, the agency must update the child's out-of-home  
7.15 placement plan after the court hearing to document the court's approval or disapproval of  
7.16 the child's placement in a qualified residential treatment program;

7.17 (3) when the agency places a child with the child's parent in a licensed residential  
7.18 family-based substance use disorder treatment program under section 260C.190, the agency  
7.19 must identify the treatment program where the child will be placed in the child's out-of-home  
7.20 placement plan prior to the child's placement. The agency must file the child's out-of-home  
7.21 placement plan with the court at the next required review hearing; and

7.22 (4) under sections 260C.227 and 260C.521, the agency must update the child's  
7.23 out-of-home placement plan and file the child's out-of-home placement plan with the court.

7.24 (b) When none of the items in paragraph (a) apply, the agency must update the child's  
7.25 out-of-home placement plan no later than 180 days after the child's initial placement and  
7.26 every six months thereafter, consistent with section 260C.203, paragraph (a).

7.27 **EFFECTIVE DATE.** This section is effective September 30, 2021.

7.28 Sec. 6. Minnesota Statutes 2020, section 260C.212, subdivision 13, is amended to read:

7.29 Subd. 13. **Protecting missing and runaway children and youth at risk of sex**  
7.30 **trafficking or commercial sexual exploitation.** (a) The local social services agency shall  
7.31 expeditiously locate any child missing from foster care.

7.32 (b) The local social services agency shall report immediately, but no later than 24 hours,  
7.33 after receiving information on a missing or abducted child to the local law enforcement

8.1 agency for entry into the National Crime Information Center (NCIC) database of the Federal  
8.2 Bureau of Investigation, and to the National Center for Missing and Exploited Children.

8.3 (c) The local social services agency shall not discharge a child from foster care or close  
8.4 the social services case until diligent efforts have been exhausted to locate the child and the  
8.5 court terminates the agency's jurisdiction.

8.6 (d) The local social services agency shall determine the primary factors that contributed  
8.7 to the child's running away or otherwise being absent from care and, to the extent possible  
8.8 and appropriate, respond to those factors in current and subsequent placements.

8.9 (e) The local social services agency shall determine what the child experienced while  
8.10 absent from care, including screening the child to determine if the child is a possible sex  
8.11 trafficking or commercial sexual exploitation victim as defined in section ~~609.321,~~  
8.12 ~~subdivision 7b~~ 260C.007, subdivision 31.

8.13 (f) The local social services agency shall report immediately, but no later than 24 hours,  
8.14 to the local law enforcement agency any reasonable cause to believe a child is, or is at risk  
8.15 of being, a sex trafficking or commercial sexual exploitation victim.

8.16 (g) The local social services agency shall determine appropriate services as described  
8.17 in section 145.4717 with respect to any child for whom the local social services agency has  
8.18 responsibility for placement, care, or supervision when the local social services agency has  
8.19 reasonable cause to believe that the child is, or is at risk of being, a sex trafficking or  
8.20 commercial sexual exploitation victim.

8.21 **EFFECTIVE DATE.** This section is effective September 30, 2021.

8.22 Sec. 7. Minnesota Statutes 2020, section 260C.452, is amended to read:

8.23 **260C.452 SUCCESSFUL TRANSITION TO ADULTHOOD.**

8.24 Subdivision 1. **Scope and purpose.** (a) For purposes of this section, "youth" means a  
8.25 person who is at least 14 years of age and under 23 years of age.

8.26 (b) This section pertains to a ~~child~~ youth who:

8.27 (1) is in foster care and is 14 years of age or older, including a youth who is under the  
8.28 guardianship of the commissioner of human services, ~~or who;~~

8.29 (2) has a permanency disposition of permanent custody to the agency, ~~or who;~~

8.30 (3) will leave foster care ~~at 18 to 21 years of age.~~ when the youth is 18 years of age or  
8.31 older and under 21 years of age;



9.1 (4) has left foster care and was placed at a permanent adoptive placement when the youth  
 9.2 was 16 years of age or older;

9.3 (5) is 16 years of age or older, has left foster care, and was placed with a relative to  
 9.4 whom permanent legal and physical custody of the youth has been transferred; or

9.5 (6) was reunified with the youth's primary caretaker when the youth was 14 years of age  
 9.6 or older and under 18 years of age.

9.7 (c) The purpose of this section is to provide support to each youth who is transitioning  
 9.8 to adulthood by providing services to the youth in the areas of:

9.9 (1) education;

9.10 (2) employment;

9.11 (3) daily living skills such as financial literacy training and driving instruction; preventive  
 9.12 health activities including promoting abstinence from substance use and smoking; and  
 9.13 nutrition education and pregnancy prevention;

9.14 (4) forming meaningful, permanent connections with caring adults;

9.15 (5) engaging in age and developmentally appropriate activities under section 260C.212,  
 9.16 subdivision 14, and positive youth development;

9.17 (6) financial, housing, counseling, and other services to assist a youth over 18 years of  
 9.18 age in achieving self-sufficiency and accepting personal responsibility for the transition  
 9.19 from adolescence to adulthood; and

9.20 (7) making vouchers available for education and training.

9.21 (d) The responsible social services agency may provide support and case management  
 9.22 services to a youth as defined in paragraph (a) until the youth reaches the age of 23 years.  
 9.23 According to section 260C.451, a youth's placement in a foster care setting will end when  
 9.24 the youth reaches the age of 21 years.

9.25 Subd. 1a. **Case management services.** Case management services include the  
 9.26 responsibility for planning, coordinating, authorizing, monitoring, and evaluating services  
 9.27 for a youth and shall be provided to a youth by the responsible social services agency. Case  
 9.28 management services include the out-of-home placement plan under section 260C.212,  
 9.29 subdivision 1, when the youth is in out-of-home placement.

9.30 Subd. 2. **Independent living plan.** When the ~~child~~ youth is 14 years of age or older and  
 9.31 is receiving support from the responsible social services agency under this section, the  
 9.32 responsible social services agency, in consultation with the ~~child~~ youth, shall complete the

10.1 youth's independent living plan according to section 260C.212, subdivision 1, paragraph  
10.2 (c), clause (12), regardless of the youth's current placement status.

10.3 ~~Subd. 3. **Notification.** Six months before the child is expected to be discharged from~~  
10.4 ~~foster care, the responsible social services agency shall provide written notice to the child~~  
10.5 ~~regarding the right to continued access to services for certain children in foster care past 18~~  
10.6 ~~years of age and of the right to appeal a denial of social services under section 256.045.~~

10.7 Subd. 4. **Administrative or court review of placements.** (a) When the ~~child~~ youth is  
10.8 14 years of age or older, the court, in consultation with the ~~child~~ youth, shall review the  
10.9 youth's independent living plan according to section 260C.203, paragraph (d).

10.10 (b) The responsible social services agency shall file a copy of the notification ~~required~~  
10.11 ~~in subdivision 3 of foster care benefits for a youth who is 18 years of age or older according~~  
10.12 ~~to section 260C.451, subdivision 1, with the court.~~ If the responsible social services agency  
10.13 does not file the notice by the time the ~~child~~ youth is 17-1/2 years of age, the court shall  
10.14 require the responsible social services agency to file the notice.

10.15 (c) When a youth is 18 years of age or older, the court shall ensure that the responsible  
10.16 social services agency assists the ~~child~~ youth in obtaining the following documents before  
10.17 the ~~child~~ youth leaves foster care: a Social Security card; an official or certified copy of the  
10.18 ~~child's~~ youth's birth certificate; a state identification card or driver's license, tribal enrollment  
10.19 identification card, green card, or school visa; health insurance information; the ~~child's~~  
10.20 youth's school, medical, and dental records; a contact list of the ~~child's~~ youth's medical,  
10.21 dental, and mental health providers; and contact information for the ~~child's~~ youth's siblings,  
10.22 if the siblings are in foster care.

10.23 (d) For a ~~child~~ youth who will be discharged from foster care at 18 years of age or older,  
10.24 the responsible social services agency must develop a personalized transition plan as directed  
10.25 by the ~~child~~ youth during the 90-day period immediately prior to the expected date of  
10.26 discharge. The transition plan must be as detailed as the ~~child~~ youth elects and include  
10.27 specific options, including but not limited to:

10.28 (1) affordable housing with necessary supports that does not include a homeless shelter;

10.29 (2) health insurance, including eligibility for medical assistance as defined in section  
10.30 256B.055, subdivision 17;

10.31 (3) education, including application to the Education and Training Voucher Program;

10.32 (4) local opportunities for mentors and continuing support services, ~~including the Healthy~~  
10.33 ~~Transitions and Homeless Prevention program, if available;~~

11.1 (5) workforce supports and employment services;

11.2 (6) a copy of the ~~child's~~ youth's consumer credit report as defined in section 13C.001  
11.3 and assistance in interpreting and resolving any inaccuracies in the report, at no cost to the  
11.4 ~~child~~ youth;

11.5 (7) information on executing a health care directive under chapter 145C and on the  
11.6 importance of designating another individual to make health care decisions on behalf of the  
11.7 ~~child~~ youth if the ~~child~~ youth becomes unable to participate in decisions;

11.8 (8) appropriate contact information through 21 years of age if the ~~child~~ youth needs  
11.9 information or help dealing with a crisis situation; and

11.10 (9) official documentation that the youth was previously in foster care.

11.11 Subd. 5. **Notice of termination of foster care social services.** (a) ~~When~~ Before a ~~child~~  
11.12 youth who is 18 years of age or older leaves foster care ~~at 18 years of age or older~~, the  
11.13 responsible social services agency shall give the ~~child~~ youth written notice that foster care  
11.14 shall terminate 30 days from the date that the notice is sent by the agency according to  
11.15 section 260C.451, subdivision 8.

