

2005 HOUSE HUMAN SERVICES

HB 1110

#### 2005 HOUSE STANDING COMMITTEE MINUTES

#### **BILL/RESOLUTION NO. HB 1110**

House Human Services Committee

☐ Conference Committee

Hearing Date: 01/05/05

Blank

Tape Number

Side A

Side B

Meter#

Committee Clerk Signature

Minutes for HB 1110

Attendance: 12 members present 0 absent

Chairman Price: We will open the hearing on HB 1110.

**Don Snyder**, Administrator of the Foster Care Program, Dept. of Human Services. testifying in favor of HB 1110. (see attached)

Representative Porter: What is your current occupancy rates at this time?

**D. Snyder:** I am not sure, maybe 15-20 beds open state wide.

**Representative Porter:** Could you provide the committee with those figures, and how much is being paid for out of state placements.

**D. Snyder:** Currently 58 children out of state, each area has different rates that may range from \$160.00-\$180.00 per day.

Representative Porter: Is there an average cost for out of state?

Chairman Price: Out of the 58 children, how many can ND handle?

Page 2 House Human Services Committee Bill/Resolution Number HB 1110 Hearing Date January 10, 2005

Б

**D. Snyder:** 23% of out of state are in specialized sex offender programs.

Chairman Price: What will it take to meet the needs, with 23% being offenders out of 58.

Why are there empty beds?

**D. Snyder:** We have a level of step down care.

Chairman Price: Who makes custodial decisions?

**D. Snyder:** Custodians.

**Representative Kaldor:** Has there been a needs assessment that shows findings that there is adequate needs and do you have those figures.

D. Snyder: Yes

**Representative Nelson:** How is it now handled?

**D.Snyder:** Beds are used for temporary placement. Cass County has 54. Beds are used to supplement placement..

**Representative Nelson:** Out of the facilities with requests, how many are at capacity?

**Representative Kreidt:** At this point, have any reached capacity and has anyone been turned away?

D. Snyder: I don't think so.

**Chairman Price:** Mr. Snyder, if you have beds in Sentinel Butte and a child in Fargo, where does the child go?

**D. Snyder:** Sometimes a facility will have additional area's available unless it is at capacity, then they go the closet, most applicable for the safety of the child.

**Representative Porter:** Are you able to negotiate cost's with an out of state facility? Do we just pay what they ask?

**D. Snyder:** Most are at about the same rate.

**Representative Weisz:** Who makes that determinations and why are we sending children out of state anyway?

**D. Snyder:** Determination is always for the needs of the child, relocation, Federal requirements, close proximity and basic needs.

**Representative Weisz:** Do we need a shift in where there are beds and is it balanced?

**D. Snyder:** Basically it is where there is the greatest need.

Chairman Price: Is there any other testimony in favor or in opposition? If not, the hearing is closed.

Chairman Price: We will open discussion on HB 1110.

**Representative Kaldor:** In regards to placing children out of state, what are the charges for children that are transferred into our state?

**Chairman Price:** We do not have that information. I have questions concerning the contents of this bill. Is anyone interested in doing some research to assist us with this bill?

**Representative Porter:** I will do some research. I have questions also, if we pay more for out of state placements and we don't seem to have adequate facilities for sex offenders. Is there more need in Fargo? At this time there doesn't seem to be enough information.

Chairman Price: Thank you, Representative Porter, I ask that Representative Damschen work with you.

Representative Damschen: I will be glad to work with Representative Porter.

Page 4
House Human Services Committee
Bill/Resolution Number HB 1110
Hearing Date January 10, 2005

Representative Devlin: In regards to new members on our committee, I am sure they would appreciate that whenever possible, in written or verbal testimony, not to use acronyms.

Chairman Price: Is there any further discussion on HB 1110? If none, the discussion is closed on HB 1110.

## 2005 HOUSE STANDING COMMITTEE MINUTES

#### **BILL/RESOLUTION NO. HB 1110**

House Human Services Committee

☐ Conference Committee

Hearing Date: January 19,2005

Tape Number

Side A

Side B

Meter#

2

X

2329-3655

Committee Clerk Signature

Minutes:

Chairman Price reopened hearing on HB 1110.

**Rep. Porter:** Regarding renewal, the number of children placed in an out of state facility, 58 out of state placements. Out of the 58, 23 are listed as sexual offenders.

Chairman Price: When family has moved, it there a time frame?

**Rep. Porter**: That was not discussed.

Chairman Price: Are there anymore questions?

Rep. Porter: Motion to Do Pass.

Rep. Peitsch: second

**Rep. Weisz**: It says the average costs in Minn. and SD is \$125-\$130 a day, does that include education expenses?

**Rep. Porter**: No, does not include those costs.

**Rep. Porter**: There are new treatments, I would like to see a new bid come back to match out of state placements.

Rep. Devlin: This is basically already part of the permanent record, am I right?

Rep. Porter: Yes, it is part of the bill.

Chairman Price called for voice vote on amendments. Response was unanimous.

Rep. Porter: Motion to Do Pass as amended,

Rep. Damschen. second

Vote: 10-0-2 Carrier: Rep. Devlin

Chairman Price: Education also?

B. Weisz: Yes.

Rep. Weisz: It will just be a wash?

B. Weisz: Yes.

Rep. Devlin moved to reconsider the amendment,

Rep. Nelson second

**Rep. Devlin** moved to accept the amendment.

Rep. Weisz second

Voice vote: 12-0-0.

Rep. Nelson moved Do Pass as Amended,

Rep. Porter second

Vote: 12-0-0. Carrier: Rep. Devlin.

## 2005 HOUSE STANDING COMMITTEE MINUTES

#### BILL/RESOLUTION NO. HB 1110

TT	TT	α .	~ '	
House	Human	Services	Committe	е

1

☐ Conference Committee

Hearing Date Feb 1, 2005

Tape Number

Side A

Side B

Meter #

Х

03-1400

Committee Clerk Signature

Minutes:

House Bill # 1110 brought back because of a oversight when amending the bill.

**Rep. Devlin:** This bill sent to the floor, and brought it back because the moratorium was supposed to include residential child care facilities and group home. That is two different sections of the law, one was covered and one wasn't.

Chairman Price: After the amendment, it shows a Fiscal Note.

Christa Andrews, Attorney with the Dept. of Human Services.

Rep. Devlin had a question regarding an amendment to HB 1110, it was oversight, they meant to amend the sub section on the moratorium on the residential child care facilities as well. We thought we could just add in the language, but further checking, found there was a separate section in the ND Century Code that dealt with the moratorium on residential child care facilities and group home beds. We couldn't add language, we needed to change Sec. 50-11. It will be the

same thing, the moratorium will continue for the residential treatment centers, child care facilities and group home beds.

Chairman Price: By doing this, does this mirror the bill of 2 years ago, except for the date changes?

C. Andrews: Yes, that is correct. If I can clarify one more thing, we did get a call from LC, as the effective date was June 30th. John Walsh suggested this continue it through July 31, for legislative purposes, we don't have to have a emergency clause every time it continues.

Chairman Price: The moratorium will have two different dates?

C. Andrews: Yes

Rep Weisz: Could Rep. Porter refresh us concerning the amendment?

Rep. Porter: Regarding section two, sub committee wanted less restrictive care options, in state placement if possible. We wanted to push the RFP to see if anyone was interested in building a facility for sex offenders. We had 20 some identified in the state. When we asked for the amendment, I was unaware that there was going to have a fiscal note attached to it. I was under the impression that if they would move them back into the state, that there would be no fiscal effect and they would save money due to the education component that went with it.

Chairman Price: Read the amendment and explanation with Fiscal Note.

Brenda Weisz: With regards to the proposed amendment, we were asked what effect would it have revenue/expenditures. Final line, appropriations/budget. In doing the RFP, bringing them back into the state, with sexual offending behaviors, to do that, there would be a cost for the kids, We estimated what we are currently paying for them out of state, compared if it would be effecting our appropriations, and we would not be paying out of state anymore, it would just be

Page 3

House Human Services Committee Bill/Resolution Number HB 1110

Hearing Date Feb. 1, 2005

the cost in state. After researching, this now seems to be budget neutral. Bottom line there is no

effect, as we were identifying what costs are already there. We do feel that this is to be a zero

balance.

Rep. Weisz: Doesn't reflect balance costs basically should zero each out.

Chairman Price: The first sentence should actually reduce it some.

Rep. Weisz: On the Federal portion. does the revenue currently go to the out of state provider, it

doesn't go through the dept.?

B. Weisz: It is revenue that comes from the Fed. Govt. This fiscal note will come back zero. also

including the counties.

Chairman Price: Education also?

B. Weisz: Yes.

**Rep. Weisz:** It will just be a wash, basically?

B. Weisz: Yes.

**Rep. Devlin:** moved to reconsider the amendment.

Rep. Nelson: Second

**Rep. Devlin:** Moved to accept the amendment.

Rep. Weisz: Second

Voice Vote: 12-0-0.

**Rep. Nelson:** Do Pass as Amended.

Rep. Porter: Second

Vote: 12-0-0. Carrier: Rep. Devlin.

## **FISCAL NOTE**

## Requested by Legislative Council 02/10/2005

Amendment to:

Engrossed HB 1110

1A. State fiscal effect: Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.

ŭ	2003-200	5 Biennium	2005-200	7 Biennium	2007-2009 Biennium		
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds	
Revenues	\$	50 \$	0 5	\$0 \$0	\$0	\$0	
Expenditures	\$	so \$	0 5	\$0 \$0	\$0	\$0	
Appropriations	\$	so \$	0 5	\$0 \$0	\$0	\$0	

1B. County, city, and school district fiscal effect: Identify the fiscal effect on the appropriate political subdivision.

