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**Rules of**  
**Department of Social Services**  
**Division 35—Children’s Division**  
**Chapter 60—Licensing of Foster Family Homes**

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**Title 13—DEPARTMENT OF  
SOCIAL SERVICES**

**Division 35—Children's Division**

**Chapter 60—Licensing of Foster Family  
Homes**

**13 CSR 35-60.010 Family Homes Offering  
Foster Care**

*PURPOSE: This rule explains that the Children's Division is responsible for licensing foster homes. Terms used for this purpose are defined. The rule also gives procedures for approval, denial or revocation of a license.*

(1) Approval of License.

(A) As required in sections 210.481–210.536, RSMo 2000, any individual(s) planning to offer twenty-four (24)-hour care to one (1) or more foster children must submit signed application forms.

(B) Any applicant and any household member age seventeen (17) and older and any child less than seventeen (17) who has been certified as an adult for the commission of a crime, or has been convicted or pled guilty or *nolo contendere* to any crime, shall submit signed release forms and two (2) sets of fingerprints for the purpose of obtaining background screening for Child Abuse and Neglect, criminal and circuit court records.

1. Two (2) sets of fingerprints shall be sent to the Missouri Highway Patrol for criminal background checks.

2. Subject to appropriation, the total cost of fingerprinting required by section 210.487, RSMo Supp. 2005 may be paid by the state, including reimbursement of persons incurring the cost of fingerprinting under this subsection.

(C) Upon compliance with licensing law and regulations, the director shall authorize issuance of a license for a term not to exceed two (2) years, subject to renewal on expiration.

1. The license is not transferable and applies only to the individual(s) to whom it is issued. A license will be issued to either married couples or a single individual. Only one (1) license can be issued per household. All adults in the household who will have child care responsibility will be required to attend state approved foster parent training.

2. The license is the property of the division and is subject to suspension and/or revocation upon failure of the individual(s) to comply with the licensing requirements.

3. The license shall be kept on the premises of the home.

4. The number, sex and age range of foster children the home is authorized to accept for care shall be specified on the license and shall not be exceeded except for the temporary placement of sibling or mother and child family groups. The foster family shall be able to indicate age and gender preference.

5. There shall be no fee for the license or investigations conducted by the personnel of the division or providers contracted by the division.

6. An identification card shall be issued to each foster parent at the time of initial licensure or renewal, verifying current licensing status.

(2) Denial, Suspension, or Revocation of License.

(A) Any person aggrieved by a final decision of the division made with regard to license issuance, license suspension, license revocation or license denial shall be entitled to a hearing and review by the director or his/her designee.

(B) Written notice, specifying the reasons for denial, suspension, or revocation, shall be provided. Any notice for suspension or revocation shall be given ten (10) days prior to the effective date of the action. If a written request for a hearing is received within thirty (30) calendar days from the date of the notice, a hearing will be provided.

(C) The division will retain the option not to renew a foster home license in cases where there has been a voluntary suspension for one (1) year or more or if a licensed foster home has not accepted a placement over a two (2)-year period.

(D) Any person wishing to appeal the administrative decision of the division shall be entitled to judicial review thereof provided in section 210.526, RSMo 2000.

(3) Utilization of Home.

(A) The granting of a license does not guarantee placement of a child.

(B) Placement decisions shall be made at the discretion of the Children's Division and/or Juvenile Court in the best interest of the child based on a totality of circumstances. Parental preferences will be taken into consideration in selecting the placement provider.

(4) Exemption. Any foster home that is exempt from licensing under sections 210.481–210.536, RSMo 2000 but receives a payment from the division under section 207.020.1(17), RSMo 2000 shall comply with these rules.

*AUTHORITY: sections 207.020 and 210.506, RSMo 2000.\* Emergency rule filed July 18, 2006, effective Aug. 4, 2006, expired Jan. 30, 2007. Original rule filed July 18, 2006, effective Jan. 30, 2007.*

*\*Original authority: 207.020, RSMo 1945, amended 1961, 1965, 1977, 1981, 1982, 1986, 1993 and 210.506, RSMo 1982, amended 1993, 1995.*

**13 CSR 35-60.020 Number of Children**

*PURPOSE: This rule tells the ages and number of children to be kept in a foster home. It also lists the exceptions.*

(1) The maximum number of children in a foster home shall not exceed six (6) including any of the foster parents' own children. A child counts as any individual under age eighteen (18), with the following exceptions:

- (A) Foster children sibling groups; and
- (B) Minor mother and child family groups.

(2) Foster parent(s) shall not provide care for more than two (2) children under age two (2) and no more than four (4) children under the age of five (5) unless necessary to accommodate a sibling group on a temporary basis.

