



ND Levels of Foster Care: NDCC 50-06-06.14. Requires the human service zones to explore the option of kinship care if a child is unable to return home due to safety concerns. Absent kinship options, the human service zones shall provide permanency options that are least restrictive and near the family's home. A child in foster care can enter and exit any level of care noted below dependent on their eligibility and needs. Note: Psychiatric Residential Treatment

Facilities (PRTF), substance use disorder (SUD) treatment, acute hospitalizations stays, and detention are not foster care placements.

Length of Stay	Care details	Presenting Child Need	Child Age	Parameter	
7 days	Served by outpatient community resources (therapy, med management, etc.) Public School In-home supports	Need  • Behavior is typical for age and can be easily redirected  • Acting out in response to traumatic stress, but episodes are brief and/or temporary.	0 to 18 Licensed Family	(certified Program or Licensed Family)  Present danger exists and a child is in need of temporary safe care, referred by:  CPS with Zone  In-Home with Zone  Foster care with a Zone	Prevention Shelter Care
Undetermined	Served by outpatient community resources (therapy, med management, etc.)     Public School     In-home supports     Respite	Need  • Behavior is typical for age and can be easily redirected  • Medically fragile infants (drug exposed newborns)  • May present occasional grief, loss, anger, depression, anxiety, defiance, substance use, intentional misbehavior, running away or school difficulties.  • Acting out in response to traumatic stress, but episodes are brief and/or temporary.	0 to 21	Unlicensed relative providing care to children.  ✓ Relative care that never enter foster care  ✓ In foster care under the custody of a Zone, Division of Juvenile Services, or a Tribal Nation	Prevention Placements are Relative Care
Federal = less than 12 months	<ul> <li>Served by outpatient community resources (therapy, med management, etc.)</li> <li>Public School</li> <li>In-home supports</li> <li>Respite</li> </ul>	Need  Behavior is typical for age and can be easily redirected  Medically fragile infants (drug exposed newborns)  May present occasional grief, loss, anger, depression, anxiety, defiance, substance use, intentional misbehavior, running away or school difficulties.  Acting out in response to traumatic stress, but episodes are brief and/or temporary.  Specialized family settings, HOST Homes work with victims of sex trafficking.	0 to 21	Licensed foster home providing care to children.  In foster care under the custody of a Zone, Division of Juvenile Services, or a Tribal Nation.  In 18+ Continued Care (ages 18 to 21) under placement and care of a Zone or Tribal Nation.	Family Foster Care
9 months	<ul> <li>Served by outpatient community resources (therapy, med, etc.)</li> <li>Eligibility is reviewed every 90 days</li> <li>Public School</li> <li>Additional in-home supports</li> <li>Additional case management</li> <li>Ongoing Respite</li> </ul>	Treatment Need  • Behavior is typical for age but requires additional services, supports, planning and provider training to meet the child's needs.  • Occasional behavioral health needs, which may present a danger to self or others.  • Currently presenting episodes of emotional or impulsive aggression, traumatic stress, anxiety, defiance, impulsivity, hyperactivity, running away, intentional misbehavior, sexualized behavior, self-harm not requiring emergency medical intervention, sleep disturbance, or substance use.	6 to 21	(Nexus-PATH)  Licensed foster home providing least restrictive treatment to children.  In foster care under the custody of a Zone, Division of Juvenile Services, or a Tribal Nation.  Pre-approved for the BHD Voluntary Treatment Program.	Foster Care Placements Treatment Foster Care
3 to 6 months	<ul> <li>Formal assessment completed by 3<sup>rd</sup> party, approving/denying placement.</li> <li>Eligibility is reviewed every 90 days.</li> <li>Trauma informed treatment offered by a clinical team.</li> <li>6 months aftercare support.</li> </ul>	Residential Treatment Need  Behavior requires additional services, supports, planning and specialized clinical training provided by rotating staff to meet the child's needs.  Frequent behavioral health needs which may present a danger to self or others.  Frequent emotional or impulsive aggression  Currently presenting episodes of traumatic stress, psychosis, anxiety, defiance, impulsivity, hyperactivity, running away, intentional misbehavior, self-harm not requiring emergency medical intervention, substance use and/or sexual aggression  Not acutely suicidal or homicidal.	10 to 19	Licensed foster care facility providing 24-hour treatment for children.  In foster care under the custody of a Zone, Division of Juvenile Services, or a Tribal Nation.  Pre-approved for the BHD Voluntary Treatment Program.	Qualified Residential Treatment
Unlimited for ages 16 to 21	Served by outpatient community services (therapy, med management, etc.)     Additional case management Supportive services to transition to adulthood	Need  • Aged out of North Dakota foster care  • Behavior may be typical for age and can be redirected  • Experienced or currently experiencing behavioral health needs including substance use.  • Acting out in response to life stressors, but episodes are brief/ temporary and easily redirected.  Currently working or in school.	18 to 21	Licensed setting managed by an agency providing care to:  18+ Continued Care youth under placement and care of a Zone or Tribal Nations.	18+ Supervised Independent