2003-2005 Biennium			2005-2007 Biennium			2007-2009 Biennium		
Counties	Cities	School Districts	Counties	Cities	School Districts	Counties	Cities	School Districts
\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

2. Narrative: Identify the aspects of the measure which cause fiscal impact and include any comments relevant to your analysis.

This bill extends the moratorium on RTC beds. As amended this bill also requires the department to explore the option of kinship care when a child is unable to return home and permanency options that are in the least restrictive care and near the childs home as required by the Adoption and Safe Family Act of 1997. This bill would also require the department of Human Services to issue a request for proposal for the provision of treatment services to meet the needs of youth with a history of sexual offenses that are currently being served by out of state facilities. The intent of the request for proposal is to enable North Dakota to provide the needed services in state. There is no fiscal impact since the Department is already incurring costs to treat these individuals.

As amended this bill extends the moratorium on bed capacity for residential child care facilities and group homes through July of 2007.

- 3. State fiscal effect detail: For information shown under state fiscal effect in 1A, please:
  - A. **Revenues:** Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.
  - B. **Expenditures:** Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.
  - C. **Appropriations:** Explain the appropriation amounts. Provide detail, when appropriate, of the effect on the biennial appropriation for each agency and fund affected and any amounts included in the executive budget. Indicate the relationship between the amounts shown for expenditures and appropriations.

Name:	Brenda M. Weisz	Agency:	DHS
	328-2397		

Phone Number:

**Date Prepared:** 02/11/2005

## **FISCAL NOTE**

## Requested by Legislative Council 02/01/2005

#### **REVISION**

Amendment to:

HB 1110

1A. State fiscal effect: Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.

fullding levels and t	2003-2005 Biennium			2005-2007 Biennium			2007-2009 Biennium		
	General Fund	Othe	r Funds	General Fund	01	her Funds	General Fund	Other Funds	
Revenues	\$	0	\$0	\$	0	\$0	\$0	\$0	
Expenditures	\$	0	\$0	\$	O	\$0	\$0	\$0	
Appropriations	\$	0	\$0	\$	0	\$0	\$0	\$0	

1B. County, city, and school district fiscal effect: Identify the fiscal effect on the appropriate political subdivision. 2007-2009 Biennium 2005-2007 Biennium 2003-2005 Biennium School School School **Districts** Counties Cities **Districts** Cities **Districts** Counties Cities Counties \$0

2. Narrative: Identify the aspects of the measure which cause fiscal impact and include any comments relevant to your analysis.

This bill extends the moratorium on RTC beds. As amended this bill also requires the department to explore the option of kinship care when a child is unable to return home and permanency options that are in the least restrictive care and near the childs home as required by the Adoption and Safe Family Act of 1997. This bill would also require the department of Human Services to issue a request for proposal for the provision of treatment services to meet the needs of youth with a history of sexual offenses that are currently being served by out of state facilities. The intent of the request for proposal is to enable North Dakota to provide the needed services in state. There is no fiscal impact since the Department is already incurring costs to treat these individuals.

- 3. State fiscal effect detail: For information shown under state fiscal effect in 1A, please:
  - A. Revenues: Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.
  - B. Expenditures: Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.
  - C. Appropriations: Explain the appropriation amounts. Provide detail, when appropriate, of the effect on the biennial appropriation for each agency and fund affected and any amounts included in the executive budget. Indicate the relationship between the amounts shown for expenditures and appropriations.

Name:

Phone Number:

Brenda M. Weisz

328-2397

Agency:

DHS

Date Prepared:

02/01/2005

## **FISCAL NOTE**

## Requested by Legislative Council 01/25/2005

Amendment to:

HB 1110

1A. State fiscal effect: Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.

•	2003-2005 Biennium			2005-2007	Biennium	2007-2009 Biennium		
	General Fund	Other F	unds	General Fund	Other Funds	General Fund	Other Funds	
Revenues	\$	0	\$0	\$0	\$3,443,199	\$0	\$3,564,720	
Expenditures	\$	0	\$0	\$573,609	\$3,443,199	\$614,364	\$3,564,720	
Appropriations	\$	0	\$0	\$0	\$0	\$0	\$0	

1B. County, city, and school district fiscal effect: Identify the fiscal effect on the appropriate political subdivision.

2003-2005 Biennium				5-2007 Bienn	ium	2007-2009 Biennium			
Counties	Cities	School Districts	Counties	Cities	School Districts	Counties	Cities	School Districts	
so	l	\$0	\$798,078	\$0	\$0	\$835,056	\$0	\$0	

2. Narrative: Identify the aspects of the measure which cause fiscal impact and include any comments relevant to your analysis.

This bill extends the moratorium on RTC beds. As amended this bill also requires the department to explore the option of kinship care when a child is unable to return home and permanency options that are in the least restrictive care and near the childs home as required by the Adoption and Safe Family Act of 1997. This bill would also require the department of Human Services to issue a request for proposal for the provision of treatment services to meet the needs of youth with a history of sexual offenses that are currently being served by out of state facilities. The intent of the request for proposal is to enable North Dakota to provide the needed services in state. The expenditures relate to the potential cost to provide such treatment.

These expenditures are included in the department's regular appropriation.

- 3. State fiscal effect detail: For information shown under state fiscal effect in 1A, please:
  - A. Revenues: Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.

Other fund revenues would include federal funds (a combination of Foster Care IV-E funds and TANF funds) in 2005-2007 of \$2,645,121 and \$2,729,664 in 2007-2009. A portion of the revenue will include county funds as the counties are also responsible for match on foster care expenditures. The amount due from the counties for the 2005-2007 biennium is \$798,078 and \$835,056 in 2007-2009.

B. **Expenditures:** Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.

The expenditures amounts listed above includes the cost of twenty-four children receiving treatment services at an out of state facility for the 2005-2007 biennium at an average daily rate of \$230 and for the 2007-2009 biennium at an average daily rate of \$239.

The cost reflected for the counties is their share of the foster care grants.

C. **Appropriations:** Explain the appropriation amounts. Provide detail, when appropriate, of the effect on the biennial appropriation for each agency and fund affected and any amounts included in the executive

budget. Indicate the relationship between the amounts shown for expenditures and appropriations.

The appropriation for these twenty-four children is already included in the Department of Human Services regular appropriation. At this time it is anticipated that the cost of treating these children in-state rather than out-of-state would be cost neutral as we are unable to determine if a provider would be available and what rate we would need to pay to provide the service.

Name:

Phone Number:

Brenda M. Weisz

328-2397

Agency:

DHS

Date Prepared:

01/27/2005

## **FISCAL NOTE**

## Requested by Legislative Council 12/22/2004

Bill/Resolution No.:

HB 1110

1A. State fiscal effect: Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.

Ŭ	2003-200	5 Biennium	2005-200	7 Biennium	2007-2009 Biennium		
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds	
Revenues	\$	so \$6	\$	0 \$0	\$0	\$0	
Expenditures	\$	so \$0	\$	0 \$0	\$0	\$0	
Appropriations	\$	50 \$0	) \$	0 \$0	\$0	\$0	

1B. County, city, and school district fiscal effect: Identify the fiscal effect on the appropriate political subdivision.

2003-2005 Biennium			2005	5-2007 Bienn	ium	2007-2009 Biennium			
Counties	Cities	School Districts	Counties	Cities	School Districts	Counties	Cities	School Districts	
\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	

2. Narrative: Identify the aspects of the measure which cause fiscal impact and include any comments relevant to your analysis.

This bill extends the moratorium on RTC beds. No Fiscal Impact as the beds were not filled beyond the level set by the moratorium.

- 3. State fiscal effect detail: For information shown under state fiscal effect in 1A, please:
  - A. **Revenues:** Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.

No Fiscal Impact.

B. **Expenditures:** Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.

No Fiscal Impact.

C. **Appropriations:** Explain the appropriation amounts. Provide detail, when appropriate, of the effect on the biennial appropriation for each agency and fund affected and any amounts included in the executive budget. Indicate the relationship between the amounts shown for expenditures and appropriations.

No Fiscal Impact.

Name:

Brenda M. Weisz

Agency:

Department of Human Service

Phone Number:

328-2397

Date Prepared:

01/04/2005

## PROPOSED AMENDMENTS TO HOUSE BILL NO. 1110

Page 1, line 3, after the first semi-colon insert "to provide a statement of intent;"

Page 1, after line 12, insert: "SECTION 2. STATEMENT OF INTENT. Safety, permanency and well-being for North Dakota's children are of vital interest to the legislative assembly and the citizens of North Dakota. Therefore, it is the intent of the Fifty-ninth legislative assembly that the department of human services and county social services shall thoroughly explore the option of kinship care when a child is unable to return home due to safety concerns. Absent kinship options, the department and the county social services board shall provide permanency options that are in the least restrictive care and near the family's home as required by the federal mandates of the Adoption and Safe Family Act. In addition, it is the intent of the North Dakota legislative assembly that the department of human services issue an RFP for the provision of residential treatment services during 2005 to meet the needs of youth with a history of sexual offenses within the state and explore options of therapeutic foster care for those youth who would benefit from this service level."

Page 1, line 13, replace "2." with "3."

Page 1, line 14, replace "3." with "4."