(3) Any foster home exceeding the regulated total numbers at the time these regulations are adopted shall continue to qualify for license if all other requirements are met. Additional foster children shall not be placed in these homes until such time as they can comply to this rule.

(4) Foster parents shall notify the division of all contracts for the care of children held at the time of application for an initial license or gained after licensure.

(5) If a licensed foster parent is dually licensed as a child care provider, no foster child under the age of seven (7) may be placed in that home unless necessary to accommodate a sibling group on a temporary basis. The number of foster children shall not cause the dually licensed provider to exceed child care licensed capacity.

*AUTHORITY: sections 207.020 and 210.506, RSMo 2000.\* Original rule filed July 18, 2006.*

*\*Original authority: 207.020, RSMo 1945, amended 1961, 1965, 1977, 1981, 1982, 1986, 1993 and 210.506, RSMo 1982, amended 1993, 1995.*



**13 CSR 35-60.030 Minimum Qualifications of Foster Parent(s)**

*PURPOSE: This rule explains who can qualify to be a foster parent. It gives the health requirements, standards of living and personal information required.*

(1) Age of Foster Parent(s). Applicant(s) shall not receive a license when one or both are younger than twenty-one (21) except as provided for relative care in section 210.565, RSMo Supp. 2005.

(2) Citizenship Status of Foster Parent(s). Applicants to provide foster care must be a citizen of the United States, either through birth or naturalization or be able to verify lawful immigration status.

(3) Personal Qualifications Required of Foster Parent(s).

(A) Foster parent(s) must be able to acquire skills and demonstrate performance based competence in the care of children including but not limited to:

1. Protecting and nurturing;
2. Meeting developmental needs and addressing developmental delays;
3. Supporting relationships between children and families;
4. Connecting children to lifetime relationships; and
5. Working as a member of a professional team.

(B) Foster parents shall cooperate with the division in all inquiries involving the care of the foster children. The foster parents’ ability to meet these competencies shall be re-evaluated at each relicensure.

(C) Foster parent(s) shall be responsible, mature individual(s) of reputable character who exercise sound judgment, display the capacity to provide good care for children and display the motivation to foster.

(4) Health of Foster Family.

(A) At the time of application for an initial license and at the time of license renewal, foster parents shall authorize their physician to submit a statement on a prescribed form, regarding his/her opinion of the mental health of each foster family member and certifying that a physical examination was completed within the past year and that all household members were free from communicable disease or are not a threat to the health of foster children and are up-to-date on all immunizations. If any member of the family is not up-to-date on immunizations, there must be a statement from the family physician indicating that the health of foster children is not at

risk. A tuberculosis (TB) test and a chest X ray may be completed, if recommended by the physician.

(B) Foster parents and all foster family members must be determined by a physician to be in good physical and mental health. The licensing agency shall review the examination reports.

(C) If the licensing agency has reason to question the physical or mental health of any member of the foster family, the agency shall require additional mental or physical evaluations.

(5) Foster Parent Training.

(A) Preservice Training. Prior to licensure each adult with parenting responsibilities is required to successfully complete a competency based training approved by the licensing agency.

(B) In-Service Training. To maintain a foster home license each foster parent shall meet performance based criteria as part of a professional family development plan and complete a prescribed number of foster parent training hours as approved by the licensing authority during each two (2)-year licensure period. The subject of training shall be directly tied to the foster parent professional development plan and related to the needs and ages of children in their care.

(6) Personal information elicited in the homestudy shall include but not be limited to:

- (A) Family size and household composition of the foster family;
- (B) Ethnic and racial background of the foster family;
- (C) Religious preferences and practices of the foster family;
- (D) Lifestyles and practices, including sexual orientation, of the foster parents;
- (E) Educational practices of the foster family; and
- (F) Employment of the foster parents.

(7) Parenting Skills Information Elicited in the Homestudy.

(A) Foster parent structures environment so that it is safe and healthy for the child.

(B) Foster parent expresses positive feelings toward the child verbally and physically.

(C) Foster parent recognizes and responds appropriately to the child’s verbal and physical expressions of needs and wants.

(D) Foster parent consistently uses basic behavior management techniques in dealing with the child.

(E) Foster parent consistently uses appropriate techniques to discipline the child and does not use or will not use corporal punish-

ment on any child in the custody of the division.

(F) Foster parent guides the child toward increasing independence.

(G) Foster parent behaves in a way that recognizes the immaturity of the child.

(8) All information which is collected by the division in the licensing study will be condensed to comprise a foster home profile which will be available to team members when children are placed into the care of the division, in order for placement decisions to be made in the best interests of the child. The profile will not contain any protected health information, financial information, or information on biological or adopted children of the foster family.

