

1 (b) of this section. In particular, the Comptroller
2 General shall evaluate the extent to which children
3 in foster care who also are subject to the juvenile
4 justice system of the State are placed in a facility
5 under the jurisdiction of the juvenile justice system
6 and whether the lack of available congregate care
7 placements under the jurisdiction of the child wel-
8 fare systems is a contributing factor to that result.
9 Not later than December 31, 2023, the Comptroller
10 General shall submit to Congress a report on the re-
11 sults of the evaluation.

12 **SEC. 202. ASSESSMENT AND DOCUMENTATION OF THE**
13 **NEED FOR PLACEMENT IN A QUALIFIED RES-**
14 **IDENTIAL TREATMENT PROGRAM.**

15 Section 475A of the Social Security Act (42 U.S.C.
16 675a) is amended by adding at the end the following:

17 “(c) ASSESSMENT, DOCUMENTATION, AND JUDICIAL
18 DETERMINATION REQUIREMENTS FOR PLACEMENT IN A
19 QUALIFIED RESIDENTIAL TREATMENT PROGRAM.—In
20 the case of any child who is placed in a qualified residen-
21 tial treatment program (as defined in section 472(k)(4)),
22 the following requirements shall apply for purposes of ap-
23 proving the case plan for the child and the case system
24 review procedure for the child:

1 “(1)(A) Within 30 days of the start of each
2 placement in such a setting, a qualified individual
3 (as defined in subparagraph (D)) shall—

4 “(i) assess the strengths and needs of the
5 child using an age-appropriate, evidence-based,
6 validated, functional assessment tool approved
7 by the Secretary;

8 “(ii) determine whether the needs of the
9 child can be met with family members or
10 through placement in a foster family home or,
11 if not, which setting from among the settings
12 specified in section 472(k)(2) would provide the
13 most effective and appropriate level of care for
14 the child in the least restrictive environment
15 and be consistent with the short- and long-term
16 goals for the child, as specified in the perma-
17 nency plan for the child; and

18 “(iii) develop a list of child-specific short-
19 and long-term mental and behavioral health
20 goals.

21 “(B)(i) The State shall assemble a family and
22 permanency team for the child in accordance with
23 the requirements of clauses (ii) and (iii). The quali-
24 fied individual conducting the assessment required
25 under subparagraph (A) shall work in conjunction

1 with the family of, and permanency team for, the
2 child while conducting and making the assessment.

3 “(ii) The family and permanency team shall
4 consist of all appropriate biological family members,
5 relative, and fictive kin of the child, as well as, as
6 appropriate, professionals who are a resource to the
7 family of the child, such as teachers, medical or
8 mental health providers who have treated the child,
9 or clergy. In the case of a child who has attained
10 age 14, the family and permanency team shall in-
11 clude the members of the permanency planning team
12 for the child that are selected by the child in accord-
13 ance with section 475(5)(C)(iv).

14 “(iii) The State shall document in the child’s
15 case plan—

16 “(I) the reasonable and good faith effort of
17 the State to identify and include all such indi-
18 viduals on the family of, and permanency team
19 for, the child;

20 “(II) all contact information for members
21 of the family and permanency team, as well as
22 contact information for other family members
23 and fictive kin who are not part of the family
24 and permanency team;

1 “(III) evidence that meetings of the family
2 and permanency team, including meetings relat-
3 ing to the assessment required under subpara-
4 graph (A), are held at a time and place conven-
5 ient for family;

6 “(IV) if reunification is the goal, evidence
7 demonstrating that the parent from whom the
8 child was removed provided input on the mem-
9 bers of the family and permanency team;

10 “(V) evidence that the assessment required
11 under subparagraph (A) is determined in con-
12 junction with the family and permanency team;
13 and

14 “(VI) the placement preferences of the
15 family and permanency team relative to the as-
16 sessment and, if the placement preferences of
17 the family and permanency team and child are
18 not the placement setting recommended by the
19 qualified individual conducting the assessment
20 under subparagraph (A), the reasons why the
21 preferences of the team and of the child were
22 not recommended.