Renumber accordingly

Date: ///9/05

Roll Call Vote #: 🖊

# 2005 HOUSE STANDING COMMITTEE ROLL CALL VOTES BILL/RESOLUTION NO. ///

House	<b>Human Services</b>					
Check here for Conference C	Committee					
Legislative Council Amendment	Number					
Action Taken Do Pas	ss Ds Amd					
Motion Made By PORTE	R Seconded By Dams &	ren				
Representatives Chairman C.S.Price V Chrm.G. Kreidt	Yes No Representatives Rep.L. Kaldor Rep.L. Potter	Yes No				
Rep. V. Pietsch Rep.J.O. Nelson	Rep.S. Sandvig	`				
Rep.W.R. Devlin Rep.T. Porter						
Rep.G. Uglem						
Rep C. Damschen	<b>\</b>	:				
Rep.R. Weisz						
Total ( ) 1 2 - 1 D	No O					
Absent 2						
Floor Assignment Rep. 7	evien					

on an amendment, briefly indicate intent:

Module No: HR-14-0875

Carrier: Devlin

Insert LC: 58202.0101 Title: .0200

### REPORT OF STANDING COMMITTEE

HB 1110: Human Services Committee (Rep. Price, Chairman) recommends AMENDMENTS AS FOLLOWS and when so amended, recommends DO PASS (10 YEAS, 0 NAYS, 2 ABSENT AND NOT VOTING). HB 1110 was placed on the Sixth order on the calendar.

Page 1, line 1, after "Act" insert "to create and enact a new section to chapter 50-06 of the North Dakota Century Code, relating to duties of the department of human services with respect to least restrictive care options;"

Page 1, after line 12, insert:

"SECTION 2. A new section to chapter 50-06 of the North Dakota Century Code is created and enacted as follows:

Placement of children - Least restrictive care. The department and county social service boards shall thoroughly explore the option of kinship care when a child is unable to return home due to safety concerns. Absent kinship options, the department and county social service boards shall provide permanency options that are in the least restrictive care and near the family's home as required by the federal Adoption and Safe Family Act of 1997 [Pub. L. 105-89; 111 Stat. 2115; 42 U.S.C. 671]. Before January 1, 2006, the department of human services shall issue a request for proposal for the provision of residential treatment services to meet the needs of youth with a history of sexual offenses within the state and explore options of therapeutic foster care for those youth who would benefit from this service level."

Renumber accordingly

## House Amendments to Engrossed HB 1110 - Human Services Committee 02/03/2005

Page 1, line 3, replace "section" with "sections" and after "25-03.2-03.1" insert "and 50-11-02.3"

Page 1, line 5, after "capacity" insert "and residential child care facility or group home bed capacity"

## House Amendments to Engrossed HB 1110 - Human Services Committee 02/03/2005

Page 2, after line 2, insert:

"SECTION 3. AMENDMENT. Section 50-11-02.3 of the North Dakota Century Code is amended and reenacted as follows:

50-11-02.3. (Effective through Junc 30, 2005 July 31, 2007) Moratorium on expansion of residential child care facility or group home bed capacity. Notwithstanding sections 50-11-02 and 50-11-09, unless a needs assessment conducted by the department indicates a need for the licensing of additional bed capacity, the department may not issue a license under this chapter for any additional bed capacity for a residential child care facility or a group home above the state's gross number of beds licensed as of June 30, 2003."

Renumber accordingly

Date: 2-1-05

Roll Call Vote #: 3- 12-0-0

## 2005 HOUSE STANDING COMMITTEE ROLL CAll BILL/RESOLUTION NO. HB 1110

House	Hu		Comn	iittee		
Check here for	Conference Com	nittee				
Legislative Council						
Action Taken	DoPass	ns a	ind.			
Motion Made By	DoPaso Rep. Nelso	1	Seconded By	Rep Part	en	
Represei	ıtatives	Yes	No Rep	oresentatives	Yes	No
Chairman C.S.Pri	ce	/	Rep.L. <b>K</b>	aldor	/	
V Chrm.G. Kreidt	t	/	Rep.L. Po			
Rep. V. Pietsch		/	Rep.S. Sa	ındvig		
Rep.J.O. Nelson						
Rep.W.R. Devlin		/				
_Rep.T. Porter		/				
Rep.G. Uglem						
Rep C. Damschen	l					
Rep.R. Weisz		ノ				
Total Yes /	2		No O			
Absent 🔿						

If the vote is on an amendment, briefly indicate intent:

Floor Assignment

Module No: HR-27-2385

Carrier: Devlin

Insert LC: 58202.0201 Title: .0300

## REPORT OF STANDING COMMITTEE

HB 1110, as engrossed: Human Services Committee (Rep. Price, Chairman) recommends AMENDMENTS AS FOLLOWS and when so amended, recommends DO PASS (12 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). Engrossed HB 1110 was placed on the Sixth order on the calendar.

Page 1, line 3, replace "section" with "sections" and after "25-03.2-03.1" insert "and 50-11-02.3"

Page 1, line 5, after "capacity" insert "and residential child care facility or group home bed capacity"

Page 2, after line 2, insert:

"SECTION 3. AMENDMENT. Section 50-11-02.3 of the North Dakota Century Code is amended and reenacted as follows:

50-11-02.3. (Effective through Junc 30, 2005 July 31, 2007) Moratorium on expansion of residential child care facility or group home bed capacity. Notwithstanding sections 50-11-02 and 50-11-09, unless a needs assessment conducted by the department indicates a need for the licensing of additional bed capacity, the department may not issue a license under this chapter for any additional bed capacity for a residential child care facility or a group home above the state's gross number of beds licensed as of June 30, 2003."

Renumber accordingly

2005 SENATE HUMAN SERVICES

HB 1110

## 2005 SENATE STANDING COMMITTEE MINUTES

## BILL/RESOLUTION NO. HB 1110

Senate Human Services Committee

☐ Conference Committee

Hearing Date March 2, 2005

Tape Number	Side A	Side B	Meter #
1	x		20 - 1260
2		x	2809 - 3427
Committee Clerk Signature			
Minutes:			

Chairman Judy Lee opened the hearing on HB 1110, a bill relating to duties of the Department of Human Services with respect to least restrictive care options. All members were present.

Paul Ronnigen, Director, Children and Family Services, Department of Human Services, testified in favor of the bill. (written testimony)

Senator Brown said he understands changing the dates but what is this about kinship?

Mr. Ronnigen said he has been approached by several legislators in the past year regarding kinship care in the state of North Dakota and the feeling it needed to be thoroughly explored along with the other options in the care of children and so they included it in the bill in order to fully support the kinship care option and give direction to the child welfare agencies in the state to pursue kinship care and also to seek least restrictive care near the family's home if at all possible.

Senator J. Lee asked him to give a little review regarding the pilot project.

Mr. Ronnigen said the Department of Human Services, in collaboration with the Division of Children's Family Services and the Division of Economic Assistance has developed a pilot in Cass, Burleigh and Morton counties where we are using dollars to extend the same benefits that foster parents would get for kids like child care and extraordinary expenses they would incur by bringing kids into their homes. They will be providing statewide training within the next month and going statewide with that and aggressively pursuing kinship care whenever possible and reporting back to the legislature in the next session. They have seen some examples of how well it has worked. It requires a little more work on the county's part and a more thorough review of the extended family and is required by predator law.

**Senator Warner** asked what population is served by these programs and what circumstances would cause a child to be taken out of a home and put into a treatment center.

Mr. Ronnigen said he is testifying later this morning on HB 1486 and he will share some of that testimony now. He distributed a summary of the children who are currently placed in out of state care and explained the chart. (meter 367) (attachment 2)

**Senator Warner** asked if in general children placed out of state require a higher level of treatment than what is available in North Dakota?

Mr. Ronnigen said the youth who are being placed out of state for sexual offenders are typically at a higher level of care than what we provide in state and with the 24 or 26 kids we have out of state that is why this bill requires an RFP so we can bring the kids home along with the money. In some cases there are just no beds available, depending on the ebb and flow of the placement of children.

Page 3
Senate Human Services Committee
Bill/Resolution Number HB 1110
Hearing Date March 2, 2005

**Senator J. Lee** asked when it says not accepted on the code, does that mean the facility would not accept that child?

Mr. Ronningen said that is correct.

**Senator J. Lee** said some of these kids have been in several facilities so some are unable to return because of problems they have had at in state facilities.

Mr. Ronnigen said in most situations our resources have been exhausted in North Dakota prior to out of state placement.

Senator J. Lee said some rates are less than in state rates so money is not the issue.

Mr. Ronnigen said there is a variability, sometimes there is lower cost out of state and sometimes vice versa.

Senator J. Lee said this is interesting. As an example of the kinship care, someone she knows has called her about this. A woman was injured quite badly and had two small children. The family was very concerned about sending the children to stay with the father and grandfather due to a history of abuse. Cass county assisted the county where they were living because they had not yet implemented the program and the children were placed with a loving sister. The new program worked well. Her appreciation to the Department of Human Services for helping work through the problem.

**Senator Dever** asked the difference in level of care between a residential child care facility and a treatment center.

Mr. Ronnigen said the residential treatment centers have a psychiatric staff assigned to the children. The residential child care facilities are a lower level of care, they do not have the psychiatric staff.

Page 4 Senate Human Services Committee Bill/Resolution Number HB 1110 Hearing Date March 2, 2005

Senator Warner asked what GAF stands for?

Mr. Ronnigen said it is Global Functioning Assessment. It is a numerical value that describes the day to day functioning level of that child.