*AUTHORITY: sections 207.020 and 210.506, RSMo 2000.\* Emergency rule filed July 18, 2006, effective Aug. 4, 2006, expired Jan. 30, 2007. Original rule filed July 18, 2006, effective Jan. 30, 2007.*

*\*Original authority: 207.020, RSMo 1945, amended 1961, 1965, 1977, 1981, 1982, 1986, 1993 and 210.506, RSMo 1982, amended 1993, 1995.*

**13 CSR 35-60.040 Physical Standards for Foster Homes**

*PURPOSE: This rule explains what is required in a physical structure. It further describes sleeping arrangements and fire and safety requirements.*

(1) General Requirements.

(A) The foster parent(s) shall be so located that they have access to schools, recreational, religious or other community resources.

(B) The home shall be so constructed, arranged and maintained as to provide adequately for the health and safety of all occupants. It shall be of size and space and shall have furnishings and equipment to accommodate comfortably both the foster family and foster children in their care.

(C) The division may require inspection of the home by fire, health, sanitation or safety officials when in the agency’s judgment such expert opinion is needed to assist in making a decision about the safety of the home for the care of foster children. The home must comply with all local, county and state ordinances.

(D) All flammable liquids, matches, cleaning supplies, poisonous materials, medicines, or other hazardous items shall be stored so as to be inaccessible to the children, taking into consideration the age and mental capacities of the children.



(E) Private water supply shall be safe for human consumption and testing may be required at the time of licensing. The cost of testing will be covered by the applicant. If the private water supply is found to be unsafe for human consumption, an alternative source for drinking water shall be made available.

(F) The interior of the home shall be free from an accumulation of visible dirt and any evidence of vermin and rodent infestations.

(G) All rooms shall have proper lighting and ventilation. Windows and doors shall be screened as needed unless the area is air conditioned.

(H) All interior doors shall be designed to permit the opening of a locked door from the outside in an emergency.

(I) The home shall have space for indoor play and access to outdoor play space. The outdoor play space shall be fenced when in the judgment of the division, nearby street traffic, railroad tracks, lake, river, swimming pool, or other potential hazards suggest the necessity for such protections.

(J) Mobile Homes.

1. There shall be an exit(s) at each end(s) of the home.

2. The mobile home shall be skirted with latticed or solid skirting and securely anchored by cable to the ground.

#### (2) Sleeping Arrangements.

(A) Foster children shall not be permitted to sleep in any building, apartment or other structure which is separate from the foster family home; nor shall any foster child be permitted to sleep in an unfinished attic, in an unfinished basement or in a hall or any other room which is normally used for other than sleeping arrangements.

(B) Foster children shall not be permitted to sleep in finished basement bedrooms or in bedrooms above the second floor of a single family dwelling unless suitable provision has been made for heating, ventilation and humidity control and all exits from these bedrooms have been approved by the division.

(C) At night a responsible adult shall sleep within call of the foster children.

(D) Foster children of the opposite sex, who are six (6) years of age or older, shall not sleep in the same room. The best interest of the child in terms of safety and appropriateness must be considered with the age of any child.

(E) Foster children two (2) years of age or older shall not sleep in the bedroom of the foster parents except for special temporary care, such as during a child's illness. Foster children should never sleep in a bed with foster parents.

(F) Each bed or crib shall be of a size as to insure comfort of the foster child, shall have a firm mattress or an orthopedic supportive surface, in good, clean condition with waterproof covering, if needed, and suitable covers adequate to the season.

(G) Each foster child under age two (2) shall have a separate bed. Each foster child over age two (2) shall have bed space equivalent to one-half (1/2) of a full-size bed. The abuse and neglect history of each child should be taken into consideration before allowing them to share a bed with another child.

(H) Separate and accessible drawer space for personal belongings and closet space for clothing shall be available for each foster child.

#### (3) Fire and Safety Requirements.

(A) All foster homes shall have a working telephone in the home or an agency approved form of emergency contact.

(B) In all foster homes the telephone numbers of the fire department, police, doctor and ambulance shall be posted at all times. The house number shall be plainly visible from the street in case of emergency.

(C) The foster family shall have a plan for evacuation in case of fire. Foster children shall be instructed in the evacuation plan. The plan shall be posted. Fire drills shall be held.

(D) Every room used for sleeping, living or dining purposes shall have at least two (2) means of exit. At least one (1) of which shall be a door or stairway providing a means of unobstructed travel to the outside. An operable window will be considered as one (1) means of exit.

(E) No room or space shall be occupied for living or sleeping purposes which is accessible only by a ladder, folding stairs or through a trap door.

(F) In apartment buildings where the foster family residence is second floor or above there shall be an exit stairway.

(G) An operable smoke detector, with battery installed, shall be installed at a location where sleeping areas can be alerted.