## Children and Family Services Non-Foster Care Placements

regulations. These non-foster care placements include but are not limited to those noted on the chart below. placements below may be utilized by foster children, but are considered non-foster care placements, as they are not licensed or reimbursable based on federal foster care Non-Foster Care Placements: Children in foster care may be placed at various levels of care depending on the child's presenting symptoms and behaviors. These

		Licensure/ Oversight	Providers (not all inclusive)	Payment Source
	Shelter Care (not certified)	• No HHS oversight	<ul> <li>Youthworks-Bismarck</li> <li>Youthworks-Fargo</li> </ul>	Local City/ County Federal Runaway
	Attendant Care	<ul> <li>No HHS oversight</li> </ul>	Youthworks- Bismarck     Youthworks- Fargo     Northwest Youth     Assessment Center     Grand Forks County     Youthworks- Minot     Youthworks-     Bismarck     Youthworks- Fargo	Local County Funds Federal JJ Funds
	Detention	<ul><li>No HHS oversight</li><li>Local County;</li><li>Tribal Nations; or</li><li>State DOCR</li></ul>	Grand Forks Juvenile Detention Youth Correctional Center Ward County Juvenile Detention West Central Regional Juvenile Center	Local County Funds
Non- Foster C	Job Corp	<ul> <li>No HHS oversight</li> <li>Administered by the US</li> <li>Department of Labor</li> </ul>	<ul> <li>Quentin Burdick Job Corp</li> </ul>	Federal Funds
Non- Foster Care Placements	Adolescent Residential Addiction Treatment Facility	<ul> <li>Licensed by the Behavioral Health Division Policy Team</li> </ul>	• Eckert Youth Home	SUD Voucher Medicaid Private Insurance Federal Funds
	Developmental Disability Group Homes	<ul> <li>Licensed by the Developmental Disabilities Section</li> </ul>	<ul> <li>REM</li> <li>Anne Carlsen</li> <li>HIT inc.</li> <li>Life Skills and Transition Center</li> </ul>	Medicaid DD Waiver
	Hospital	Must have certification, but HHS also licenses hospitals as primary care or general acute	<ul> <li>Sanford</li> <li>Trinity Hospital</li> <li>Essentia</li> <li>Altru</li> <li>Prairie St. Johns</li> <li>CHI St. Alexius</li> <li>ND Hospitals</li> </ul>	Medicaid Private Insurance
	Psychiatric Residential Treatment Facility (PRTF)	<ul> <li>Licensed by the Behavioral Health Division Policy Team</li> </ul>	<ul> <li>Dakota Boys and Girls Ranch (Bismarck, Fargo and Minot)</li> <li>Luther Hall- Fargo</li> <li>Pride Manchester</li> <li>Ruth Meiers Adolescent Center</li> </ul>	Medicaid Private Insurance