Senator Warner asked if a low score would indicate lower functioning, what would a 100 be?

Mr. Ronnigen said he would defer to the representative from the mental health division.

Senator Dever asked who does the placements.

Mr. Ronnigen said they are completed by the county social service staff who are the custodian of the child or the division of juvenile services who would also have custody of the child.

Senator Dever asked if the division of juvenile services is function of corrections.

Mr. Ronnigen said yes. North Dakota is unique because we share the foster care system between child welfare and juvenile justice and we save quite a few dollars as opposed to other states that run separate and competing care systems. We are pleased with the provision of services and the cooperation.

Vice Chairman Dever closed the hearing on HB 1110.

Chairman Judy Lee opened the discussion on HB 1110 when the committee reconvened. (tape 2, side B, meter 2809) This is the moratorium on expansion of residential treatment centers for children, it looks like a slam dunker. There is a fiscal note but it has no fiscal impact.

Senator Dever said not to belabor the point but would Teen Challenge fit into this?

**Senator Warner** said this is for children. The Teen Challenge bill started out in the Department of Human Services budget?

**Senator J. Lee** said yes, it started in the Department of Human Services budget and it was moved to Corrections.

Page 5 Senate Human Services Committee Bill/Resolution Number HB 1110 Hearing Date March 2, 2005

Senator J. Lee reviewed the wording of the bill.

Senator Warner asked for Senator J. Lee's definition of kinship care.

Senator J. Lee said kinship care means they are placed with family members, with a fast track, short track screening process, instead of going into a full foster care situation. There is still screening but not as extensive. They are urging social workers to place children in a relative's home, when available, rather than with a stranger.

Senator Warner referred to the example by Senator J. Lee this morning, the father was investigated and apparently found not to be appropriate.

Senator J. Lee said the problem was the judge was saying when the mother was arrested for a drug situation, she was going away for a long time. The father was in California, they weren't married, the father had been in prison and just let out so he is a felon. The paternal grandfather has a history of sexually abusing children and the father lived close to the grandfather and there was concern about sending the child to the father. An aunt, married and in a stable home, wanted the children and the kinship program worked very well. Once the Department of Human Services suggested to Richland County that they could fast track this, rather than going through the whole foster care approval process, there was an almost immediate transfer to the aunt's home which was less stressful for the child. Actually, the judge gave the children to the father, which was a poor ruling, but he never picked them up and the aunt that wanted the children called the judge after 4 days and told him about it and he reversed his decision.

Senator Dever asked if kinship is defined.

Senator J. Lee said she thinks it is in rule and Carlee will find out and we can act on this Monday.

Page 6 Senate Human Services Committee Bill/Resolution Number HB 1110 Hearing Date March 2, 2005

Chairman Judy Lee closed the discussion on HB 1110.

## 2005 SENATE STANDING COMMITTEE MINUTES

## **BILL/RESOLUTION NO. HB 1110**

Senate Humar	Services	Committee
--------------	----------	-----------

☐ Conference Committee

Hearing Date March 7, 2005

Tape Number

Side A

Side B

Meter#

X

18.2 - 20.2

Committee Clerk Signature

Minutes:

**Senator Judy Lee**, Chairman of the Senate Human Services Committee, opened the discussion on HB 1110. The fiscal note on HB 1110 does not have an impact.

All members of the committee were present.

Amendments as proposed by **Paul Ronnigen** were distributed to the committee.

**Senator Richard Brown** questioned testimony that had been presented to the committee as being for this bill and stated that the bill only relates to kinship and maintaining the moratorium on the number of residential benefitters in the state.

Senator Lee stated the moratorium is extended to 2007.

Senator Brown made a motion for a Do Pass of HB 1110.

Senator Stanley Lyson second the motion.

Roll call vote for Do Pass of HB 1110 was taken indicating 5 YEAS, 0 NAYS AND 0 ABSENT OR NOT VOTING.

Page 2 Senate Human Services Committee Bill/Resolution Number HB 1110 Hearing Date 3-7-05

Senator Brown will carry HB 1110.

Date:

3-7-05

Roll Call Vote #:

J 3

# 2005 SENATE STANDING COMMITTEE ROLL CALL VOTES BILL/RESOLUTION NO. | HB ///O

Senate Human Services				Committee
Check here for Conference Com	mittee	,		
Legislative Council Amendment Nun	nber			
Action Taken Qo Pass				
Motion Made By	brow	√ Se	econded By	h lypon
Senators	Yes	No	Senators	Yes No
Sen. Judy Lee - Chairman			Sen. John Warner	
Sen. Dick Dever - Vice Chairman	V			
Sen. Richard Brown	/			
Sen. Stanley Lyson	/			

Total (Yes)

No

Absent

Floor Assignment

Sen Brawn

If the vote is on an amendment, briefly indicate intent:

REPORT OF STANDING COMMITTEE (410) March 7, 2005 3:58 p.m.

Module No: SR-41-4314 Carrier: Brown Insert LC: Title:

## REPORT OF STANDING COMMITTEE

HB 1110, as reengrossed: Human Services Committee (Sen. J. Lee, Chairman) recommends DO PASS (5 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). Reengrossed HB 1110 was placed on the Fourteenth order on the calendar.

(2) DESK, (3) COMM Page No. 1 SR-41-4314

2005 TESTIMONY

HB 1110

# TESTIMONY HOUSE BILL 1110 DEPARTMENT OF HUMAN SERVICES CLARA SUE PRICE, CHAIRMAN January 5, 2005

Chairman Price and members of the Human Services committee, my name is Don Snyder and I serve as the Administrator of the Foster Care Program for the Department of Human Services. I am here today to present testimony regarding House Bill 1110. The Department supports the passage of this bill.

This bill was introduced to request a continuation of the moratorium placed on the expansion of residential bed capacity and was set at the number of beds licensed as of June 30, 2003. (See Attachment A for a listing of the current residential treatment centers (RTC) and their licensed bed capacity, and Attachment B for a listing of the current residential child care facility (RCCF) and their licensed bed capacity.)

The North Dakota Department of Human Services is currently working with residential facilities within North Dakota to identify service gaps, such as sexual offenders treatment, for youth who are placed out of state.

We are also in the process of developing a tool to measure appropriate levels of care at entry into the foster care system as well as progress in treatment. This tool will assist us in placing a youth at the appropriate level of care.

Given the current number of beds and the efforts that are on-going to assure appropriate utilization, the Department supports the extension of the moratorium through July 31, 2007.

Thank you. I would be willing to answer any questions the committee may have.

### ATTACHMENT A

Residential Treatment Centers Number of Beds Available							
Ruth Meiers RTC, Grand Forks, ND	As of 6/30/03	<b>As of 12/31/04</b> 12					
Dakota Boys Ranch RTC, Minot, ND	16	16					
Luther Hall RTC, Fargo, ND	16	16					
Pride – Manchester RTC, Bismarck, ND	8	8					
Dakota Boys Ranch RTC, Fargo, ND	16	16					
Western Plains RTC, Bismarck, ND	16	16					
Total RTC Beds	84	84					

### ATTACHMENT B

Residential Child Ca Number of Beds 2		
	As of 6/30/03	As of 12/31/04
Home on the Range, Sentinel Butte, ND	79	79
Red River Victory Ranch, Fargo, ND	8	0 *
Harmony House, Devils Lake, ND	7	7
Dakota Boys Ranch - RCCF, Minot, ND	39	39
DBR Minot Community Youth Home	12	12
Dakota Boys Ranch, Fargo Youth Home	10	10
New Outlooks, Devils Lake, ND	10	10
Prairie Learning Center, Raleigh, ND	50	50
Eckert Youth Homes, Williston, ND	16	16
Charles Hall Youth Services, Bismarck, ND	27	27
Safe Home – Prairie Harvest Foundation, Grand Forks, ND	8	8
Oppen Home, Minot, ND	6	7
Centre, Inc., Grand Forks, ND	. 8	8
Dakota Boys Ranch, Fargo Safe Home	8	8
Total Group/Residential Beds	288	281

<sup>\*</sup> Red River Victory Ranch, Fargo, ND closed 7/1/03

amend entro Rep Porter

Safety, permanency and well being for North Dakota's children are of vital interest to the Legislature and the citizens of North Dakota. Therefore, it is the intent of the Fifty Ninth Legislative Assembly that the Department of Human Services and County Social Services shall thoroughly explore the option of kinship care when a child is unable to return home due to safety concerns. Absent kinship options, the Department and the County Social Services Board shall provide permanency options that are in the least restrictive care and near the family's home as required by the federal mandates of the Adoption and Safe Family Act.

In addition, it is the intent of the North Dakota Legislature that the Department of Human Services issue an RFP for the provision of residential treatment services during 2005 to meet the needs of youth with a history of sexual offenses within the state <u>and</u> explore options of therapeutic foster care for those youth who would benefit from this service level.

### PROPOSED AMENDMENTS TO ENGROSSED HOUSE BILL NO. 1110

Page 1, line 5, after the first semicolon insert "to amend and reenact section 50-11-02.3 of the North Dakota Century Code, relating to extending the moratorium on expansion of residential child care facility or group home bed capacity;"

Page 2, after line 2, insert:

"Section 3. AMENDMENT. Section 50-11-02.3 of the North Dakota Century Code is amended and reenacted as follows:

50-11-02.3. (Effective through Juno 30, 2005 July 31, 2007) Moratorium on expansion of residential child care facility or group home bed capacity. Nothwithstanding sections 50-11-02 and 50-11-09, unless a needs assessment conducted by the department indicates a need for the licensing of additional bed capacity, the department may not issue a license under this chapter for any additional bed capacity for a residential child care facility or a group home above the state's gross number of beds licensed as of June 30, 2003."