(H) A charged portable ABC fire extinguisher of at least five (5) pound capacity shall be located near the kitchen area.

(I) Heating appliances shall not be located in a place which blocks escape in case of malfunctioning which could result in a fire.

(J) Fireplaces, wood stoves, heaters, radiators or floor furnaces shall be protected as required by the fire inspector.

(K) A carbon monoxide detector shall be required in all homes with gas appliances.

#### (4) Weapons Requirements.

(A) Any and all firearms and ammunition shall be stored so as to be inaccessible to children. Foster parents shall store ammunition separately from any weapons. Firearms and ammunition shall be stored in locked areas or cabinets with keys secured so as to be inaccessible to children.

(B) No firearms shall be kept in any vehicle transporting (unless weapons are inaccessible to the foster child—i.e., in a locked glove box or other locked container or in the trunk of the vehicle) or on any person providing care or supervision to foster children. (An exception will be made for any person transporting a foster child who must carry a weapon as part of their job responsibilities—i.e., law enforcement officers.) No firearms possessed in violation of a state or federal law or a local government ordinance shall be present at any time in the home, on any household member, or in any vehicle in which the children are riding.

(C) Weapons storage shall be made available for external viewing by Children's Division staff in order to assure weapons are inaccessible to children.

*AUTHORITY: sections 207.020 and 210.506, RSMo 2000.\* Original rule filed July 18, 2006, effective Jan. 30, 2007.*

*\*Original authority: 207.020, RSMo 1945, amended 1961, 1965, 1977, 1981, 1982, 1986, 1993 and 210.506, RSMo 1982, amended 1993, 1995.*

### 13 CSR 35-60.050 Care of Children

*PURPOSE: This rule describes the quality of care to be provided by foster parents. It further lists the division's expectations concerning education and training, moral and religious training, discipline, chores and work, recreation and leisure, earning and spending money, supervision and transportation. Responsibilities of foster parents to the legal custodian are also listed.*

(1) Foster parents shall cooperate in the division's delivery of social services to the foster child's family.

(A) Foster parent(s) shall actively participate in the Family Support Team Meetings either through attendance or, in lieu of physical attendance, written or oral input.

(B) The foster parent(s) shall notify the licensing agency within two (2) weeks of any pertinent change in family situation including but not limited to, a change in address, telephone number, employment, household composition, marital status, arrest, convictions or guilty pleas.

**(2) Physical Care.**

(A) The foster parent(s) shall work with the agency to provide all necessary medical and dental care for each child.

1. The foster parent(s) shall obtain medical and dental examinations for the child immediately following placement and at least annually thereafter in cooperation with the placing agency.

2. The foster parent(s) shall keep the agency informed of any health needs of the child.

3. The foster parent(s) shall respond to emergency medical needs in accordance with agency policies and procedures and/or local legal requirements.

4. The foster parent(s) shall not disclose confidential medical and social information.

5. The foster parent(s) shall maintain a medical file on each foster child placed in the home. The file is to follow the child in the event of removal from the foster home.

(B) The foster parent(s) shall provide a routine for foster children for the establishment of good personal hygiene.

(C) The foster parent(s) shall provide food of quality and quantity sufficient to meet the nutritional requirements of the foster child according to his/her age and activities. All foods shall be prepared, served and stored under sanitary conditions.

(D) The foster parent(s) shall provide clothing appropriate to the foster child's age and of quality and quantity similar to other children in the community. Where it is appropriate and possible, foster children shall be allowed to participate in the selection of their own clothing. The possessions and clothing of the foster child shall follow the child in the event of removal from the foster home.

(E) Care of foster children shall not be combined with regular part- or full-time care of other children, nonrelated aged individuals or with any other service or business conducted in the home without the written approval of the licensing agency.

**(3) Education and Training.**

(A) The educational and vocational plan for the foster child shall be determined by the Family Support Team, including at minimum the legal custodian (the individual or agency having responsibility for the care, custody and control of a child) or the representative of the licensed child placing agency, the parent(s), foster parent(s), juvenile officer, and child of appropriate age, twelve (12) and above. Planning will be focused on what is in the best interest of the child and in accordance with section 167.031, RSMo.

(B) The Children's Division and Juvenile Office shall be informed of any educational plan other than that which takes place in the traditional public school setting.

(C) Foster parent(s) shall observe the legal requirements and the plan of school attendance developed by the Family Support Team in accordance with state law.

(D) Foster parent(s) may "act as the parent" on behalf of the foster child in the development of an Individual Education Plan (IEP). The foster parent acting as the parent may represent a child in all matters relating to the identification, evaluation, educational placement and the provision of a free, appropriate, public education for the child.