11.16 ~~(b) The child or the child's guardian ad litem may file a motion asking the court to review~~  
11.17 ~~the responsible social services agency's determination within 15 days of receiving the notice.~~  
11.18 ~~The child shall not be discharged from foster care until the motion is heard. The responsible~~  
11.19 ~~social services agency shall work with the child to transition out of foster care.~~

11.20 ~~(c) The written notice of termination of benefits shall be on a form prescribed by the~~  
11.21 ~~commissioner and shall give notice of the right to have the responsible social services~~  
11.22 ~~agency's determination reviewed by the court under this section or sections 260C.203,~~  
11.23 ~~260C.317, and 260C.515, subdivision 5 or 6. A copy of the termination notice shall be sent~~  
11.24 ~~to the child and the child's attorney, if any, the foster care provider, the child's guardian ad~~  
11.25 ~~litem, and the court. The responsible social services agency is not responsible for paying~~  
11.26 ~~foster care benefits for any period of time after the child leaves foster care.~~

11.27 (b) Before case management services will end for a youth who is at least 18 years of  
11.28 age and under 23 years of age, the responsible social services agency shall give the youth:  
11.29 (1) written notice that case management services for the youth shall terminate; and (2)  
11.30 written notice that the youth has the right to appeal the termination of case management  
11.31 services under section 256.045, subdivision 3, by responding in writing within ten days of  
11.32 the date that the agency mailed the notice. The termination notice must include information  
11.33 about services for which the youth is eligible and how to access the services.

12.1 **EFFECTIVE DATE.** This section is effective July 1, 2021.

12.2 Sec. 8. Minnesota Statutes 2020, section 260C.704, is amended to read:

12.3 **260C.704 REQUIREMENTS FOR THE QUALIFIED INDIVIDUAL'S**  
 12.4 **ASSESSMENT OF THE CHILD FOR PLACEMENT IN A QUALIFIED**  
 12.5 **RESIDENTIAL TREATMENT PROGRAM.**

12.6 (a) A qualified individual must complete an assessment of the child prior to or within  
 12.7 30 days of the child's placement in a qualified residential treatment program in a format  
 12.8 approved by the commissioner of human services, and must:

12.9 (1) assess the child's needs and strengths, using an age-appropriate, evidence-based,  
 12.10 validated, functional assessment approved by the commissioner of human services;

12.11 (2) determine whether the child's needs can be met by the child's family members or  
 12.12 through placement in a family foster home; or, if not, determine which residential setting  
 12.13 would provide the child with the most effective and appropriate level of care to the child  
 12.14 in the least restrictive environment;

12.15 (3) develop a list of short- and long-term mental and behavioral health goals for the  
 12.16 child; and

12.17 (4) work with the child's family and permanency team using culturally competent  
 12.18 practices.

12.19 (b) The child and the child's parents, when appropriate, may request that a specific  
 12.20 culturally competent qualified individual complete the child's assessment. The agency shall  
 12.21 make efforts to refer the child to the identified qualified individual to complete the  
 12.22 assessment. The assessment must not be delayed for a specific qualified individual to  
 12.23 complete the assessment.

12.24 (c) The qualified individual must provide the assessment, when complete, to the  
 12.25 responsible social services agency, ~~the child's parents or legal guardians, the guardian ad~~  
 12.26 ~~litem, and the court.~~ If the assessment recommends placement of the child in a qualified  
 12.27 residential treatment facility, the agency must distribute the assessment along with the court  
 12.28 report as required in section 260C.71, subdivision 2. If the assessment does not recommend  
 12.29 placement in a qualified residential treatment facility, the agency must provide a copy of  
 12.30 the assessment to the parents or legal guardians and the guardian ad litem and file the  
 12.31 assessment determination with the court at the next required hearing as required in section  
 12.32 260C.71, subdivision 5. If court rules and chapter 13 permit disclosure of the results of the  
 12.33 child's assessment, the agency may share the results of the child's assessment with the child's

13.1 foster care provider, other members of the child's family, and the family and permanency  
13.2 team. The agency must not share the child's private medical data with the family and  
13.3 permanency team unless: (1) chapter 13 permits the agency to disclose the child's private  
13.4 medical data to the family and permanency team; or (2) the child's parent has authorized  
13.5 the agency to disclose the child's private medical data to the family and permanency team.

13.6 (d) For an Indian child, the assessment of the child must follow the order of placement  
13.7 preferences in the Indian Child Welfare Act of 1978, United States Code, title 25, section  
13.8 1915.

13.9 (e) In the assessment determination, the qualified individual must specify in writing:

13.10 (1) the reasons why the child's needs cannot be met by the child's family or in a family  
13.11 foster home. A shortage of family foster homes is not an acceptable reason for determining  
13.12 that a family foster home cannot meet a child's needs;

13.13 (2) why the recommended placement in a qualified residential treatment program will  
13.14 provide the child with the most effective and appropriate level of care to meet the child's  
13.15 needs in the least restrictive environment possible and how placing the child at the treatment  
13.16 program is consistent with the short-term and long-term goals of the child's permanency  
13.17 plan; and

13.18 (3) if the qualified individual's placement recommendation is not the placement setting  
13.19 that the parent, family and permanency team, child, or tribe prefer, the qualified individual  
13.20 must identify the reasons why the qualified individual does not recommend the parent's,  
13.21 family and permanency team's, child's, or tribe's placement preferences. The out-of-home  
13.22 placement plan under section 260C.708 must also include reasons why the qualified  
13.23 individual did not recommend the preferences of the parents, family and permanency team,  
13.24 child, or tribe.

13.25 (f) If the qualified individual determines that the child's family or a family foster home  
13.26 or other less restrictive placement may meet the child's needs, the agency must move the  
13.27 child out of the qualified residential treatment program and transition the child to a less  
13.28 restrictive setting within 30 days of the determination. If the responsible social services  
13.29 agency has placement authority of the child, the agency must make a plan for the child's  
13.30 placement according to section 260C.212, subdivision 2. The agency must file the child's  
13.31 assessment determination with the court at the next required hearing.

13.32 (g) If the qualified individual recommends placing the child in a qualified residential  
13.33 treatment program, the responsible social services agency shall make referrals to appropriate

14.1 qualified residential treatment programs and upon acceptance by an appropriate program,  
14.2 place the child in an approved or certified qualified residential treatment program.

14.3 **EFFECTIVE DATE.** This section is effective September 30, 2021.

14.4 Sec. 9. Minnesota Statutes 2020, section 260C.706, is amended to read:

14.5 **260C.706 FAMILY AND PERMANENCY TEAM REQUIREMENTS.**

14.6 (a) When the responsible social services agency's juvenile treatment screening team, as  
14.7 defined in section 260C.157, recommends placing the child in a qualified residential treatment  
14.8 program, the agency must assemble a family and permanency team within ten days.

14.9 (1) The team must include all appropriate biological family members, the child's parents,  
14.10 legal guardians or custodians, foster care providers, and relatives as defined in section  
14.11 260C.007, subdivisions ~~26e~~ 26b and 27, and professionals, as appropriate, who are a resource  
14.12 to the child's family, such as teachers, medical or mental health providers, or clergy.

14.13 (2) When a child is placed in foster care prior to the qualified residential treatment  
14.14 program, the agency shall include relatives responding to the relative search notice as  
14.15 required under section 260C.221 on this team, unless the juvenile court finds that contacting  
14.16 a specific relative would endanger the parent, guardian, child, sibling, or any other family  
14.17 member.

14.18 (3) When a qualified residential treatment program is the child's initial placement setting,  
14.19 the responsible social services agency must engage with the child and the child's parents to  
14.20 determine the appropriate family and permanency team members.

14.21 (4) When the permanency goal is to reunify the child with the child's parent or legal  
14.22 guardian, the purpose of the relative search and focus of the family and permanency team  
14.23 is to preserve family relationships and identify and develop supports for the child and parents.

14.24 (5) The responsible agency must make a good faith effort to identify and assemble all  
14.25 appropriate individuals to be part of the child's family and permanency team and request  
14.26 input from the parents regarding relative search efforts consistent with section 260C.221.  
14.27 The out-of-home placement plan in section 260C.708 must include all contact information  
14.28 for the team members, as well as contact information for family members or relatives who  
14.29 are not a part of the family and permanency team.

14.30 (6) If the child is age 14 or older, the team must include members of the family and  
14.31 permanency team that the child selects in accordance with section 260C.212, subdivision  
14.32 1, paragraph (b).

15.1 (7) Consistent with section 260C.221, a responsible social services agency may disclose  
15.2 relevant and appropriate private data about the child to relatives in order for the relatives  
15.3 to participate in caring and planning for the child's placement.

15.4 (8) If the child is an Indian child under section 260.751, the responsible social services  
15.5 agency must make active efforts to include the child's tribal representative on the family  
15.6 and permanency team.

15.7 (b) The family and permanency team shall meet regarding the assessment required under  
15.8 section 260C.704 to determine whether it is necessary and appropriate to place the child in  
15.9 a qualified residential treatment program and to participate in case planning under section  
15.10 260C.708.

15.11 (c) When reunification of the child with the child's parent or legal guardian is the  
15.12 permanency plan, the family and permanency team shall support the parent-child relationship  
15.13 by recognizing the parent's legal authority, consulting with the parent regarding ongoing  
15.14 planning for the child, and assisting the parent with visiting and contacting the child.

15.15 (d) When the agency's permanency plan is to transfer the child's permanent legal and  
15.16 physical custody to a relative or for the child's adoption, the team shall:

15.17 (1) coordinate with the proposed guardian to provide the child with educational services,  
15.18 medical care, and dental care;

15.19 (2) coordinate with the proposed guardian, the agency, and the foster care facility to  
15.20 meet the child's treatment needs after the child is placed in a permanent placement with the  
15.21 proposed guardian;

15.22 (3) plan to meet the child's need for safety, stability, and connection with the child's  
15.23 family and community after the child is placed in a permanent placement with the proposed  
15.24 guardian; and

15.25 (4) in the case of an Indian child, communicate with the child's tribe to identify necessary  
15.26 and appropriate services for the child, transition planning for the child, the child's treatment  
15.27 needs, and how to maintain the child's connections to the child's community, family, and  
15.28 tribe.

15.29 (e) The agency shall invite the family and permanency team to participate in case planning  
15.30 and the agency shall give the team notice of court reviews under sections 260C.152 and  
15.31 260C.221 until: (1) the child is reunited with the child's parents; or (2) the child's foster care  
15.32 placement ends and the child is in a permanent placement.