Renumber accordingly

### HOUSE BILL 1110 HOUSE HUMAN SERVICES CLARA SUE PRICE, CHAIRMAN January 7, 2005

Chairman Price and members of the Human Services Committee, my name is Don Snyder, Administrator of the Foster Care Program for the Department of Human Services. I am here today to furnish you with information regarding three primary questions that were raised during the testimony on January 5, 2005.

Question #1: What is the occupancy rate for North Dakota residential child care facilities and residential treatment centers?

Center Incorporated, Grand Forks	100%
Charles Hall Youth Services, Bismarck	93.1%
Dakota Boys and Girls Ranch, Minot/Fargo	90.9%
Eckert Group Home, Williston	80.7%
Harmony House, Devils Lake	
Home on the Banca Continued D. //	76.5%
Home on the Range, Sentinel Butte	89.2%
Oppen Home, Minot	76.9%
Prairie Harvest, Grand Forks	68.6%
Prairie Learning Center, Raleigh	94.5%
New Outlooks, Devils Lake	0
Lake Oahe Group Home (Approved)	49.9%

The average occupancy rate for all residential child care facilities is 82.03%.

Occupancy for the North Dakota residential treatment centers:

D	nai acanticiti C
Pride Manchester	100%
Ruth Meiers, Grand Forks	71.42%
Luther Hall, Fargo	99.16%
Dakota Boys Ranch, Minot	89.28%
Dakota Boys Ranch, Fargo	77.35%
Western Plains, Bismarck	89.85%

The overall state average occupancy rate for residential treatment centers is 87.84%.

Question #2: What is the overall average daily rate paid for out-of-state and in-state facilities? 1) The overall average daily rate for out-of-state placements is \$192.00 per day. 2) The average daily rate for North Dakota residential treatment centers is

\$314.27. 3) The average daily rate for North Dakota residential child care facilities is \$143.83.

Question #3: What is the definition of a residential treatment center and a residential child care facility in North Dakota?

### **DEFINITION:**

1

RESIDENTIAL TREATMENT CENTER - NDAC Ch. 75-03-17

Residential treatment center for children means a facility or a distinct part of a facility that provides to children and adolescents, a total, 24 hour, therapeutic environment integrating group living, educational, interdisciplinary clinical assessment and a individualized treatment plan that meets the needs of the child and family. The services are available to children in need of and able to respond to active psychotherapeutic intervention and who cannot be effectively treated in their own family, in another home, or in a less restrictive setting.

### **DEFINITION:**

**RESIDENTIAL CHILD CARE FACILITY - NDCC 50-11-00** 

Residential Child Care Facility for children means the provision of substitute parental child care for those children who are in need of care for which the child's parent, guardian, or custodian is unable, neglects, or refuses to provide, and includes the provision of food, shelter, security and safety, guidance, and comfort on a twenty-four-hour basis, to one or more children under twenty-one years of age to safeguard the child's growth and development and to minimize and counteract hazards to the child's emotional health inherent in the separation from the child's family. This may be provided in a family foster home, group home, or residential child care facility.

B Attachment 1

TESTIMONY
House BILL 1110
SENATE HUMAN SERVICES
JUDY LEE, CHAIRMAN
March 2, 2005

۲,

Chairman Lee and members of the Human Services Committee, my name is Paul Ronningen, Director, Children and Family Services, Department of Human Services. I am here today to present testimony regarding Senate Bill 1110. The Department supports the passage of this bill.

This bill was introduced to request a continuation of the moratorium placed on the expansion of residential bed capacity and was set at the number of beds licensed as of June 30, 2003. (See Attachment A for a listing of the current residential treatment centers (RTC) and their licensed bed capacity, and Attachment B for a listing of the current residential child care facility (RCCF) and their licensed bed capacity.)

The North Dakota Department of Human Services is currently working with residential facilities within North Dakota to identify service gaps, such as sexual offenders treatment, for youth who are placed out of state.

We are also in the process of developing a tool to measure appropriate levels of care at entry into the foster care system as well as progress in treatment. This tool will assist us in placing a youth at the appropriate level of care.

Given the current number of beds and the efforts that are on-going to assure appropriate utilization, the Department supports the extension of the moratorium through July 31, 2007.

Thank you. I would be willing to answer any questions the committee may have.

## Attach ment 2

Ø
E
Ξ
Σ
$\overline{c}$
₹
Z
į
4
STATE PLA
20
0
ಠ
_

Bed Avail • Previous Placement	(2)RMAC, DBR, Luther Hall (3)State Hospital, RMAC, Manchester House, Dakota House	(з)рвк, нотв, усс	(3)08R, HOTR (3)VCC	(i)Luther Hall, RMAC, DBR (2)CHYS, St Hospital	(3/CHYS, St A's (2)Pride Manchester, DBR-Fargo, Luther Hall, RMAC, HOTR, CHYS (3)DBR-TL	(1)DBR (2)HOTR (3)Cleo Wallace	(1)Manchester House, RMAC (3)Mills Lacs	(1)DBR (3)HOTR	(1)Munchester, DBR	(1)Manchester (2)RMAC, Luther Hall (3)Black Hills Childrens Home, DBR- Fgo
Custodian	Burleigh CSSB	DUS	Sa	Stark Co.	Ward Co	Kidder Co	Grunt CSSB	Sig	Morton Co.	Stark Co
Spec. Ed Noeds	× ca	<b>&gt;</b>	<b>&gt;</b>	ĝ	<b>&gt;</b>	<b>&gt;</b>	¥	Yes	<b>3</b>	Ya
Antic. Length of Placement	12 Months	12 Months	12 Months	9 Months	12 Months	12 Months	12 Months	12 Months	6 Months	9 Months
In- State Rate	3.4 Det	314	314 Day	<u>₩</u>	9 H D D D D D D D D D D D D D D D D D D	314/ Dey	314 Day	3.4 Day	314 Day	314 Day
Ž	212 Day	22E/ Day	22.7/ Day	9 <u>9</u>	240 Day	227/ Day	212/ Dey	2 5 2 5	Dey (	Dey 130
Match	ផ	¥	_	<b>≾</b>	£	Ę	ā	ដ	꿆	ត
it Brief Indication of Problem	ADHD, obsessive computaive disorder, tourettes disorder by records, disruptive disorder, NOS. GAF-35 in tight structure. Sexually acting out since he was approximately 7 ½ yrs. OM. Agreeaive toward others. Threatened suicide on several occurions. Cited in the past for unsavay & assault. Current charges pending for assaultime self fineruper at the State Howish II-75.	Reactive attachment disorder, paraphillia, NOS. Anthractic disorder, onset insorania. Emerging historic & dependent train. History of physical, verbal, emotional & excess abuse. Discharged from to-tate facilities due to his grooming behaviors. Needs	An outside yearnest Carlo 2 in structures seeing. It j 102. Sexual disords, conduct disorder, adjustment disorder, ADHD, parent-child problems. Sexual abuse of child. Two adult convictions for GSL is need of per offender breament program. [Q]	History of self-harm scivities including cutting and head banging. Six suicide attempts in 18 mos. Raped by family member. Depression, NOS. PTSD. Chater B traits Andrease in susons attended. On E.3.4.	Conduct disorder, childhood onset. Major depressive disorder. ADHD, by history. R/O FTSD, R/O persphilis, NNOS. GAF-40. Scraully abused by uncle. Perpetrated his sistem. Needs treatment for this across perpetration and sexual victim issues. Father lives in Colorado. Reuniffication efforts pleamed. NO 22.	ADHD, combined type, by history ODD. Pervative developmental disorder (streeotyped & repetitive motor mannerisms, social oddition). Anxiety disorder, NOS. RO Bipolar disorder, NOS. Problems with primary support group, social servironment, legal system, other psychosocial. Sex offending behavior. GAF-50 RQ 81.	Depressive disorder, NOS. Reactive attachment disorder (provisional). Anxiety disorder, NOS, with obsessive compulsive disorder features. Sexual disorder, NOS, with feithern and bistory of sexual exploitation of a younger peer. ADHD, combined with a Machine membracing in sexual of 25 to 10 of	Conduct disorder, child onset type. Constituted artisty disorder. Sexual abuse of child. Poor peer & family relations. GAE-50. Sexually abused his sister. History of sexually acting out, destruction of property & behavioral dyncontrol. Needs sex offender treatment. IQ - 109	Bipolar disorder, music, & ADHD. Needs constant supervision due to posmitally desgravus behaviors, such as choking his younger sibling, handing gura, extually inappropriate behavior toward brother and younger child. He is argumentative toward adults & violent behavior toward his mother. He is a victim of actual abuse. OAF-45 (Q 77)	RAD, PTSD, ADHD, mood disorder, NOS, peront-child relational problems. CAF.  10. Aggressive behavior. Depression, ODD, possible FAE, intolerable behavior. ceting non-material items such as stocking cupa, buttons & puper clips & noted to be drinking from the torlet. History of enerosis. History of emotional, physical & sexual abuse. RQ-15
Placement Date	3/30/01	10/1/03	10/1/03	11/8/04	2/13/04	3/7/03	8/11/00	11/2/04	8/4/04	3/31/03
Facility	Mcsabi, MN	Mille Lace, MN	Mesabi Academy MN	Woodfield Center, SD	Cleo Wallace, CO	Metabi, MN	Mestè, MN	Mesabi, MN	Dakota House, SD	Cleo Wallace, CO
Sex	Σ	×	Σ	<u></u>	Z	Σ	Σ	Σ	Σ	×
DOB	8/16/86	6/2/87	9/15/87		3/29/91	4/25/88	5/1/87	06/11/8	1/29./92	06/11/1
C E D	-	-	-	-	_	-	-	-	_	<del>-</del>
DHS Placing Region	Bismarck	Dickinson	Grand Forks	Grand Forks	Minot	Bismarck	Bismarck	Dickinson	Bismarck	Dickinson