(E) Foster parent(s) shall maintain a school file for the foster child. The file is to follow the child in the event of removal from the home.

**(4) Moral and Religious Training.**

(A) Foster parent(s) shall provide for the moral training of foster children in care and shall make opportunities available for religious education and attendance of services compatible with the child's religious heritage, provided that this training would not be injurious to the foster child's physical, mental or emotional health.

(B) Foster parent(s) shall support a foster child's cultural identity and individuality in foster care.

**(5) Discipline.**

(A) Discipline shall be used in a constructive, fair and consistent manner. Foster parents shall not use corporal punishment against foster children.

(B) No foster child shall be subjected to verbal abuse, threats of corporal punishment, derogatory remarks about him/herself or members of his/her family, threats to withhold family visits, threats to expel the child from the foster home or the withholding of food, shelter or clothing.

(C) No foster child shall be subjected to abuse or neglect as defined in sections 210.110–210.165, RSMo Supp. 2005.

(D) One (1) child shall not be permitted to discipline another child in a foster home.

(E) No foster child shall be deprived of mail or family visits as a form of discipline.

**(6) Chores and Work.**

(A) No foster child shall be used for soliciting funds or in any other manner exploited by the foster family.

(B) The foster parent(s) shall provide work and chore experience for foster children that is appropriate to the age, health and abilities of each individual child. Chores and work shall not interfere with the foster child's time for school, study periods, play, sleep, normal community contacts or visits with his/her family.

(C) The foster parent(s) shall differentiate between chores which foster children are expected to perform as their share in family living and specific work assignments or opportunities as a means of earning money either in or outside the foster family.

(D) The foster parent(s) shall not require or permit work which requires the foster child to operate dangerous or hazardous equipment or machinery unless adequate safety equipment and proper adult supervision are provided.

(E) Foster children shall not be required to perform chores or work which is different in amount and type from the community standard for other children.

(7) Recreation and Leisure. Foster parent(s) shall provide opportunities for social and physical development through recreation and leisure time activities.

**(8) Earning and Spending Money.**

(A) The foster parent(s) shall make every reasonable effort to provide opportunities for experience in earning, spending and saving money based on age and individual requirements of each foster child.

(B) The foster parent(s) shall not require an employed foster child to pay room and board.

(C) Foster children shall not be permitted to drive any vehicle without insurance coverage and a proper operator's license.

(D) Foster children shall not be permitted to own or operate firearms or motor vehicles without written authorization from the legal custodian and proper training.

**(9) Supervision.**

(A) The foster parent(s) shall provide and ensure safe and adequate supervision at all times appropriate to the foster child's age and individual needs.

(B) The foster parent(s) shall comply with all Family Support Team recommendations and court orders regarding visitation plans; any exceptions require prior approval from the legal custodian.

**(10) Transportation.**



(A) The foster parent(s) shall provide proper insurance coverage if foster children are transported in a private vehicle. Safety standards for the vehicle shall be within the minimum requirements of the law and the vehicle shall be operated by a person with a valid operating license.

(B) All children shall be secured in the car by car seats or seat belts as required by law.

(C) The foster parent(s) shall cooperate with the agency in providing transportation as indicated by the individual needs of each foster child including but not limited to medical and dental appointments, educational or training programs and counseling.

(11) Responsibility of Foster Parent(s) to Child's Legal Custodian.

(A) The foster parent(s) shall keep the legal custodian informed of the foster child's progress while in their care. They shall consult with the legal custodian regarding care, training and plans for the foster child whenever more than the day-to-day routine is involved.

(B) The foster parent(s) shall consult with the legal custodian before taking or allowing the foster child to go on vacation trips or visits to the foster child's relatives.

(C) The foster parent(s) shall secure the approval of the Children's Division worker, supervisor or designated case manager before making plans for the care of the foster child by other persons for any period in excess of twenty-four (24) hours.

(D) The foster parent(s) shall notify the legal custodian immediately of emergencies involving the foster child. This requirement in no way relieves the foster parent(s) from first taking action, such as obtaining emergency medical treatment for the child before notifying his/her legal custodian. This includes serious illness or injury requiring medical treatment, unauthorized absence from the home or other situations in which sound judgment dictates that the legal custodian be notified.

(E) The foster parent(s) shall allow the legal custodian a reasonable period of time in which to make suitable plans for the foster child when the foster parents have requested the child's removal. The foster parent(s) shall give the legal custodian two (2) weeks' advance written notice when requesting removal of a child unless there is an emergency. The advance written notice must include an explanation of the reason why the foster parent is requesting the child's removal.

(F) Foster children shall not be permitted to use or be known by the foster parent(s) surname, unless the child, child's parent(s)

and legal guardian give their consent in writing.