15.33 **EFFECTIVE DATE.** This section is effective September 30, 2021.

16.1 Sec. 10. Minnesota Statutes 2020, section 260C.708, is amended to read:

16.2 **260C.708 OUT-OF-HOME PLACEMENT PLAN FOR QUALIFIED**  
 16.3 **RESIDENTIAL TREATMENT PROGRAM PLACEMENTS.**

16.4 (a) When the responsible social services agency places a child in a qualified residential  
 16.5 treatment program as defined in section 260C.007, subdivision 26d, the out-of-home  
 16.6 placement plan must include:

16.7 (1) the case plan requirements in section ~~260.212, subdivision 1~~ 260C.212;

16.8 (2) the reasonable and good faith efforts of the responsible social services agency to  
 16.9 identify and include all of the individuals required to be on the child's family and permanency  
 16.10 team under section 260C.007;

16.11 (3) all contact information for members of the child's family and permanency team and  
 16.12 for other relatives who are not part of the family and permanency team;

16.13 (4) evidence that the agency scheduled meetings of the family and permanency team,  
 16.14 including meetings relating to the assessment required under section 260C.704, at a time  
 16.15 and place convenient for the family;

16.16 (5) evidence that the family and permanency team is involved in the assessment required  
 16.17 under section 260C.704 to determine the appropriateness of the child's placement in a  
 16.18 qualified residential treatment program;

16.19 (6) the family and permanency team's placement preferences for the child in the  
 16.20 assessment required under section 260C.704. When making a decision about the child's  
 16.21 placement preferences, the family and permanency team must recognize:

16.22 (i) that the agency should place a child with the child's siblings unless a court finds that  
 16.23 placing a child with the child's siblings is contrary to the child's best interests; and

16.24 (ii) that the agency should place an Indian child according to the requirements of the  
 16.25 Indian Child Welfare Act, the Minnesota Family Preservation Act under sections 260.751  
 16.26 to 260.835, and section 260C.193, subdivision 3, paragraph (g);

16.27 ~~(5)~~ (7) when reunification of the child with the child's parent or legal guardian is the  
 16.28 agency's goal, evidence demonstrating that the parent or legal guardian provided input about  
 16.29 the members of the family and permanency team under section 260C.706;

16.30 ~~(6)~~ (8) when the agency's permanency goal is to reunify the child with the child's parent  
 16.31 or legal guardian, the out-of-home placement plan must identify services and supports that  
 16.32 maintain the parent-child relationship and the parent's legal authority, decision-making, and



17.1 responsibility for ongoing planning for the child. In addition, the agency must assist the  
17.2 parent with visiting and contacting the child;

17.3 ~~(7)~~ (9) when the agency's permanency goal is to transfer permanent legal and physical  
17.4 custody of the child to a proposed guardian or to finalize the child's adoption, the case plan  
17.5 must document the agency's steps to transfer permanent legal and physical custody of the  
17.6 child or finalize adoption, as required in section 260C.212, subdivision 1, paragraph (c),  
17.7 clauses (6) and (7); and

17.8 ~~(8)~~ (10) the qualified individual's recommendation regarding the child's placement in a  
17.9 qualified residential treatment program and the court approval or disapproval of the placement  
17.10 as required in section 260C.71.

17.11 (b) If the placement preferences of the family and permanency team, child, and tribe, if  
17.12 applicable, are not consistent with the placement setting that the qualified individual  
17.13 recommends, the case plan must include the reasons why the qualified individual did not  
17.14 recommend following the preferences of the family and permanency team, child, and the  
17.15 tribe.

17.16 (c) The agency must file the out-of-home placement plan with the court as part of the  
17.17 60-day hearing court order under section 260C.71.

17.18 **EFFECTIVE DATE.** This section is effective September 30, 2021.

17.19 Sec. 11. Minnesota Statutes 2020, section 260C.71, is amended to read:

17.20 **260C.71 COURT APPROVAL REQUIREMENTS.**

17.21 Subdivision 1. **Judicial review.** When the responsible social services agency has legal  
17.22 authority to place a child at a qualified residential treatment facility under section 260C.007,  
17.23 subdivision 21a, and the child's assessment under section 260C.704 recommends placing  
17.24 the child in a qualified residential treatment facility, the agency shall place the child at a  
17.25 qualified residential facility. Within 60 days of placing the child at a qualified residential  
17.26 treatment facility, the agency must obtain a court order finding that the child's placement  
17.27 is appropriate and meets the child's individualized needs.

17.28 Subd. 2. **Qualified residential treatment program; agency report to court.** (a) The  
17.29 responsible social services agency shall file a written report with the court within 35 days  
17.30 of the date of the child's placement in a qualified residential treatment facility. The written  
17.31 report shall contain or have attached:

17.32 (1) the child's name, date of birth, race, gender, and current address;

18.1 (2) the names, races, dates of birth, residence, and post office address of the child's  
18.2 parents or legal custodian, or guardian;

18.3 (3) the name and address of the qualified residential treatment program, including a  
18.4 chief administrator of the facility;

18.5 (4) a statement of the facts that necessitated the child's foster care placement;

18.6 (5) the child's out-of-home placement plan under section 260C.212, subdivision 1,  
18.7 including the requirements in section 260C.708;

18.8 (6) if the child is placed in an out-of-state qualified residential treatment program, the  
18.9 compelling reasons why the child's needs cannot be met by an in-state placement;

18.10 (7) the qualified individual's assessment of the child under section 260C.704, paragraph  
18.11 (c), in a format approved by the commissioner;

18.12 (8) if, at the time required for the report under this subdivision, a child who is ten years  
18.13 of age or older, a child's parent, the family and permanency team, or a tribe disagrees with  
18.14 the recommended qualified residential treatment program placement, the agency shall  
18.15 include information regarding the disagreement, and to the extent possible, the basis for the  
18.16 disagreement in the report;

18.17 (9) any other information that the responsible social services agency, child's parent, legal  
18.18 custodian or guardian, child, or in the case of an Indian child, tribe would like the court to  
18.19 consider; and

18.20 (10) the agency shall file the written report with the court and serve on the parties a  
18.21 request for a hearing or a court order without a hearing.

18.22 (b) The agency must inform a child who is ten years of age or older and the child's parent  
18.23 of the court review requirements of this section and the child and child's parent's right to  
18.24 submit information to the court:

18.25 (1) the agency must inform the child ten years of age or older and the child's parent of  
18.26 the reporting date and the date by which the agency must receive information from the child  
18.27 and child's parent so that the agency is able to submit the report required by this subdivision  
18.28 to the court;

18.29 (2) the agency must inform a child who is ten years of age or older and the child's parent  
18.30 that the court will hold a hearing upon the request of the child or the child's parent; and

19.1 (3) the agency must inform a child who is ten years of age or older and the child's parent  
 19.2 that they have the right to request a hearing and the right to present information to the court  
 19.3 for the court's review under this subdivision.

19.4 Subd. 3. **Court hearing.** (a) The court shall hold a hearing when a party or a child who  
 19.5 is ten years of age or older requests a hearing.

19.6 (b) In all other circumstances, the court has the discretion to hold a hearing or issue an  
 19.7 order without a hearing.

19.8 Subd. 4. **Court findings and order.** (a) Within 60 days from the beginning of each  
 19.9 placement in a qualified residential treatment program when the qualified individual's  
 19.10 assessment of the child recommends placing the child in a qualified residential treatment  
 19.11 program, the court must consider the qualified individual's assessment of the child under  
 19.12 section 260C.704 and issue an order to:

19.13 ~~(1) consider the qualified individual's assessment of whether it is necessary and~~  
 19.14 ~~appropriate to place the child in a qualified residential treatment program under section~~  
 19.15 ~~260C.704;~~

19.16 ~~(2)~~ (1) determine whether a family foster home can meet the child's needs, whether it is  
 19.17 necessary and appropriate to place a child in a qualified residential treatment program that  
 19.18 is the least restrictive environment possible, and whether the child's placement is consistent  
 19.19 with the child's short and long term goals as specified in the permanency plan; and

19.20 ~~(3)~~ (2) approve or disapprove of the child's placement.

19.21 ~~(b) In the out-of-home placement plan, the agency must document the court's approval~~  
 19.22 ~~or disapproval of the placement, as specified in section 260C.708. If the court disapproves~~  
 19.23 ~~of the child's placement in a qualified residential treatment program, the responsible social~~  
 19.24 ~~services agency shall: (1) remove the child from the qualified residential treatment program~~  
 19.25 ~~within 30 days of the court's order; and (2) make a plan for the child's placement that is~~  
 19.26 ~~consistent with the child's best interests under section 260C.212, subdivision 2.~~

19.27 Subd. 5. **Court review and approval is not required.** When the responsible social  
 19.28 services agency has legal authority to place a child under section 260C.007, subdivision  
 19.29 21a, and the qualified individual's assessment of the child does not recommend placing the  
 19.30 child in a qualified residential treatment program, the court is not required to hold a hearing  
 19.31 and the court is not required to issue an order. Pursuant to section 260C.704, paragraph (f),  
 19.32 the responsible social services agency shall make a plan for the child's placement consistent  
 19.33 with the child's best interests under section 260C.212, subdivision 2. The agency must file

20.1 the agency's assessment determination for the child with the court at the next required  
 20.2 hearing.

20.3 **EFFECTIVE DATE.** This section is effective September 30, 2021.