\*(1) No bed available; (2) Bed available, not accepted; (3) Actually placed

ج)

Bed Avail. • Previous Placement	(2)DBR, Luther Hall, RMAC (3)St. Hospital, Prairie Psych (3X), DBR-RTC, VCC (2X), DBR Safe Home (2X), Luther Hall	(3)RMAC, Luther, PATH	(3)Luther Hall	(3)Luther Hall, Praine Harvest Safe Homs, DBR Safe Home	(3)Mancheator	(2)HOTR (3)RMAC, YCC, Western Plains, DBR- RTC	(1)DBR (2)HOTR	(3)DBR-TL (1)Manchester House (2)Luther Hall, DBR (3)Western Plains
Custodian	Curs Co	Cass Co/ Spirit Lake TSS	DJS	Chus Co	DHS .	DIS	SIC	Marcar Co
Se Spec.	Ž	z	z	z	ž,	ře Ep	٠-	<b>&gt;</b>
Antic. Length of Placement	12 Months	12 Months	7 Months	12 Months	12 Montis	12 Months	10 Monde	12 Months
State Rete	314 Day	31.6	24 6	Ω 3 €	Day Day	316 Day	) 0	314/ Day
32	// LI Pag	179/ Day	226/ Day	305/ Dey	9 to	220 Dey	¥ 6	) <u>121</u>
Masch	£	¥	<b></b>	<b>S</b>	¥	ā	æ	£
Brief Indication of Problem	Bipolar disender, NOS. Parent-child relationship problems. Alcohol/marijuans/inhalast abuse in remission. Bating disender, NOS. Borderline personality disender. Scokkeis. Family problems with primary support group. Social problems. Multiple psychiatric hospitalizations. GAF-56. History of stealing, hithing, problems, maway and dereats to harm self and others. Assaulitve behaviors. History of excess and physical abuse.	Reactive attachment disorder, bipoler disorder, ADHD, ODD, mood disorder, NOS. Victim of shuschapter, Dysonnais, NOS. Relational problems, NOS. Obsersaive compulsive, borderline and histifonic traits. Lack of surtaring and/or empethic failure in developmental years. Bynicial and sexual blues developmental years, maladeptive relations of the development of sexual. Bynicial and sexual blues developmental years, maladeptive relationship is also controlled.	Mond districts, NVS, uniques vs. bypolar. Alcohol depractancy, per history. Canadas depandence per history. FTSD. Anxiety disorder. Abusehogiscs. Nicotive depandence. Personichal relationship problems. R/O dissociative disorder, NOS vs. psychotic disorder, NOS. Bordeninis order. Streams some - multiple phocements due to poor emmodronal & behavioral control. Mem's hat of contact & follow through. Lack of numering or empethic stills in developmental years, emotional, verbal, physical & sexuel shuss in developmental years. Abandooment issues (fasher). Multiplicity to misternal & insupersonal relationships, issues related to identity, self services. A factor of the property of the still in the second contact issues (fasher).	Department of the control of the con	Mood disorder, NOS by history. Reactive stackment disorder, ADHD, combined typs. Developmental coordination & phonological disorder by history. History of abuse & neglect as a very young child. History of asthma & visual problems in the past. Severe paychonocial strasom in the necess	Processing that got with two todans is toda-to-to-to-to-to-to-to-to-to-to-to-to-to-	Pamphilia, NOS. Exposing his gratish and soliciting contact from his victims. Sewere mood swings, impulsivity, depression, saxiety. Exposed hinself to two six year old	manner, recons and ottomoer specime transmitter.  Sexual abuse of child - perpetented & victiment.  NOS vic blooks disorder, ADHD, combined bye, FTSD, obsessive computative symptomology & borderline cognitive ability. Sexually molected sister. Aggressive, general agitation & severe sexual scring out. Needs low functioning sex offender treatment program. IQ 71
Placement Date	<b>70/9</b> (/1	10/7/04	1/8/04	7/14/04	578/03	42402	4/28/04	1/31/03
Facility	Northwood, MN	St. Cloud Childrens Home MN	Charites, MN	Crabolic Charibes, MN	Dakota House, MN	Metabi, MN	Mesabi, MN	Mesabi, MN
Š	t.	<u>in</u>	<u>u.</u>	<b>14.</b>	Σ	×	Σ	Σ
DOB	78/2/81	11/25/88	10/31/88	12/9/88	06/81/9	12/21/86	3/6/91	6/13/90
ДОДШ	I <b>-</b>		-	-	-	-	-	-
DHS Placing Region	Fargo	Fargo	Orand Forks	Fargo	Bismarck	Grand Forks	Minot	Bismarck

\*(1) No bed available; (2) Bed available, not accepted; (3) Actually placed

Bed Avail. * Previous Placement	(2)Luther Hail (3)DBR-RTC, YCC	(1)Pride-Manchester (3)PATH, Prairie Psych, DBR Safe Home	(2)Lubre Hall, RMAC (3)HOTR	(2)Western Plains, DBR	(3)Northwood, Manchester, PATH, Prairie Psych	(1)DBR (2)Luther Hall, HOTR (3)YCC	(3)DBR Safe Home, HOTR, PATH, RRVR, Luther Hall, Prairie Harvest	(2)Western Plains (3)State Hospital, Western Plains, Oppen, PATH, Cleo Wallace	(2)RMAC, Luther Hall (3)DBR-RCCF & RTC, YCC
Custodian	DJS	S C	Burleigh Co	DIS	Spirit Lake (Legal) Cass CSSB (Phyrical)	Sra	Cess Co	Ward Co	Sa
Spec.	ů.	N-ED	z	<b>&gt;</b>	<b>&gt;</b>	^	<u>\$</u>	<b>&gt;</b>	*
Antic. Length of Placement	12 Months	12 Months	Months	12 Months	12 Months	12 Months	12 Months	12 Months	12 Months
Scribe Rute	Day	314	Div	314/ Day	31. 0.4	Day	<u>2</u> 0 €	Ω Dey	3. 5.4
Rate	305/ Dey	179/ Day	722 Day	234/ Dey	250 Dey	220 Day	133/ Day	Dey (	0 <u>1</u>
Match	£	<b>చ</b>	2	<b>≦</b>	¥	Ξ	ត	ង	<b>ន</b>
nt Brief Indication of Problem	History of acting out aggressively & harming hesself. In need of secure & structured environment. Numerous mental health issues such as PTSD, disruptive behavior disorder, NOS. Probably dysforms & RAD. GAF 30-50. Possible physical & sexual abuse. Abandooment by mother & father.	PTSD, chronic. RAD. ADHD, combined type. Parent-shild relational problem. ODD. Sexually abused and physically abused. Psychosocial stressors are severe w/chronic and multiple out-of-home placements, exposure to violence & physical & sexual abuse, chemical dependency issues in bio family. Dissolution of guardianchip & TPR, GAE-43; without supports low 30°s.	Adjudicated delinquent for CSI, indecent exposure & sexual assault. Also a victim of sexual assault. Generalized enxiety disorder, sexual perpetrator, enversis, noctural only, by history Victim of sexual & physical abuse. Problems with primary support group, problems related to the social environment & problems related to the social environment & problems related to hepsi system. GAF-40. Needs structured sex offender program. IQ 100	Charged with GSI in 7/04 after offending against a 5yr old resident while in placement at Western Plaint, Pervasive developmental delay, NOS, Disruptive behavior disorder, NOS. Bipola disorder, NOS. Paraphilis NOS. Branchime intellectual, functioning, Festal skelved exposure, possible syndrome. Visual and hearing deficius. Premature birth, recorntal and perinasal conditions and anomalies. GAF-34. Goal at for John to successfully complete a treatment program for sexual and behavioral issues.	ODD, mood disorder NOS, ADHD, reactive attachment disorder, alcohol related birth defects. Victim of verbal, physics), sexual & emotional abuse. Lack of supervision, medical & educational regelect. History of being physically aggressive & sexually inapproprise with others. History of running. GAP 30. 10, 78	Child sexually molested multiple times by multiple offenders. Involved with gang & has identified himself as the "gang bleh". History of suicide attempts. Practices Saturie writing, Charged with GSI. Victim was a 4 year old boy. Nocds sex offender sexament.	Defensive disorder, NOS. Diamptive behavior NOS vs. ODD. R/O PTSD. Perent- child relational problems. R/O ADHD. R/O pubtance abuse. NOS. R/O borderline intellectual functioning. Antitocial truits. R/O terming disabilities. Stressors-severa: Possible tack of nursaring and/or empetitie faithre devolpmental years. Abusive father killed in the war when child was an infant. Culturalization issues, each is related to identify, set of esteem & dependency needs. GAR-17, RO-67.	Depressive disorder, NOS, social phobia, ODD, mild MR, problems with primary support group, social certronnent & education. Previously discharged from Western Pains due to extreme physical & vorbal aggression. Facility staff report her as beign defaut, openitoral, defensive, argumentaine & insuppropriate. 10 64	Obsessive computative disorder wicontamination fears. Conduct disorder, childhood onset. ADRD, instinutive type. Dysthymis. Learning disorder, NOS. Possible history of physical abuse (stepfather) per records. GAF 50 in structure. Estensive criminal record. Has difficulty respecting pears, teachers and others in estitority. Failed ND facility placements. RQ sverage
Placement Date	<b>1</b> /20/04	1/12/04	8/17/04	9/18/04	12/4/02	1/30/03	4/6/04	9/20/04	11/13/03
Facility	Catholic Charities, MN	Northwood, MN	Mesabi, MN	Messbi, MN	Bar None, MN	Metabi, MN	Ber None, MN	Cleo Wallace, CO	Matsbi.
Sex	u.	<u>t-</u>	Σ	×	Σ	Σ	Σ	<u></u>	Σ
DOB	12/8/89	3/12/94	6/14/87	98/9/11	06/9/9	12/10/87	6/21/87	6/21/89	1/9/87
C O C H	-	-	-		-	-	~	~	2
DHS Placing Region	Bismarck	Fargo	Bismarck	Williston	Fargo	Minot	Fargo	Minot	Grand Forks