(G) The foster parent(s) shall notify the legal custodian at least thirty (30) days prior to moving out-of-state.

*AUTHORITY: sections 207.020 and 210.506, RSMo 2000.\* Original rule filed July 18, 2006, effective Jan. 30, 2007.*

*Original authority: 207.020, RSMo 1945, amended 1961, 1965, 1977, 1981, 1982, 1986, 1993 and 210.506, RSMo 1982, amended 1993, 1945.*

### 13 CSR 35-60.060 Records and Reports

*PURPOSE: This rule requires that foster parents keep records on children placed in their care. The division's assistance is required in this matter. The record's contents are listed in this rule.*

(1) General. A record shall be developed by the division on each foster child and given to the foster parents at the time of placement. As additional information is available, it shall be given to foster parent(s). This record shall be maintained by the foster parent(s) throughout the placement and shall follow the child in the event of removal from the foster home.

(2) Contents.

(A) Foster child's name, birth date, date of placement, county of original jurisdiction, placement county, case manager's name and office telephone number and an after hours telephone number for the case manager.

(B) Full name and address of the biological and/or legal parent(s) and other interested and responsible relatives where appropriate.

(C) All medical and dental information, including but not limited to diseases, surgical history, allergies, immunizations, psychosocial history and mental health history.

(D) The foster child's school records, rewards, pictures, church records or any special items that will help to document the child's background.

*AUTHORITY: sections 207.020 and 210.506, RSMo 2000.\* Original rule filed July 18, 2006, effective Jan. 30, 2007.*

*\*Original authority: 207.020, RSMo 1945, amended 1961, 1965, 1977, 1981, 1982, 1986, 1993 and 210.506, RSMo 1982, amended 1993, 1995.*

### 13 CSR 35-60.070 Foster Care Services for Youth with Elevated Needs

*PURPOSE: This rule defines Foster Care Services for Youth with Elevated Needs.*

(1) Definitions for the purpose of this regulation:

(A) Family support team (FST)—The group of individuals assembled to participate in a family support team meeting, a meeting convened by the division or children's services provider on behalf of the family and/or child for the purpose of determining service and treatment needs, determining the need for placement and developing a plan for reunification or other permanency options, determining the appropriate placement of the child, evaluating case progress, and establishing and revising the case plan;

(B) Foster Youth with Elevated Needs—A program designed for youth with identifiable and documented moderate or serious emotional and/or behavioral needs requiring intensive and individualized intervention to succeed in a community-based family setting and to achieve their goal of permanency. There are two (2) levels available to meet the child-specific needs: Level A and Level B;

(C) Psychiatric hospital—A hospital which provides diagnostic and treatment services consistent with the needs of the child. This is the most restrictive placement option utilized by the Children's Division;

(D) Medical foster care—A licensed foster home utilized to meet the needs of a child with extraordinary medical needs. Medical foster parents shall have a foster parent license and receive training from qualified medical care providers specific to the unique medical needs of the child;

(E) Residential care facility—A facility providing twenty-four (24) hour care in a group setting to children who are unrelated to the person operating the facility and unattended by a parent or guardian;

(F) Traditional foster home—A private residence of one (1) or more family members providing twenty-four (24) hour care to one (1) or more, but less than seven (7), children who are unattended by a parent or guardian and unrelated to either foster parent by blood, marriage, or adoption;

(G) Selection/screening team—A team constituted to evaluate a youth's appropriateness for a higher level placement. The composition of the team shall be determined by the Children's Division and shall take into consideration the type of expertise necessary to assess the unique needs of the youth being assessed. The team shall include the following individuals: case manager, supervisor, and the circuit or regional specialist or designated facilitator; and

(H) "Youth" or "child"—A person within the state who is under the age of eighteen (18), or in the custody of the Children's Division to a maximum age of twenty-one (21).



(2) Process for Determining Youth with Elevated Needs.

(A) Children in need of foster care will be placed in the least restrictive setting in a traditional foster home. In the event that the child’s condition or behaviors indicate that the child requires a higher level of care, the Children’s Division will assess the youth’s needs to determine which is the least restrictive, but most appropriate, placement to meet the needs of the particular youth based on available resources. The Children’s Division may conduct an elevated needs assessment on the recommendation of the child’s family support team, any member of the family support team, or at the written request of the child’s resource provider.

(B) The elevated needs assessment shall be conducted by the selection/screening team which will decide if the youth is an appropriate candidate for the program by considering the individual needs of the youth, the presenting behaviors of the youth, and the impact such behaviors have in the placement setting. Youth eligible for elevated needs should have more than one (1) presenting problem as listed in Presenting Problems Displayed By the Youth with Elevated Needs—Level A and Presenting Problems Displayed By the Youth with Elevated Needs—Level B sections of this regulation.