20.4 Sec. 12. Minnesota Statutes 2020, section 260C.712, is amended to read:

20.5 **260C.712 ONGOING REVIEWS AND PERMANENCY HEARING**  
 20.6 **REQUIREMENTS.**

20.7 As long as a child remains placed in a qualified residential treatment program, the  
 20.8 responsible social services agency shall submit evidence at each administrative review under  
 20.9 section 260C.203; each court review under sections 260C.202, 260C.203, ~~and~~ 260C.204,  
 20.10 260D.06, 260D.07, and 260D.08; and each permanency hearing under section 260C.515,  
 20.11 260C.519, ~~or~~ 260C.521, or 260D.07 that:

20.12 (1) demonstrates that an ongoing assessment of the strengths and needs of the child  
 20.13 continues to support the determination that the child's needs cannot be met through placement  
 20.14 in a family foster home;

20.15 (2) demonstrates that the placement of the child in a qualified residential treatment  
 20.16 program provides the most effective and appropriate level of care for the child in the least  
 20.17 restrictive environment;

20.18 (3) demonstrates how the placement is consistent with the short-term and long-term  
 20.19 goals for the child, as specified in the child's permanency plan;

20.20 (4) documents how the child's specific treatment or service needs will be met in the  
 20.21 placement;

20.22 (5) documents the length of time that the agency expects the child to need treatment or  
 20.23 services; ~~and~~

20.24 (6) documents the responsible social services agency's efforts to prepare the child to  
 20.25 return home or to be placed with a fit and willing relative, legal guardian, adoptive parent,  
 20.26 or foster family; and

20.27 (7) if the child is placed in a qualified residential treatment program out-of-state, the  
 20.28 compelling reasons for placing the child out-of-state and the reasons that the child's needs  
 20.29 cannot be met by an in-state placement.

20.30 **EFFECTIVE DATE.** This section is effective September 30, 2021.

21.1 Sec. 13. Minnesota Statutes 2020, section 260C.714, is amended to read:

21.2 **260C.714 REVIEW OF EXTENDED QUALIFIED RESIDENTIAL TREATMENT**  
21.3 **PROGRAM PLACEMENTS.**

21.4 (a) When a responsible social services agency places a child in a qualified residential  
21.5 treatment program for more than 12 consecutive months or 18 nonconsecutive months or,  
21.6 in the case of a child who is under 13 years of age, for more than six consecutive or  
21.7 nonconsecutive months, the agency must submit: (1) the signed approval by the county  
21.8 social services director of the responsible social services agency; and (2) the evidence  
21.9 supporting the child's placement at the most recent court review or permanency hearing  
21.10 under section 260C.712, ~~paragraph (b).~~

21.11 (b) The commissioner shall specify the procedures and requirements for the agency's  
21.12 review and approval of a child's extended qualified residential treatment program placement.  
21.13 The commissioner may consult with counties, tribes, child-placing agencies, mental health  
21.14 providers, licensed facilities, the child, the child's parents, and the family and permanency  
21.15 team members to develop case plan requirements and engage in periodic reviews of the  
21.16 case plan.

21.17 **EFFECTIVE DATE.** This section is effective September 30, 2021.

21.18 Sec. 14. Minnesota Statutes 2020, section 260E.36, is amended by adding a subdivision  
21.19 to read:

21.20 **Subd. 1b. Sex trafficking and sexual exploitation training requirement.** As required  
21.21 by the Child Abuse Prevention and Treatment Act amendments through Public Law 114-22  
21.22 and to implement Public Law 115-123, all child protection social workers and social services  
21.23 staff who have responsibility for child protective duties under this chapter or chapter 260C  
21.24 shall complete training implemented by the commissioner of human services regarding sex  
21.25 trafficking and sexual exploitation of children and youth.

21.26 **EFFECTIVE DATE.** This section is effective July 1, 2021.

22.1 **ARTICLE 2**

22.2 **FAMILY FIRST PREVENTION ACT CHAPTER 260D PROVISIONS**

22.3 Section 1. Minnesota Statutes 2020, section 260D.01, is amended to read:

22.4 **260D.01 CHILD IN VOLUNTARY FOSTER CARE FOR TREATMENT.**

22.5 (a) Sections 260D.01 to 260D.10, may be cited as the "child in voluntary foster care for  
22.6 treatment" provisions of the Juvenile Court Act.

22.7 (b) The juvenile court has original and exclusive jurisdiction over a child in voluntary  
22.8 foster care for treatment upon the filing of a report or petition required under this chapter.  
22.9 All obligations of the responsible social services agency to a child and family in foster care  
22.10 contained in chapter 260C not inconsistent with this chapter are also obligations of the  
22.11 agency with regard to a child in foster care for treatment under this chapter.

22.12 (c) This chapter shall be construed consistently with the mission of the children's mental  
22.13 health service system as set out in section 245.487, subdivision 3, and the duties of an agency  
22.14 under sections 256B.092 and 260C.157 and Minnesota Rules, parts 9525.0004 to 9525.0016,  
22.15 to meet the needs of a child with a developmental disability or related condition. This  
22.16 chapter:

22.17 (1) establishes voluntary foster care through a voluntary foster care agreement as the  
22.18 means for an agency and a parent to provide needed treatment when the child must be in  
22.19 foster care to receive necessary treatment for an emotional disturbance or developmental  
22.20 disability or related condition;

22.21 (2) establishes court review requirements for a child in voluntary foster care for treatment  
22.22 due to emotional disturbance or developmental disability or a related condition;

22.23 (3) establishes the ongoing responsibility of the parent as legal custodian to visit the  
22.24 child, to plan together with the agency for the child's treatment needs, to be available and  
22.25 accessible to the agency to make treatment decisions, and to obtain necessary medical,  
22.26 dental, and other care for the child; ~~and~~

22.27 (4) applies to voluntary foster care when the child's parent and the agency agree that the  
22.28 child's treatment needs require foster care either:

22.29 (i) due to a level of care determination by the agency's screening team informed by the  
22.30 child's diagnostic and functional assessment under section 245.4885; or

23.1 (ii) due to a determination regarding the level of services needed by the child by the  
23.2 responsible social ~~services'~~ services agency's screening team under section 256B.092, and  
23.3 Minnesota Rules, parts 9525.0004 to 9525.0016-; and

23.4 (5) includes the requirements for a child's placement in sections 260C.70 to 260C.714,  
23.5 when the juvenile treatment screening team recommends placing a child in a qualified  
23.6 residential treatment program.

23.7 (d) This chapter does not apply when there is a current determination under chapter  
23.8 260E that the child requires child protective services or when the child is in foster care for  
23.9 any reason other than treatment for the child's emotional disturbance or developmental  
23.10 disability or related condition. When there is a determination under chapter 260E that the  
23.11 child requires child protective services based on an assessment that there are safety and risk  
23.12 issues for the child that have not been mitigated through the parent's engagement in services  
23.13 or otherwise, or when the child is in foster care for any reason other than the child's emotional  
23.14 disturbance or developmental disability or related condition, the provisions of chapter 260C  
23.15 apply.

23.16 (e) The paramount consideration in all proceedings concerning a child in voluntary foster  
23.17 care for treatment is the safety, health, and the best interests of the child. The purpose of  
23.18 this chapter is:

23.19 (1) to ensure that a child with a disability is provided the services necessary to treat or  
23.20 ameliorate the symptoms of the child's disability;

23.21 (2) to preserve and strengthen the child's family ties whenever possible and in the child's  
23.22 best interests, approving the child's placement away from the child's parents only when the  
23.23 child's need for care or treatment requires ~~it~~ out-of-home placement and the child cannot  
23.24 be maintained in the home of the parent; and

23.25 (3) to ensure that the child's parent retains legal custody of the child and associated  
23.26 decision-making authority unless the child's parent willfully fails or is unable to make  
23.27 decisions that meet the child's safety, health, and best interests. The court may not find that  
23.28 the parent willfully fails or is unable to make decisions that meet the child's needs solely  
23.29 because the parent disagrees with the agency's choice of foster care facility, unless the  
23.30 agency files a petition under chapter 260C, and establishes by clear and convincing evidence  
23.31 that the child is in need of protection or services.

23.32 (f) The legal parent-child relationship shall be supported under this chapter by maintaining  
23.33 the parent's legal authority and responsibility for ongoing planning for the child and by the

24.1 agency's assisting the parent, ~~where~~ when necessary, to exercise the parent's ongoing right  
 24.2 and obligation to visit or to have reasonable contact with the child. Ongoing planning means:

24.3 (1) actively participating in the planning and provision of educational services, medical,  
 24.4 and dental care for the child;

24.5 (2) actively planning and participating with the agency and the foster care facility for  
 24.6 the child's treatment needs; ~~and~~

24.7 (3) planning to meet the child's need for safety, stability, and permanency, and the child's  
 24.8 need to stay connected to the child's family and community-; and

24.9 (4) engaging with the responsible social services agency to ensure that the family and  
 24.10 permanency team under section 260C.706 consists of appropriate family members and if  
 24.11 applicable, expressing concerns about any individual on the team. The responsible social  
 24.12 services agency must make efforts to contact and engage with the child's parent when  
 24.13 assembling the family and permanency team and must address all of the child's parent's  
 24.14 concerns to the extent possible.

24.15 (g) The provisions of section 260.012 to ensure placement prevention, family  
 24.16 reunification, and all active and reasonable effort requirements of that section apply. This  
 24.17 chapter shall be construed consistently with the requirements of the Indian Child Welfare  
 24.18 Act of 1978, United States Code, title 25, section 1901, et al., and the provisions of the  
 24.19 Minnesota Indian Family Preservation Act, sections 260.751 to 260.835.

24.20 **EFFECTIVE DATE.** This section is effective September 30, 2021.

24.21 Sec. 2. Minnesota Statutes 2020, section 260D.05, is amended to read:

24.22 **260D.05 ADMINISTRATIVE REVIEW OF CHILD IN VOLUNTARY FOSTER**  
 24.23 **CARE FOR TREATMENT.**

24.24 The administrative reviews required under section 260C.203 must be conducted for a  
 24.25 child in voluntary foster care for treatment, except that the initial administrative review  
 24.26 must take place prior to the submission of the report to the court required under section  
 24.27 260D.06, subdivision 2. When a child is placed in a qualified residential treatment program  
 24.28 as defined in section 260C.007, subdivision 26d, the responsible social services agency  
 24.29 must submit evidence to the court as specified in section 260C.712.

24.30 **EFFECTIVE DATE.** This section is effective September 30, 2021.