\*(1) No bed available; (2) Bed available, not accepted; (3) Actually placed

**≈**j

Bed Avail • Previous Placement	(I)RMAC (2)DBR (3)McLead Treatment Homes, Luther Hall, State Hospital, CHYS, YCC, PATH	(3)Prairie Psych, Manchester, DBR, Kairos House, Northwood, PATH	(3)Detention, DBR Safe Home, Prairie Paych, PATh	(1)Pride Menchester (3)Prairie Psych, PATh	(3)Catholic Charities, YCC, RMAC, CHYS, Prairie Harvest, State Hospital, p.A.Tu.	(1)Stadter Center, DBR Safe Home (1)Manchester	(1)RMAC, Luther Hall (3)DBR (RTC & Sale Home), PATH, Prairie Prych, St. Cloud Childrens Home	(3)RMAC, CHYS, State Hospital	(3/Oilfilan, Lutber Hall, Manchester, State Hospital, PATH
Custodian	DHS/DJS	Cass Co.	Cuss Co	SHO	SIQ	ပို့ <b>1</b>	DHS	Burtaigh Co	ပို့ <b>၈၈</b> ၃
X EE S	z .	, <b>3</b>	, X	ž		z	•	<b>8</b>	\$ *
Antic. Length of Placement	12 Months	•	12 Months	12 Months	10 Months	12 Months	12 Montha	12 Months	Months Months
F Se 5	9 K	31.4 Day	314 Day	Dev 5	<u> </u>	314 Day	314 Day	到	De 2
Rate	130/ Day	Day	160 Pay	195/ Day	305/ Dey	<u> </u>	Day	9 <u>9</u>	<u> </u>
Match	వ	<b>≦</b>	<b>ត</b>	<b>5</b>	Z	≦	æ	á	<b>a</b>
Brief Indication of Problem	History of using, the run risk and the danger she presents to herself and others is beyond the capacity of ND facilities. Failed Luther Hall placement. Depressive disorder, NOS. ODD vs. Disruptive behavior disorder. AN of a child. PTSD. Alcohol cannalis and polysubstance dependence. Eating disorder, NOS. Relational problems, NOS. RVO major depression with without psychosis. Borderline narrisaristic and observive communitys traits. (3.45.30, 10.7)	Violent withinity interiors—directioned to burn down the family home. Previous placement in Northwood therapeutic foster home. Schloseffective disorder, hippartype-currently remedied by medications. ODD, by history. ADHD, combined type. Disorder of written expression. Reading disorder. Communication disorder, NOS. Psychosocial streasons severe. GAF 60. RQ 78	Mood disorder, NOS. ADHD, ODD per bast admit. Perentichtid relational problem. R/O Cemahis & alcohol abuse. R/O depressive disorder. History of authma. R/O Cemahis & alcohol abuse. R/O depressive disorder. History of authma. Psychosocial streams are revers. Methigh out-of-thour photomata. & proppisational Long standing tuleraction with mental health professionals & numrerous providers. Witness to domestic violence & victim of physical abuse. Exposure to perenti deuglicholi ous. Serinity with significant dual diagnosis concerns. Anademic difficulties. R/J - avenue.	Bipolar disorder, manie. Pervasive developmental disorder, NOS. Mild mental retardation. Cardent palsy, prinventra. Problem with primary support system. TPR, possible adoption. Problems with obsention. GAF-30. Aggressive behavior. Extransive past previously instance, 10.68.	Mood disorder, NOS. ODD. Constart disorder, by history. Highly volatile behaviors. recent drug overdose. Return to Catholic Charities where site had been successful.	Bipolar disorder, NOS, rule out bipolar disorder, mixed, moderate; rule out a mood disorder due to a subde seizure disorder; rule out subclinical PTSD. Parent divorce 2%, several moves in life, placement in foster cere, several bospitalizations; legal involvement. History of agitation and violent behavior. Self-destructive & self-injurious behavior. Mood changes appear shruptly.	ADHD. PTSD. Depression, NOS. Bereavement Victim of abuse. Status post head injury. Psychosocial stressors severe, child is ophened & bio family has history of mental illness. GAF-46. Child jamped out of moving our in summer of '03. Behaviors include bying, straling, unresting in bedroom closed, defined, oppositional, hiding a high som & bary soom & bary marissas in his possession, DR 33.	Schizophrania, paranoid type. Bilataral bearing impairment, obcatty secondary to obsazzapine. Difficulty in responding to residential care environment. GAP-30. Rg 93	ODD. ADHD. Mood disorder, NOS (prodominately affective over-reactivity) that may have its origins in residual postmarantic symptoms stemming from the earlier abusive parenting. History of babes & neglect & prevedyind retainousl problems. Probable writted developmental (terming disorders). Severa psychosocial streages in the peat, currently moderate. Exhibite extreme violence, attacting and & demagning property, GAF-35
Placement Date	11/3/04	1/9/04	8/12/04	11/14/03	10/4/04	4/6/04	12/01/04	<b>6</b> /11/04	40,62/1
	Cleo Wallace, CO	Northwood, MN	Bar None, MN	St.Joseph's Childrens Home, MN	Catholic Charittes, MN	Northwood, MN	Mille Lacs Academy, MN	A Kida Hope, CO	Mesabi Academy MN
Sex	L.	Σ	Σ	Σ	iL.	x	Σ	is.	Σ
800	10/14/87	10/14/89	89/1/8	4/14/94	6/11/87	2/1/92	16/61/2	12/31/86	\$/12/88
000	~	7	7	7	~	<b>N</b>	~	~	2
DHS Placing Region	Bismarck	Fargo	Fargo	Fargo	Grand Forks	Fargo	Fargo	Bismarck	Fargo