(C) Upon evaluation, the selection/screening team shall conclude—

- 1. That the youth is not appropriate for the Youth with Elevated Needs Program;
- 2. That the youth is appropriate, but a compatible home is not available in the county of origin or nearby counties; or
- 3. The youth is appropriate and there is a compatible home.

(3) Payment will be made for the least restrictive level of care found to be appropriate for the youth as determined by the screening team. The resource provider will only receive payment for one (1) level of care for the youth. The division will not make multiple payments for the same level of care to the same provider for the same youth.

(4) Characteristics of a Youth with Elevated Needs—Level A.

(A) Youth with Level A Elevated Needs require significantly greater structure and supervision and are significantly less able to assume responsibility for their daily care than youth in traditional foster care. These youth typically, but not always, have experienced multiple out-of-home placements. Youth appropriate for Level A fall into one (1) of two (2) categories—

- 1. Youth presently in a residential setting

who may be moved to a less restrictive setting, but are not reasonably able to effectively function in a traditional foster home or in their parents’ home; or

2. Youth lacking a viable placement in a traditional foster family home or in their family home, and who, because of their presenting problems, would be placed in a residential setting unless an available Level A foster home can be found.

(5) Characteristics of a Youth with Elevated Needs—Level B.

(A) Youth with Level B Elevated Needs have significantly serious emotional and/or behavioral problems that require the twenty-four (24) hour availability of a highly-skilled Level B resource parent. These youth—

- 1. Because of their presenting problems, would be placed in a level III or above residential treatment facility or psychiatric hospital; and
- 2. Have been discharged from a residential treatment facility or psychiatric hospital and are unable to function effectively in a traditional foster home.

(6) Presenting Problems Displayed By the Youth with Elevated Needs—Level A. Level A children have a documented history of presenting behaviors which render the child unable to effectively function outside of a highly structured setting. Examples of behaviors which the Children’s Division may consider include, but are not limited to:

(A) Significant behaviors which, if not modified, could result in the youth being designated as a status offender/juvenile delinquent;

(B) History of irresponsible or inappropriate sexual behavior, which has resulted in the need for extraordinary supervision;

(C) Significant, extraordinary, threatening, intimidating, or destructive behavior which is demonstrated by multiple incidents over a period of time;

(D) Significant and extraordinary oppositional and/or defiant behaviors when dealing with authority figures which pose a significant risk to the health and safety of the child or to others;

(E) Significant and extraordinary problems with peer-to-peer interactions which pose a significant risk to the health and safety of the child and/or his or her peers;

(F) Significant and extraordinary behavioral and academic problems at school that affect academic achievement or social adjustment;

(G) Significant and extraordinary conduct problems with lying, stealing, or manipulating;

(H) Significant and extraordinary problems with his or her ability to control and/or appropriately express anger;

(I) Significant problems with the abuse of alcohol and controlled substances;

(J) Oppositional behavior which contributes to placement disruptions and the inability to function productively with peers, parent figures, birth family, etc.;

(K) Any of the above behaviors, coupled with medical problems; or

(L) Any of the above behaviors displayed by one (1) or more youth within a sibling group, qualifying the entire sibling group for placement together, if appropriate. However, not all of the youth within the sibling group would be eligible for the Level A maintenance rate.

(7) Presenting Problems Displayed By the Youth with Elevated Needs—Level B. Level B children have a documented history of presenting behaviors or diagnoses which render the child unable to effectively function outside of a highly structured setting. Examples of behaviors or diagnoses which the Children’s Division may consider include, but are not limited to:

(A) History of suicide or currently having suicidal thoughts, statements, and/or gestures;

(B) Affective disorders;

(C) Attention Deficit Disorder;

(D) Post-Traumatic Stress Disorder;

(E) Eating disorders;

(F) Panic disorders;

(G) Fears/phobias;

(H) Obsessive/Compulsive Disorders;

(I) Oppositional Defiant Disorders;

(J) Depression/withdrawal;

(K) Dissociative behaviors, black out, pass out, seizure;

(L) Anger/rage;

(M) History of fire setting;

(N) Destruction of property;

(O) Failure to form emotional attachments;

and

(P) Multiple short-term placements.