25.1 Sec. 3. Minnesota Statutes 2020, section 260D.06, subdivision 2, is amended to read:

25.2 Subd. 2. **Agency report to court; court review.** The agency shall obtain judicial review  
25.3 by reporting to the court according to the following procedures:

25.4 (a) A written report shall be forwarded to the court within 165 days of the date of the  
25.5 voluntary placement agreement. The written report shall contain or have attached:

25.6 (1) a statement of facts that necessitate the child's foster care placement;

25.7 (2) the child's name, date of birth, race, gender, and current address;

25.8 (3) the names, race, date of birth, residence, and post office addresses of the child's  
25.9 parents or legal custodian;

25.10 (4) a statement regarding the child's eligibility for membership or enrollment in an Indian  
25.11 tribe and the agency's compliance with applicable provisions of sections 260.751 to 260.835;

25.12 (5) the names and addresses of the foster parents or chief administrator of the facility in  
25.13 which the child is placed, if the child is not in a family foster home or group home;

25.14 (6) a copy of the out-of-home placement plan required under section 260C.212,  
25.15 subdivision 1;

25.16 (7) a written summary of the proceedings of any administrative review required under  
25.17 section 260C.203; ~~and~~

25.18 (8) evidence as specified in section 260C.712 when a child is placed in a qualified  
25.19 residential treatment program as defined in section 260C.007, subdivision 26d; and

25.20 (9) any other information the agency, parent or legal custodian, the child or the foster  
25.21 parent, or other residential facility wants the court to consider.

25.22 (b) In the case of a child in placement due to emotional disturbance, the written report  
25.23 shall include as an attachment, the child's individual treatment plan developed by the child's  
25.24 treatment professional, as provided in section 245.4871, subdivision 21, or the child's  
25.25 standard written plan, as provided in section 125A.023, subdivision 3, paragraph (e).

25.26 (c) In the case of a child in placement due to developmental disability or a related  
25.27 condition, the written report shall include as an attachment, the child's individual service  
25.28 plan, as provided in section 256B.092, subdivision 1b; the child's individual program plan,  
25.29 as provided in Minnesota Rules, part 9525.0004, subpart 11; the child's waiver care plan;  
25.30 or the child's standard written plan, as provided in section 125A.023, subdivision 3, paragraph  
25.31 (e).

26.1 (d) The agency must inform the child, age 12 or older, the child's parent, and the foster  
26.2 parent or foster care facility of the reporting and court review requirements of this section  
26.3 and of their right to submit information to the court:

26.4 (1) if the child or the child's parent or the foster care provider wants to send information  
26.5 to the court, the agency shall advise those persons of the reporting date and the date by  
26.6 which the agency must receive the information they want forwarded to the court so the  
26.7 agency is timely able submit it with the agency's report required under this subdivision;

26.8 (2) the agency must also inform the child, age 12 or older, the child's parent, and the  
26.9 foster care facility that they have the right to be heard in person by the court and how to  
26.10 exercise that right;

26.11 (3) the agency must also inform the child, age 12 or older, the child's parent, and the  
26.12 foster care provider that an in-court hearing will be held if requested by the child, the parent,  
26.13 or the foster care provider; and

26.14 (4) if, at the time required for the report under this section, a child, age 12 or older,  
26.15 disagrees about the foster care facility or services provided under the out-of-home placement  
26.16 plan required under section 260C.212, subdivision 1, the agency shall include information  
26.17 regarding the child's disagreement, and to the extent possible, the basis for the child's  
26.18 disagreement in the report required under this section.

26.19 (e) After receiving the required report, the court has jurisdiction to make the following  
26.20 determinations and must do so within ten days of receiving the forwarded report, whether  
26.21 a hearing is requested:

26.22 (1) whether the voluntary foster care arrangement is in the child's best interests;

26.23 (2) whether the parent and agency are appropriately planning for the child; and

26.24 (3) in the case of a child age 12 or older, who disagrees with the foster care facility or  
26.25 services provided under the out-of-home placement plan, whether it is appropriate to appoint  
26.26 counsel and a guardian ad litem for the child using standards and procedures under section  
26.27 260C.163.

26.28 (f) Unless requested by a parent, representative of the foster care facility, or the child,  
26.29 no in-court hearing is required in order for the court to make findings and issue an order as  
26.30 required in paragraph (e).

26.31 (g) If the court finds the voluntary foster care arrangement is in the child's best interests  
26.32 and that the agency and parent are appropriately planning for the child, the court shall issue  
26.33 an order containing explicit, individualized findings to support its determination. The

27.1 individualized findings shall be based on the agency's written report and other materials  
27.2 submitted to the court. The court may make this determination notwithstanding the child's  
27.3 disagreement, if any, reported under paragraph (d).

27.4 (h) The court shall send a copy of the order to the county attorney, the agency, parent,  
27.5 child, age 12 or older, and the foster parent or foster care facility.

27.6 (i) The court shall also send the parent, the child, age 12 or older, the foster parent, or  
27.7 representative of the foster care facility notice of the permanency review hearing required  
27.8 under section 260D.07, paragraph (e).

27.9 (j) If the court finds continuing the voluntary foster care arrangement is not in the child's  
27.10 best interests or that the agency or the parent are not appropriately planning for the child,  
27.11 the court shall notify the agency, the parent, the foster parent or foster care facility, the child,  
27.12 age 12 or older, and the county attorney of the court's determinations and the basis for the  
27.13 court's determinations. In this case, the court shall set the matter for hearing and appoint a  
27.14 guardian ad litem for the child under section 260C.163, subdivision 5.

27.15 **EFFECTIVE DATE.** This section is effective September 30, 2021.

27.16 Sec. 4. Minnesota Statutes 2020, section 260D.07, is amended to read:

27.17 **260D.07 REQUIRED PERMANENCY REVIEW HEARING.**

27.18 (a) When the court has found that the voluntary arrangement is in the child's best interests  
27.19 and that the agency and parent are appropriately planning for the child pursuant to the report  
27.20 submitted under section 260D.06, and the child continues in voluntary foster care as defined  
27.21 in section 260D.02, subdivision 10, for 13 months from the date of the voluntary foster care  
27.22 agreement, or has been in placement for 15 of the last 22 months, the agency must:

27.23 (1) terminate the voluntary foster care agreement and return the child home; or

27.24 (2) determine whether there are compelling reasons to continue the voluntary foster care  
27.25 arrangement and, if the agency determines there are compelling reasons, seek judicial  
27.26 approval of its determination; or

27.27 (3) file a petition for the termination of parental rights.

27.28 (b) When the agency is asking for the court's approval of its determination that there are  
27.29 compelling reasons to continue the child in the voluntary foster care arrangement, the agency  
27.30 shall file a "Petition for Permanency Review Regarding a Child in Voluntary Foster Care  
27.31 for Treatment" and ask the court to proceed under this section.

28.1 (c) The "Petition for Permanency Review Regarding a Child in Voluntary Foster Care  
28.2 for Treatment" shall be drafted or approved by the county attorney and be under oath. The  
28.3 petition shall include:

28.4 (1) the date of the voluntary placement agreement;

28.5 (2) whether the petition is due to the child's developmental disability or emotional  
28.6 disturbance;

28.7 (3) the plan for the ongoing care of the child and the parent's participation in the plan;

28.8 (4) a description of the parent's visitation and contact with the child;

28.9 (5) the date of the court finding that the foster care placement was in the best interests  
28.10 of the child, if required under section 260D.06, or the date the agency filed the motion under  
28.11 section 260D.09, paragraph (b);

28.12 (6) the agency's reasonable efforts to finalize the permanent plan for the child, including  
28.13 returning the child to the care of the child's family; ~~and~~

28.14 (7) a citation to this chapter as the basis for the petition; and

28.15 (8) evidence as specified in section 260C.712 when a child is placed in a qualified  
28.16 residential treatment program as defined in section 260C.007, subdivision 26d.

28.17 (d) An updated copy of the out-of-home placement plan required under section 260C.212,  
28.18 subdivision 1, shall be filed with the petition.

28.19 (e) The court shall set the date for the permanency review hearing no later than 14 months  
28.20 after the child has been in placement or within 30 days of the petition filing date when the  
28.21 child has been in placement 15 of the last 22 months. The court shall serve the petition  
28.22 together with a notice of hearing by United States mail on the parent, the child age 12 or  
28.23 older, the child's guardian ad litem, if one has been appointed, the agency, the county  
28.24 attorney, and counsel for any party.

28.25 (f) The court shall conduct the permanency review hearing on the petition no later than  
28.26 14 months after the date of the voluntary placement agreement, within 30 days of the filing  
28.27 of the petition when the child has been in placement 15 of the last 22 months, or within 15  
28.28 days of a motion to terminate jurisdiction and to dismiss an order for foster care under  
28.29 chapter 260C, as provided in section 260D.09, paragraph (b).

28.30 (g) At the permanency review hearing, the court shall:

28.31 (1) inquire of the parent if the parent has reviewed the "Petition for Permanency Review  
28.32 Regarding a Child in Voluntary Foster Care for Treatment," whether the petition is accurate,

29.1 and whether the parent agrees to the continued voluntary foster care arrangement as being  
29.2 in the child's best interests;

29.3 (2) inquire of the parent if the parent is satisfied with the agency's reasonable efforts to  
29.4 finalize the permanent plan for the child, including whether there are services available and  
29.5 accessible to the parent that might allow the child to safely be with the child's family;

29.6 (3) inquire of the parent if the parent consents to the court entering an order that:

29.7 (i) approves the responsible agency's reasonable efforts to finalize the permanent plan  
29.8 for the child, which includes ongoing future planning for the safety, health, and best interests  
29.9 of the child; and

29.10 (ii) approves the responsible agency's determination that there are compelling reasons  
29.11 why the continued voluntary foster care arrangement is in the child's best interests; and

29.12 (4) inquire of the child's guardian ad litem and any other party whether the guardian or  
29.13 the party agrees that:

29.14 (i) the court should approve the responsible agency's reasonable efforts to finalize the  
29.15 permanent plan for the child, which includes ongoing and future planning for the safety,  
29.16 health, and best interests of the child; and

29.17 (ii) the court should approve of the responsible agency's determination that there are  
29.18 compelling reasons why the continued voluntary foster care arrangement is in the child's  
29.19 best interests.