23 “(C) In the case of a child who the qualified in-
24 dividual conducting the assessment under subpara-
25 graph (A) determines should not be placed in a fos-

1 ter family home, the qualified individual shall specify
2 in writing the reasons why the needs of the child
3 cannot be met by the family of the child or in a fos-
4 ter family home. A shortage or lack of foster family
5 homes shall not be an acceptable reason for deter-
6 mining that a needs of the child cannot be met in
7 a foster family home. The qualified individual also
8 shall specify in writing why the recommended place-
9 ment in a qualified residential treatment program is
10 the setting that will provide the child with the most
11 effective and appropriate level of care in the least re-
12 strictive environment and how that placement is con-
13 sistent with the short- and long-term goals for the
14 child, as specified in the permanency plan for the
15 child.

16 “(D)(i) Subject to clause (ii), in this subsection,
17 the term ‘qualified individual’ means a trained pro-
18 fessional or licensed clinician who is not an employee
19 of the State agency and who is not connected to, or
20 affiliated with, any placement setting in which chil-
21 dren are placed by the State.

22 “(ii) The Secretary may approve a request of a
23 State to waive any requirement in clause (i) upon a
24 submission by the State, in accordance with criteria
25 established by the Secretary, that certifies that the

1 trained professionals or licensed clinicians with re-
2 sponsibility for performing the assessments de-
3 scribed in subparagraph (A) shall maintain objec-
4 tivity with respect to determining the most effective
5 and appropriate placement for a child.

6 “(2) Within 60 days of the start of each place-
7 ment in a qualified residential treatment program, a
8 family or juvenile court or another court (including
9 a tribal court) of competent jurisdiction, or an ad-
10 ministrative body appointed or approved by the
11 court, independently, shall—

12 “(A) consider the assessment, determina-
13 tion, and documentation made by the qualified
14 individual conducting the assessment under
15 paragraph (1);

16 “(B) determine whether the needs of the
17 child can be met through placement in a foster
18 family home or, if not, whether placement of
19 the child in a qualified residential treatment
20 program provides the most effective and appro-
21 priate level of care for the child in the least re-
22 strictive environment and whether that place-
23 ment is consistent with the short- and long-
24 term goals for the child, as specified in the per-
25 manency plan for the child; and

1 “(C) approve or disapprove the placement.

2 “(3) The written documentation made under
3 paragraph (1)(C) and documentation of the deter-
4 mination and approval or disapproval of the place-
5 ment in a qualified residential treatment program by
6 a court or administrative body under paragraph (2)
7 shall be included in and made part of the case plan
8 for the child.

9 “(4) As long as a child remains placed in a
10 qualified residential treatment program, the State
11 agency shall submit evidence at each status review
12 and each permanency hearing held with respect to
13 the child—

14 “(A) demonstrating that ongoing assess-
15 ment of the strengths and needs of the child
16 continues to support the determination that the
17 needs of the child cannot be met through place-
18 ment in a foster family home, that the place-
19 ment in a qualified residential treatment pro-
20 gram provides the most effective and appro-
21 priate level of care for the child in the least re-
22 strictive environment, and that the placement is
23 consistent with the short- and long-term goals
24 for the child, as specified in the permanency
25 plan for the child;

1 “(B) documenting the specific treatment or
2 service needs that will be met for the child in
3 the placement and the length of time the child
4 is expected to need the treatment or services;
5 and

6 “(C) documenting the efforts made by the
7 State agency to prepare the child to return
8 home or to be placed with a fit and willing rel-
9 ative, a legal guardian, or an adoptive parent,
10 or in a foster family home.

11 “(5) In the case of any child who is placed in
12 a qualified residential treatment program for more
13 than 12 consecutive months or 18 nonconsecutive
14 months (or, in the case of a child who has not at-
15 tained age 13, for more than 6 consecutive or non-
16 consecutive months), the State agency shall submit
17 to the Secretary—

18 “(A) the most recent versions of the evi-
19 dence and documentation specified in paragraph
20 (4); and

21 “(B) the signed approval of the head of
22 the State agency for the continued placement of
23 the child in that setting.”.