(8) Youth Who May Not be Appropriate for Level A. Youth who may not be appropriate for Level A may include, but are not limited to, the following:

(A) Children who may function successfully in a traditional foster home or adoptive or guardianship placement;

(B) Youth who qualify for a higher level of care and meet the criteria for Youth with Elevated Needs Level B;

(C) Children under the age of three (3) who cannot be treated effectively through the behavior modification treatment model;



(D) Youth who exhibit severe psychiatric behavior, as diagnosed by a psychiatrist/psychologist, such as an obvious lack of emotional contact, affect disturbances, and/or severe thought distortions;

(E) Youth with a recent history of extreme or dangerous physical aggression;

(F) Youth with a recent history of fire setting;

(G) Youth who have recently attempted suicide and continue to have suicidal ideations;

(H) Youth with an IQ score below sixty-five (65);

(I) Youth who are medically diagnosed as chemically dependent;

(J) Youth with severe medical or physical handicaps which present barriers that the child cannot or will not overcome;

(K) Youth whose primary presenting problem, as diagnosed by a psychiatrist/psychologist, is sexual addiction and who need extremely structured treatment and unusually close supervision; or

(L) Youth with personality disorders, as diagnosed by a psychiatrist/psychologist, who have severe problems forming attachments with caretakers and significant others.

(9) Youth Who May Not be Appropriate for Level B. Youth who may not be appropriate for Level B may include, but are not limited to, the following:

(A) Children who may function successfully in a traditional foster home or adoptive or guardianship placement;

(B) Youth who qualify for a lower level of care and meet the criteria for Youth with Elevated Needs Level A;

(C) Actively suicidal;

(D) Homicidal;

(E) Compulsive fire setter;

(F) Sexual abuse offender which might endanger other family members;

(G) Require around-the-clock awake supervision;

(H) Unable to function in school, and alternative program (day treatment) is not available; and

(I) Youth who have demonstrated behaviors that pose a significant risk of harm to the youth or others which require professional treatment in a hospital or institutional or structured residential care setting.

(10) Working with Youth with Developmental Delays. Youth with developmental delays may, or may not, be appropriate for Level B Foster Care. Appropriateness for Level B Foster Care should be based on the selection/screening team and/or the family support team (FST) evaluation of all the circumstances surrounding that particular youth.

Youth should not be ruled out for Level B based solely on the singular characteristic of an IQ score falling below sixty-five (65). Instead, the team should consider a variety of information including, but not limited to, the following:

(A) Youth's functioning level;

(B) Severity of developmental delays;

(C) Ability for self-care;

(D) Type of behavior problems;

(E) Level of physical aggressions;

(F) Age;

(G) Compliance; and

(H) Need for supervision.

(11) Level A Resource Provider Training Requirements. In order to qualify as a Level A resource provider, the resource provider shall complete all required hours of pre-service training in addition to successful completion of eighteen (18) hours of specialized training workshops from the following topics:

(A) Team and relationship building;

(B) Communication skills;

(C) Behavior management techniques;

(D) Discipline and punishment procedure;

(E) Management of behavior crisis situations;

(F) Development of an individual treatment plan;

(G) De-escalation skills;

(H) Negotiation;

(I) Positive reinforcement technique; or

(J) Professional skills for foster parents.

(12) Level B Resource Training Requirements. In order to qualify as a Level B resource provider, the resource provider shall complete all required hours of pre-service training, complete eighteen (18) hours of Level A specialized training, and participate in the following nine (9) hours of specialized training and practicum designed specifically for Level B resource providers:

(A) Crisis Intervention—Two (2) hours;

(B) Behavior Management—Two (2) hours;

(C) Suicide Management—Two (2) hours;

(D) Medication Management—Two (2) hours; and

(E) Family Orientation—One (1) hour (training shall include how the severely emotionally disturbed or behavior disordered child may impact the resource provider's family).

(13) Reviews. The Children's Division will conduct reviews to ensure that progress is being made toward permanency throughout the Level A or Level B placement. The division shall conduct reviews as often as the division determines is necessary to assess the needs of the child. However, the division

shall convene the selection/screening team to assess the child's placement at least every one hundred eighty (180) days. Children covered by an adoption subsidy or guardianship subsidy agreement will be reviewed at least every two (2) years. The division will seek a less restrictive setting once the youth's presenting problems have been replaced with appropriate coping behaviors. The decision to terminate the child's placement in a Level A or B setting shall be made solely by the Children's Division. In making the decision, the division shall consult with and consider the recommendation of the FST.

*AUTHORITY: section 453.073, RSMo Supp. 2009, sections 207.020, 210.506, and 453.074, RSMo 2000, and Young v. Children's Division, State of Missouri Department of Social Services, 284 S.W.3d 553 (Mo. 2009). \* Original rule filed Feb. 23, 2010, effective Oct. 30, 2010.*

*\*Original authority: 207.020, RSMo 1945, amended 1961, 1965, 1977, 1981, 1982, 1986, 1993; 210.506, RSMo 1982, amended 1993, 1995; 453.073, RSMo 1973, amended 1978, 1981, 1982, 1985, 1997, 2001, 2005, 2008; and 453.074, RSMo 1985.*