29.20 (h) At a permanency review hearing under this section, the court may take the following  
29.21 actions based on the contents of the sworn petition and the consent of the parent:

29.22 (1) approve the agency's compelling reasons that the voluntary foster care arrangement  
29.23 is in the best interests of the child; and

29.24 (2) find that the agency has made reasonable efforts to finalize the permanent plan for  
29.25 the child.

29.26 (i) A child, age 12 or older, may object to the agency's request that the court approve its  
29.27 compelling reasons for the continued voluntary arrangement and may be heard on the reasons  
29.28 for the objection. Notwithstanding the child's objection, the court may approve the agency's  
29.29 compelling reasons and the voluntary arrangement.

29.30 (j) If the court does not approve the voluntary arrangement after hearing from the child  
29.31 or the child's guardian ad litem, the court shall dismiss the petition. In this case, either:

29.32 (1) the child must be returned to the care of the parent; or

30.1 (2) the agency must file a petition under section 260C.141, asking for appropriate relief  
30.2 under sections 260C.301 or 260C.503 to 260C.521.

30.3 (k) When the court approves the agency's compelling reasons for the child to continue  
30.4 in voluntary foster care for treatment, and finds that the agency has made reasonable efforts  
30.5 to finalize a permanent plan for the child, the court shall approve the continued voluntary  
30.6 foster care arrangement, and continue the matter under the court's jurisdiction for the purposes  
30.7 of reviewing the child's placement every 12 months while the child is in foster care.

30.8 (l) A finding that the court approves the continued voluntary placement means the agency  
30.9 has continued legal authority to place the child while a voluntary placement agreement  
30.10 remains in effect. The parent or the agency may terminate a voluntary agreement as provided  
30.11 in section 260D.10. Termination of a voluntary foster care placement of an Indian child is  
30.12 governed by section 260.765, subdivision 4.

30.13 **EFFECTIVE DATE.** This section is effective September 30, 2021.

30.14 Sec. 5. Minnesota Statutes 2020, section 260D.08, is amended to read:

30.15 **260D.08 ANNUAL REVIEW.**

30.16 (a) After the court conducts a permanency review hearing under section 260D.07, the  
30.17 matter must be returned to the court for further review of the responsible social services  
30.18 reasonable efforts to finalize the permanent plan for the child and the child's foster care  
30.19 placement at least every 12 months while the child is in foster care. The court shall give  
30.20 notice to the parent and child, age 12 or older, and the foster parents of the continued review  
30.21 requirements under this section at the permanency review hearing.

30.22 (b) Every 12 months, the court shall determine whether the agency made reasonable  
30.23 efforts to finalize the permanency plan for the child, which means the exercise of due  
30.24 diligence by the agency to:

30.25 (1) ensure that the agreement for voluntary foster care is the most appropriate legal  
30.26 arrangement to meet the child's safety, health, and best interests and to conduct a genuine  
30.27 examination of whether there is another permanency disposition order under chapter 260C,  
30.28 including returning the child home, that would better serve the child's need for a stable and  
30.29 permanent home;

30.30 (2) engage and support the parent in continued involvement in planning and decision  
30.31 making for the needs of the child;

30.32 (3) strengthen the child's ties to the parent, relatives, and community;

31.1 (4) implement the out-of-home placement plan required under section 260C.212,  
 31.2 subdivision 1, and ensure that the plan requires the provision of appropriate services to  
 31.3 address the physical health, mental health, and educational needs of the child; ~~and~~

31.4 (5) submit evidence to the court as specified in section 260C.712 when a child is placed  
 31.5 in a qualified residential treatment program setting as defined in section 260C.007,  
 31.6 subdivision 26d; and

31.7 ~~(5)~~ (6) ensure appropriate planning for the child's safe, permanent, and independent  
 31.8 living arrangement after the child's 18th birthday.

31.9 **EFFECTIVE DATE.** This section is effective September 30, 2021.

31.10 Sec. 6. Minnesota Statutes 2020, section 260D.14, is amended to read:

31.11 **260D.14 SUCCESSFUL TRANSITION TO ADULTHOOD FOR CHILDREN**  
 31.12 **YOUTH IN VOLUNTARY PLACEMENT.**

31.13 Subdivision 1. **Case planning.** When ~~the child~~ a youth is 14 years of age or older, the  
 31.14 responsible social services agency shall ensure that a child youth in foster care under this  
 31.15 chapter is provided with the case plan requirements in section 260C.212, subdivisions 1  
 31.16 and 14.

31.17 Subd. 2. **Notification.** The responsible social services agency shall provide a youth with  
 31.18 written notice of the right to continued access to services for certain children in foster care  
 31.19 past 18 years of age under section 260C.452, subdivision 3 foster care benefits that a youth  
 31.20 who is 18 years of age or older may continue to receive according to section 260C.451,  
 31.21 subdivision 1, and of the right to appeal a denial of social services under section 256.045.  
 31.22 The notice must be provided to the child youth six months before the child's youth's 18th  
 31.23 birthday.

31.24 Subd. 3. **Administrative or court reviews.** When ~~the child~~ a youth is ~~17~~ 14 years of  
 31.25 age or older, the administrative review or court hearing must include a review of the  
 31.26 responsible social services agency's support for the child's youth's successful transition to  
 31.27 adulthood as required in section 260C.452, subdivision 4.

31.28 **EFFECTIVE DATE.** This section is effective July 1, 2021.

32.1 **ARTICLE 3**32.2 **FAMILY FIRST PREVENTION ACT PROVIDER CERTIFICATION**

32.3 Section 1. Minnesota Statutes 2020, section 245A.02, is amended by adding a subdivision  
32.4 to read:

32.5 Subd. 3c. **At risk of becoming a victim of sex trafficking or commercial sexual**  
32.6 **exploitation.** For the purposes of section 245A.25, a youth who is "at risk of becoming a  
32.7 victim of sex trafficking or commercial sexual exploitation" means a youth who meets the  
32.8 criteria established by the commissioner of human services for this purpose.

32.9 **EFFECTIVE DATE.** This section is effective the day following final enactment.

32.10 Sec. 2. Minnesota Statutes 2020, section 245A.02, is amended by adding a subdivision to  
32.11 read:

32.12 Subd. 4a. **Children's residential facility.** "Children's residential facility" is defined as  
32.13 a residential program licensed under this chapter or chapter 241 according to the applicable  
32.14 standards in Minnesota Rules, parts 2960.0010 to 2960.0710.

32.15 **EFFECTIVE DATE.** This section is effective the day following final enactment.

32.16 Sec. 3. Minnesota Statutes 2020, section 245A.02, is amended by adding a subdivision to  
32.17 read:

32.18 Subd. 6d. **Foster family setting.** "Foster family setting" has the meaning given in  
32.19 Minnesota Rules, chapter 2960.3010, subpart 23, and includes settings licensed by the  
32.20 commissioner of human services or the commissioner of corrections.

32.21 **EFFECTIVE DATE.** This section is effective the day following final enactment.

32.22 Sec. 4. Minnesota Statutes 2020, section 245A.02, is amended by adding a subdivision to  
32.23 read:

32.24 Subd. 6e. **Foster residence setting.** "Foster residence setting" has the meaning given  
32.25 in Minnesota Rules, chapter 2960.3010, subpart 26, and includes settings licensed by the  
32.26 commissioner of human services or the commissioner of corrections.

32.27 **EFFECTIVE DATE.** This section is effective the day following final enactment.



33.1 Sec. 5. Minnesota Statutes 2020, section 245A.02, is amended by adding a subdivision to  
33.2 read:

33.3 Subd. 18a. **Trauma.** For the purposes of section 245A.25, "trauma" means an event,  
33.4 series of events, or set of circumstances experienced by an individual as physically or  
33.5 emotionally harmful or life-threatening and has lasting adverse effects on the individual's  
33.6 functioning and mental, physical, social, emotional, or spiritual well-being. Trauma includes  
33.7 the cumulative emotional or psychological harm of group traumatic experiences transmitted  
33.8 across generations within a community that are often associated with racial and ethnic  
33.9 population groups that have suffered major intergenerational losses.

33.10 **EFFECTIVE DATE.** This section is effective the day following final enactment.

33.11 Sec. 6. Minnesota Statutes 2020, section 245A.02, is amended by adding a subdivision to  
33.12 read:

33.13 Subd. 23. **Victim of sex trafficking or commercial sexual exploitation.** For the purposes  
33.14 of section 245A.25, "victim of sex trafficking or commercial sexual exploitation" means a  
33.15 person who meets the definitions in section 260C.007, subdivision 31, clauses (4) and (5).

33.16 **EFFECTIVE DATE.** This section is effective the day following final enactment.

33.17 Sec. 7. Minnesota Statutes 2020, section 245A.02, is amended by adding a subdivision to  
33.18 read:

33.19 Subd. 24. **Youth.** For the purposes of section 245A.25, "youth" means a "child" as  
33.20 defined in section 260C.007, subdivision 4, and includes individuals under 21 years of age  
33.21 who are in foster care pursuant to section 260C.451.

33.22 **EFFECTIVE DATE.** This section is effective the day following final enactment.

33.23 Sec. 8. Minnesota Statutes 2020, section 245A.041, is amended by adding a subdivision  
33.24 to read:

33.25 Subd. 6. **First date of working in a facility or setting; documentation**  
33.26 **requirements.** Children's residential facility and foster residence setting license holders  
33.27 must document the first date that a person who is a background study subject begins working  
33.28 in the license holder's facility or setting. If the license holder does not maintain documentation  
33.29 of each background study subject's first date of working in the facility or setting in the  
33.30 license holder's personnel files, the license holder must provide documentation to the

34.1 commissioner that contains the first date that each background study subject began working  
34.2 in the license holder's program upon the commissioner's request.

34.3 **EFFECTIVE DATE.** This section is effective August 1, 2021.

34.4 Sec. 9. **[245A.25] RESIDENTIAL PROGRAM CERTIFICATIONS FOR**  
34.5 **COMPLIANCE WITH THE FAMILY FIRST PREVENTION SERVICES ACT.**

34.6 Subdivision 1. **Certification scope and applicability.** (a) This section establishes the  
34.7 requirements that a children's residential facility or child foster residence setting must meet  
34.8 to be certified for the purposes of Title IV-E funding requirements as:

34.9 (1) a qualified residential treatment program;

34.10 (2) a residential setting specializing in providing care and supportive services for youth  
34.11 who have been or are at risk of becoming victims of sex trafficking or commercial sexual  
34.12 exploitation; or

34.13 (3) a residential setting specializing in providing prenatal, postpartum, or parenting  
34.14 support for youth.

34.15 (b) This section does not apply to a foster family setting in which the license holder  
34.16 resides in the foster home.

34.17 (c) Children's residential facilities licensed as detention settings according to Minnesota  
34.18 Rules, parts 2960.0230 to 2960.0290, or secure programs according to Minnesota Rules,  
34.19 parts 2960.0300 to 2960.0420, may not be certified under this section.

34.20 (d) For purposes of this section, "license holder" means an individual, organization, or  
34.21 government entity that was issued a children's residential facility or foster residence setting  
34.22 license by the commissioner of human services under this chapter or by the commissioner  
34.23 of corrections under chapter 241.

34.24 (e) Certifications issued under this section for foster residence settings may only be  
34.25 issued by the commissioner of human services and are not delegated to county or private  
34.26 licensing agencies under section 245A.16.

34.27 Subd. 2. **Program certification types and requests for certification.** (a) The  
34.28 commissioner of human services may issue certifications to license holders for the following  
34.29 types of programs:

34.30 (1) qualified residential treatment programs;

35.1 (2) residential settings specializing in providing care and supportive services for youth  
 35.2 who have been or are at risk of becoming victims of sex trafficking or commercial sexual  
 35.3 exploitation; and

35.4 (3) residential settings specializing in providing prenatal, postpartum, or parenting  
 35.5 support for youth.

35.6 (b) An applicant or license holder must submit a request for certification under this  
 35.7 section on a form and in a manner prescribed by the commissioner of human services. The  
 35.8 decision of the commissioner of human services to grant or deny a certification request is  
 35.9 final and not subject to appeal under chapter 14.

35.10 Subd. 3. **Trauma-informed care.** (a) Programs certified under subdivisions 4 or 5 must  
 35.11 provide services to a person according to a trauma-informed model of care that meets the  
 35.12 requirements of this subdivision, except that programs certified under subdivision 5 are not  
 35.13 required to meet the requirements of paragraph (e).

35.14 (b) For the purposes of this section, "trauma-informed care" is defined as care that:

35.15 (1) acknowledges the effects of trauma on a person receiving services and on the person's  
 35.16 family;

35.17 (2) modifies services to respond to the effects of trauma on the person receiving services;

35.18 (3) emphasizes skill and strength-building rather than symptom management; and

35.19 (4) focuses on the physical and psychological safety of the person receiving services  
 35.20 and the person's family.

35.21 (c) The license holder must have a process for identifying the signs and symptoms of  
 35.22 trauma in a youth and must address the youth's needs related to trauma. This process must  
 35.23 include:

35.24 (1) screening for trauma by completing a trauma-specific screening tool with each youth  
 35.25 upon the youth's admission or obtaining the results of a trauma-specific screening tool that  
 35.26 was completed with the youth within 30 days prior to the youth's admission to the program;  
 35.27 and

35.28 (2) ensuring that trauma-based interventions targeting specific trauma-related symptoms  
 35.29 are available to each youth when needed to assist the youth in obtaining services. For  
 35.30 qualified residential treatment programs, this must include the provision of services in  
 35.31 paragraph (e).

36.1 (d) The license holder must develop and provide services to each youth according to the  
36.2 principles of trauma-informed care including:

36.3 (1) recognizing the impact of trauma on a youth when determining the youth's service  
36.4 needs and providing services to the youth;

36.5 (2) allowing each youth to participate in selecting which services to receive;

36.6 (3) providing services to each youth that are person-centered and culturally responsive;  
36.7 and

36.8 (4) adjusting services for each youth to address additional needs of the youth.

36.9 (e) In addition to the other requirements of this subdivision, qualified residential treatment  
36.10 programs must use a trauma-based treatment model that includes:

36.11 (1) assessing each youth to determine if the youth needs trauma-specific treatment  
36.12 interventions;

36.13 (2) identifying in each youth's treatment plan how the program will provide  
36.14 trauma-specific treatment interventions to the youth;

36.15 (3) providing trauma-specific treatment interventions to a youth that target the youth's  
36.16 specific trauma-related symptoms; and

36.17 (4) training all clinical staff of the program on trauma-specific treatment interventions.

36.18 (f) At the license holder's program, the license holder must provide a physical, social,  
36.19 and emotional environment that:

36.20 (1) promotes the physical and psychological safety of each youth;

36.21 (2) avoids aspects that may be retraumatizing;

36.22 (3) responds to trauma experienced by each youth and the youth's other needs; and

36.23 (4) includes designated spaces that are available to each youth for engaging in sensory  
36.24 and self-soothing activities.

36.25 (g) The license holder must base the program's policies and procedures on  
36.26 trauma-informed principles. In the program's policies and procedures, the license holder  
36.27 must:

36.28 (1) describe how the program provides services according to a trauma-informed model  
36.29 of care;

36.30 (2) describe how the program's environment fulfills the requirements of paragraph (f);

37.1 (3) prohibit the use of aversive consequences for a youth's violation of program rules  
37.2 or any other reason;

37.3 (4) describe the process for how the license holder incorporates trauma-informed  
37.4 principles and practices into staff meetings; and

37.5 (5) if the program is certified to use restrictive procedures under Minnesota Rules, part  
37.6 2960.0710, how the program uses restrictive procedures only when necessary for a youth  
37.7 in a manner that addresses the youth's history of trauma and avoids causing the youth  
37.8 additional trauma.

37.9 (h) Prior to allowing a staff person to have direct contact, as defined in section 245C.02,  
37.10 subdivision 11, with a youth and annually thereafter, the license holder must train each staff  
37.11 person about:

37.12 (1) concepts of trauma-informed care and how to provide services to each youth according  
37.13 to these concepts; and

37.14 (2) impacts of each youth's culture, race, gender, and sexual orientation on the youth's  
37.15 behavioral health and traumatic experiences.

37.16 **Subd. 4. Qualified residential treatment programs; certification requirements. (a)**  
37.17 **To be certified as a qualified residential treatment program, a license holder must meet:**

37.18 (1) the definition of a qualified residential treatment program in section 260C.007,  
37.19 subdivision 26d;

37.20 (2) the requirements for providing trauma-informed care and using a trauma-based  
37.21 treatment model in subdivision 3; and

37.22 (3) the requirements of this subdivision.

37.23 (b) For each youth placed at the license holder's program, the license holder must  
37.24 collaborate with the responsible social services agency and other appropriate parties to  
37.25 implement the youth's out-of-home placement plan and the youth's short-term and long-term  
37.26 mental health and behavioral health goals in the assessment required by sections 260C.212,  
37.27 subdivision 1; 260C.704; and 260C.708.

37.28 (c) A qualified residential treatment program must use a trauma-based treatment model  
37.29 that meets all of the requirements of subdivision 3 that is designed to address the needs,  
37.30 including clinical needs, of youth with serious emotional or behavioral disorders or  
37.31 disturbances. The license holder must develop, document, and review a treatment plan for

38.1 each youth according to the requirements of Minnesota Rules, parts 2960.0180, subpart 2,  
38.2 item B; and 2960.0190, subpart 2.

38.3 (d) The following types of staff must be on-site or face-to-face according to the program's  
38.4 treatment model and must be available 24 hours a day and seven days a week to provide  
38.5 care within the scope of their practice:

38.6 (1) a registered nurse or licensed practical nurse licensed by the Minnesota Board of  
38.7 Nursing to practice professional nursing or practical nursing as defined in section 148.171,  
38.8 subdivisions 14 and 15; and

38.9 (2) other licensed clinical staff to meet each youth's clinical needs.

38.10 (e) A qualified residential treatment program must be accredited by one of the following  
38.11 independent, not-for-profit organizations:

38.12 (1) the Commission on Accreditation of Rehabilitation Facilities (CARF);

38.13 (2) the Joint Commission;

38.14 (3) the Council on Accreditation (COA); or

38.15 (4) another independent, not-for-profit accrediting organization approved by the Secretary  
38.16 of the United States Department of Health and Human Services.

38.17 (f) The license holder must facilitate participation of a youth's family members in the  
38.18 youth's treatment program, consistent with the youth's best interests and according to the  
38.19 youth's out-of-home placement plan required by sections 260C.212, subdivision 1; and  
38.20 260C.708.

38.21 (g) The license holder must contact and facilitate outreach to each youth's family  
38.22 members, including the youth's siblings, and must document outreach to the youth's family  
38.23 members in the youth's file, including the contact method and each family member's contact  
38.24 information. In the youth's file, the license holder must record and maintain the contact  
38.25 information for all known biological family members and fictive kin of the youth.

38.26 (h) The license holder must document in the youth's file how the program integrates  
38.27 family members into the treatment process for the youth, including after the youth's discharge  
38.28 from the program, and how the program maintains the youth's connections to the youth's  
38.29 siblings.

38.30 (i) The program must provide discharge planning and family-based aftercare support to  
38.31 each youth for at least six months after the youth's discharge from the program. When  
38.32 providing aftercare to a youth, the program must have monthly contact with the youth and

39.1 the youth's caregivers to promote the youth's engagement in aftercare services and to regularly  
 39.2 evaluate the family's needs. The program's monthly contact with the youth may be  
 39.3 face-to-face, by telephone, or virtual.

39.4 (j) The license holder must maintain a service delivery plan that describes how the  
 39.5 program provides services according to the requirements in paragraphs (b) to (i).

39.6 **Subd. 5. Residential settings specializing in providing care and supportive services**  
 39.7 **for youth who have been or are at risk of becoming victims of sex trafficking or**  
 39.8 **commercial sexual exploitation; certification requirements.** (a) To be certified as a  
 39.9 residential setting specializing in providing care and support services for youth who have  
 39.10 been or are at risk of becoming victims of sex trafficking or commercial sexual exploitation,  
 39.11 a license holder must meet the requirements of this subdivision.

39.12 (b) Settings certified according to this subdivision are exempt from the requirements of  
 39.13 section 245A.04, subdivision 11, paragraph (b).

39.14 (c) The program must use a trauma-informed model of care that meets all of the applicable  
 39.15 requirements of subdivision 3, and that is designed to address the needs, including emotional  
 39.16 and mental health needs, of youth who have been or are at risk of becoming victims of sex  
 39.17 trafficking or commercial sexual exploitation.

39.18 (d) The program must provide high quality care and supportive services for youth who  
 39.19 have been or are at risk of becoming victims of sex trafficking or commercial sexual  
 39.20 exploitation and must:

39.21 (1) offer a safe setting to each youth designed to prevent ongoing and future trafficking  
 39.22 of the youth;

39.23 (2) provide equitable, culturally responsive, and individualized services to each youth;

39.24 (3) assist each youth with accessing medical, mental health, legal, advocacy, and family  
 39.25 services based on the youth's individual needs;

39.26 (4) provide each youth with relevant educational, life skills, and employment supports  
 39.27 based on the youth's individual needs;

39.28 (5) offer a trafficking prevention education curriculum and provide support for each  
 39.29 youth at risk of future sex trafficking or commercial sexual exploitation; and

39.30 (6) engage with the discharge planning process for each youth and the youth's family.

39.31 (e) The license holder must maintain a service delivery plan that describes how the  
 39.32 program provides services according to the requirements in paragraphs (c) and (d).

40.1 (f) The license holder must ensure that each staff person who has direct contact, as  
40.2 defined in section 245C.02, subdivision 11, with a youth served by the license holder's  
40.3 program completes a human trafficking training approved by the Department of Human  
40.4 Services' Children and Family Services Administration before the staff person has direct  
40.5 contact with a youth served by the program and annually thereafter. For programs certified  
40.6 prior to January 1, 2022, the license holder must ensure that each staff person at the license  
40.7 holder's program completes the initial training by January 1, 2022.

40.8 Subd. 6. Residential settings specializing in providing prenatal, postpartum, or  
40.9 parenting supports for youth; certification requirements. (a) To be certified as a  
40.10 residential setting specializing in providing prenatal, postpartum, or parenting supports for  
40.11 youth, a license holder must meet the requirements of this subdivision.

40.12 (b) The license holder must collaborate with the responsible social services agency and  
40.13 other appropriate parties to implement each youth's out-of-home placement plan required  
40.14 by section 260C.212, subdivision 1.

40.15 (c) The license holder must specialize in providing prenatal, postpartum, or parenting  
40.16 supports for youth and must:

40.17 (1) provide equitable, culturally responsive, and individualized services to each youth;

40.18 (2) assist each youth with accessing postpartum services for at least six weeks postpartum,  
40.19 including providing each youth with:

40.20 (i) sexual and reproductive health services and education;

40.21 (ii) a postpartum mental health assessment and follow-up services; and

40.22 (3) discharge planning that includes the youth and the youth's family.

40.23 (d) On or before the date of a youth's initial physical presence at the facility, the license  
40.24 holder must provide education to the child's parent related to safe bathing and reducing the  
40.25 risk of sudden unexpected infant death and abusive head trauma from shaking infants and  
40.26 young children. The license holder must use the educational material developed by the  
40.27 commissioner of human services to comply with this requirement. At a minimum, the  
40.28 education must address:

40.29 (1) instruction that: (i) a child or infant should never be left unattended around water;

40.30 (ii) a tub should be filled with only two to four inches of water for infants; and (iii) an infant  
40.31 should never be put into a tub when the water is running; and



41.1 (2) the risk factors related to sudden unexpected infant death and abusive head trauma  
41.2 from shaking infants and young children and means of reducing the risks, including the  
41.3 safety precautions identified in section 245A.1435 and the risks of co-sleeping.

41.4 The license holder must document the parent's receipt of the education and keep the  
41.5 documentation in the parent's file. The documentation must indicate whether the parent  
41.6 agrees to comply with the safeguards described in this paragraph. If the parent refuses to  
41.7 comply, program staff must provide additional education to the parent as described in the  
41.8 parental supervision plan. The parental supervision plan must include the intervention,  
41.9 frequency, and staff responsible for the duration of the parent's participation in the program  
41.10 or until the parent agrees to comply with the safeguards described in this paragraph.

41.11 (e) On or before the date of a youth's initial physical presence at the facility, the license  
41.12 holder must document the parent's capacity to meet the health and safety needs of the child  
41.13 while on the facility premises considering the following factors:

41.14 (1) the parent's physical and mental health;

41.15 (2) the parent being under the influence of drugs, alcohol, medications, or other chemicals;

41.16 (3) the child's physical and mental health; and

41.17 (4) any other information available to the license holder indicating that the parent may  
41.18 not be able to adequately care for the child.

41.19 (f) The license holder must have written procedures specifying the actions that staff shall  
41.20 take if a parent is or becomes unable to adequately care for the parent's child.

41.21 (g) If the parent refuses to comply with the safeguards described in paragraph (d) or is  
41.22 unable to adequately care for the child, the license holder must develop a parental supervision  
41.23 plan in conjunction with the parent. The plan must account for any factors in paragraph (e)  
41.24 that contribute to the parent's inability to adequately care for the child. The plan must be  
41.25 dated and signed by the staff person who completed the plan.

41.26 (h) The license holder must have written procedures addressing whether the program  
41.27 permits a parent to arrange for supervision of the parent's child by another youth in the  
41.28 program. If permitted, the facility must have a procedure that requires staff approval of the  
41.29 supervision arrangement before the supervision by the nonparental youth occurs. The  
41.30 procedure for approval must include an assessment of the nonparental youth's capacity to  
41.31 assume the supervisory responsibilities using the criteria in paragraph (e). The license holder  
41.32 must document the license holder's approval of the supervisory arrangement and the  
41.33 assessment of the nonparental youth's capacity to supervise the child and must keep this

42.1 documentation in the file of the parent whose child is being supervised by the nonparental  
42.2 youth.

42.3 (i) The license holder must maintain a service delivery plan that describes how the  
42.4 program provides services according to the requirements in paragraphs (b) to (h).

42.5 Subd. 7. **Monitoring and inspections.** (a) For a program licensed by the commissioner  
42.6 of human services, the commissioner of human services may review a program's compliance  
42.7 with certification requirements by conducting an inspection, a licensing review, or an  
42.8 investigation of the program. The commissioner may issue a correction order to the license  
42.9 holder for a program's noncompliance with the certification requirements of this section.

42.10 For a program licensed by the commissioner of human services, a license holder must make  
42.11 a request for reconsideration of a correction order according to section 245A.06, subdivision  
42.12 2.

42.13 (b) For a program licensed by the commissioner of corrections, the commissioner of  
42.14 human services may review the program's compliance with the requirements for a certification  
42.15 issued under this section biennially and may issue a correction order identifying the program's  
42.16 noncompliance with the requirements of this section. The correction order must state the  
42.17 following:

42.18 (1) the conditions that constitute a violation of a law or rule;

42.19 (2) the specific law or rule violated; and

42.20 (3) the time allowed for the program to correct each violation.

42.21 (c) For a program licensed by the commissioner of corrections, if a license holder believes  
42.22 that there are errors in the correction order of the commissioner of human services, the  
42.23 license holder may ask the Department of Human Services to reconsider the parts of the  
42.24 correction order that the license holder alleges are in error. To submit a request for  
42.25 reconsideration, the license holder must send a written request for reconsideration by United  
42.26 States mail to the commissioner of human services. The request for reconsideration must  
42.27 be postmarked within 20 calendar days of the date that the correction order was received  
42.28 by the license holder and must:

42.29 (1) specify the parts of the correction order that are alleged to be in error;

42.30 (2) explain why the parts of the correction order are in error; and

42.31 (3) include documentation to support the allegation of error.

43.1 A request for reconsideration does not stay any provisions or requirements of the correction  
43.2 order. The commissioner of human services' disposition of a request for reconsideration is  
43.3 final and not subject to appeal under chapter 14.

43.4 (d) Nothing in this subdivision prohibits the commissioner of human services from  
43.5 decertifying a license holder according to subdivision 8 prior to issuing a correction order.

43.6 Subd. 8. **Decertification.** (a) The commissioner of human services may rescind a  
43.7 certification issued under this section if a license holder fails to comply with the certification  
43.8 requirements in this section.

43.9 (b) The license holder may request reconsideration of a decertification by notifying the  
43.10 commissioner of human services by certified mail or personal service. The license holder  
43.11 must request reconsideration of a decertification in writing. If the license holder sends the  
43.12 request for reconsideration of a decertification by certified mail, the license holder must  
43.13 send the request by United States mail to the commissioner of human services and the  
43.14 request must be postmarked within 20 calendar days after the license holder received the  
43.15 notice of decertification. If the license holder requests reconsideration of a decertification  
43.16 by personal service, the request for reconsideration must be received by the commissioner  
43.17 of human services within 20 calendar days after the license holder received the notice of  
43.18 decertification. When submitting a request for reconsideration of a decertification, the license  
43.19 holder must submit a written argument or evidence in support of the request for  
43.20 reconsideration.

43.21 (c) The commissioner of human services' disposition of a request for reconsideration is  
43.22 final and not subject to appeal under chapter 14.

43.23 Subd. 9. **Variiances.** The commissioner of human services may grant variances to the  
43.24 requirements in this section that do not affect a youth's health or safety or compliance with  
43.25 federal requirements for Title IV-E funding if the conditions in section 245A.04, subdivision  
43.26 9, are met.

43.27 **EFFECTIVE DATE.** This section is effective the day following final enactment.