\*(1) No bed available; (2) Bed available, not accepted; (3) Actually placed

Bed Avail. * Previous Placement	(1)Manchester (2)RMAC, Luther	(3)DBR Safe Home, Prairie St John (1)DBR, Furgo Youth Home, PLC (3)Luther Hall, DBR Safe Home, Detention	(2)DBR. (3)DBR, RMAC, State Hospital	(3)YCC, PLC, CHYS	(1)Marchester (3)PATH, Stadter Center, HOTR, DBR Safe Home	(1)Lather Hall, Pride-Manchester (3)Safe Home, detection, PATH	(3)DBR Safe Horne & Fargo RTC, Luther Hall, Detention	(1)Manchester (3)Pruirie Harvest, PATH	())Menchester House (3)PATH, Manchester
Custodian	Cass CSSB	CMICSSB	Dus	Sid	DHS	Grand Forts CSSB	Cluss Co	Grand Forts CSSB	Cass CSSB
Spec. Ed Y.N Y.N	7	ž,	¥	•	>	ž	<u>\$</u>	ğ	Yes .
Antic. Length of Placement	12 Month	12 Months	10 Months	12 Months	12 Months	i 2 Monthe	12 Monthe	12 Montba	Months
State Rate	<u>\$</u> 6	9. tg	314 Day	314 Day	31 & Dey	3.6	915 Det	Day Day	314 Dey
A.	233/ Day	5 A	D 7	Dey (2)	D 2	172/ Dey	102V	<u>}</u> 60 €	50 50 50 70
Match	Œ	<b>a</b>	₫	<b>Z</b>	<b>a</b>	ā	₫	<b>≦</b>	ž
t Brief Indication of Problem	Mood disorder, NOS. Anxiery disorder, ADHD, disruptive behavior disorder, problems with princy support group. GAF-30. History of verbal & physical shuse and nearlest within family.	Mood disorder, NOS. O'DD. Social phobia. Cannabis dependence. Victim of abuse/neglect. Anxiety disorder. Nicotine dependence. Parent/child relational problem. BVO learning disorder. Nicotine dependence. Parent/exide relational problem. BVO learning disorder. ROO passive/aggressive obsessive compulsives & marrisaistic traits. Stressors severe. Broden in psych united but to homicidal & unicidal identiona. Moon has financial & health problems. Last of nutraing and/or expanite feelings in developmental years. Abandonment by father. Emotional, physical & verbal abuse in developmental years as well as dealing with moun's chamical dependency. Issues related to industry, self-esteem, dependency needs, makeigptive maternal & interportunal industry, asid-esteem, dependency needs, makeigptive maternal & interportunal and industry, asid-esteem, dependency needs, makeigptive	Mood syndrome, NOS. ODD. Tourette's syndrome. ADED. Learning disorder. Emerging antiacital personality disorder. Legal problems, scadernic difficulties, poer relationably difficulties. GAF-35. Out-of-control aggressive behavior. Charged with sesselt. 10 8.1.	PTSD secondary to observed domestic violence & physical abuse in childhood. ADHD per records. ODD with features of conduct disorder (possible conduct disorder). Probable perent/child relational problems. Psychomocial streasors are promisent including exposure to domestic violence & allogad physical abuse in early stress. Multiplic scaves by Sendly over the year. History of scadenic difficultics, abundosmore issues, etc., GAF-50 (conholbed setting) by 95	RAD. ADHD: Depression, NOS. Distruptive behavior disorder, inhibited type. Bipolar disorder. History of neglocs & psychological abuse. Serious demestic violence in the borra, including a stabbling soldent. TPR in 2000. Adoptive placement in the borrawingly oppositional. Charged with simple essenti; 10. 81	Bipolar disorder, manie, severs. PTSD: History of ADHD. Conduct disorder. Developmental coordination disorder. Ottis media, sensory deficit syndroms. GAF SO Verbally & physically aggressive when sagry. Intimidating toward younger children.	ADHD. Bereavement. ODD. Marijuana abuse. Perent-child relationship problems. Psychosocial streaters severe – death of morn, dad on dislysis, sibitings in placement GAF-48. Ran from both in-case facilities. Once on rus for a year prior to funding. Hittory of sealing, breating & contents, fighting, treatery, run sway & physical acrossives at bottes and in achool. Di 31	ODD. ADHD, combbed type. The disorder, NOS. Learning disorder. Ensents. Tentrumming in classroom. Strugges with chenge. Proc impulse control. May be distructive/stassitive. Past CPS involvenment including psychological malmammer, physical abuse & insidequate expervision. Demoster violence between mon & bortised.	Bipoles affective disorder; ADNID; reactive standament disorder; ODD; probable PTSD, chronis; history of emotional difficulties and behaviors including leability in control for torque; potential properties and behaviors including leability in control for torque; younged properties and persistent between the people and center and destribute worked and poor add-entern Severe and persistent mental illness. He required several psychiatric hospital admissions. Fattern of significant mental illness associated with Schizophrenia. Ry 66
Placement Date	4/28/04		11/13/03	427.04	<b>2</b> 12	6/26/03	10/23/03	4/23/04	8/26/99
Facility	Bar None, MN	Valley Lake Boys Home, MN	Mesabi, MN	McLeod Treatment Center MN	Northwood, MN	Northwood, MN	Springfield Academy, SD	Narthwood, MN	Northwood, MN
Sex	Z	Σ	Σ	Σ	Σ	Σ	Σ	Σ	ta.
<b>B</b> 00	1/3/93	88/6/9	7/23/87	2/23/88	18/8/	10/30/91	7/16/89	7124.195	10/8/89
, 000m	8	<b>n</b>	7		7	7		~	~
DHS Placing Region	Fargo	0 984 944 944 944 944 944 944 944 944 944	Minot	Bismarck	o se	Grand Forks	Pargo	Grand Forks	74 20 20

\*(1) No bed available; (2) Bed available, not accepted; (3) Actually placed

÷

.

Spec. Ed Bed Avail. • i Needs Custodian Previous Placement Y/N	Yes Cass Co (1)Western Plains	N Stark Co. (3)Rogers Memorial Hospital, PATH	Y Ward Co. (J)Western Plains, Cloo Wallacz, Summil Oaks, RMAC, DBR RTC & RCCF, CHYS, Saite Hospial, PATH	N Morton (1)Manchestor County (2)Luther Hall	N Grand Forts (3)P. H. Safe Home, Contre, Inc., State County Hospital, Stadler Center	No Grand Forks (3)PATH, Prairie Harvest Safe Home Co	Yes DHS	? Grand Forts (3)Prairie Harvest Safe Home, DBR CSSB	7 Grand Forks (3)DBR, Kairos House, Prairie Harvest CSSB Safe Home
Antic. Length of Placement	12 Months	6 Months	12 Months	9 Months	7 Months	9 Months	12 Months	12 Months	12 Months
P. State	314 Day	3 0 0 4	314 Day	3 4	<u> </u>	₹ <u>0</u>	D 3 V €	Day	3.6 0.0
	255/ Day	130 Day	150 U v	160 Uny	136 Day	D 24	205/ Day	276 Dey	2112 Dey
Match	¥	<b>a</b>	¥ .	Œ	£	₹	Æ	ត	<b>a</b>
Brief Indication of Problem	Mood disorder, NOS. ODD. MR, mid. Epilepsy. Psychosocial tsreason: problems with primary support group, housing, parent-child relational problems & siblings relational problems. QAF-43. Physically aggressive at home and school. Dad in prison. More unable to meet child's increasing needs & child's high need for enventre & consistency. M 59	OCD, depression NOS. Parents divorce, conflict with mens and siblings, chronic low self estimate, esademic-peer issues, estimagement from dad. GAF-35. Difficulty going to reduced due to survivey and passet states, the blaste bereaff from faught members who day views as constrainteed, the cannot touch them there is draw have serme.	Personality change due to alcohol exposure in utero, PTSD, possible co-morbid bytolar disorder, NOS. Borderline RQ. Enurasis, penicitin & wycilin altergies, history of closed hard injury (possible loss of consciourness by the patient's report), rule out subtle extern disorder – temporal lobe syndrome. History of abuse. Multiple placements since experty child hood, little or no contact with father. Mother incurcented. (APF 38, 10.72.	Conduct disorder vs. ODD. Disruptive behavior disorder. Parantchild relational problems. Sibling retational problems. FAS. QAF 40. Difficult behavior in finer bonne - yelling, kicking doors, & taking things. Demanding, impulsive, quick tennor.	Alcohol & drug usage. (Tested positive for Meth & THC) Several past psychiatric hospitalizations & A/D treatments. History of eating disorder, PTSD, depressive disorder, NOS, morphalistic drybag, Location of Bodliny will allow child to continue working with ND treatmists that the has a send restricted in sold which in such	Depressive disorder, NOS. ADHD. Issues of lying, not following rules, difficulties in previous fester homes. Spost the majority of her life in fouter care. Both mother and father in jail. Both have chemical dependency & mental health issues. Feelility is in proximity to brother who is also in foster care which will allow for visitation.	Child placed with relatives in Rhode Mand in 1993. Aunt requested residential treatment due to recent fine setting in the home. Child has been seeing a psychiatrist monthly and takes several medications. Concerns continue regarding his thought process and the hope of decisions he makes. Plan is to return to relatives home following:	RAD, distribited type. ADHD, by history. ODD. R/O depressive disorder, WOS. Borderline intellectual fuscioning. Extreme stressors include history of abuse & neglect in early childhood, abundamnes! by bito parents, adoption, per relationship problems, meadernic failure, out-of-home apheement, legal problems. GAF-33. Adoptive failure in rate of facility. 10 – 70.	ADHD, combined type. Generalized learning deficit. RAD. Disruptive behavior disorder, NOS. Borderline personality traits. History of prenatal expenses to alcohol. History of neglect by the family, lutury of physical, emvironal & secural shuse by bio family, poor relationship difficulties, endorse difficulties. OAF-33. Adoptive family in military and trendered to WA. Festility in close proximity which will accommodate furnity in reunification efforts. IQ-77.
Placement Date	P0/9/L	3/26/04	9/17/03	707/9	<b>+0</b> /0(/9	10/6/9	9/14/04	10/22/04	87764
Facility	Bar None, MN	Cleo Wallace, CO	Dakota Hosse, SD	Dakota House, SD	Kaima House, MN	Kairos House, MN	Harmony Hills, Rhode Island	Secret Harbor, WA (Mayed from Ruth Dykeman Childrens Ctr)	Ruth Dykeman Childrens Center, Seattle, WA
Sex	Σ	124	Σ	<u>.</u>	ш,	<u>.</u>	×	¥	u.
D08	10/28/88	4/22/88	5/27/87	12/30/93	1,25/87	11/16/90	1/10/90	11/30/88	11/14/89
<b>20</b>	7	7	n	~	c ·	m	m	m	<b>~</b>
DHS Placing Region	Fargo	Dickinson	Minot	Bismarck	Grand Forks	Grand Forks	Grand Forks	Grand Forks	Grand Forks

\*(i) No bed available; (2) Bed available, not accepted; (3) Actually placed

Ş

Code = 1 Sex offenders Total = 24

Code = 2 Mental health - chemical and/or behavioral Total = 25

Code = 3 Close proximity Total = 5

\*(1) No bed available; (2) Bed available, not accepted; (3) Actually placed

### TESTIMONY House BILL 1110 SENATE HUMAN SERVICES JUDY LEE, CHAIRMAN March 2, 2005

Chairman Lee and members of the Human Services Committee, my name is Paul Ronningen, Director, Children and Family Services, Department of Human Services. I am providing follow up testimony regarding Senate Bill 1110. Senator Warner asked about the number of children from other states that are currently in our foster care facilities in North Dakota.

Attached is a description of the two children who are in North Dakota residential facilities from other states. One is from Montana and the other from Minnesota.

Thank you. If there is any other information that the committee needs, please let me know.

# FACILITY PLACEMENTS INTO NORTH DAKOTA

Custodian	Ramsey County Community Human Services, St. Paul, MN	District Court, Havre, MT
Spec. Ed Needs Y/N	>-	<b>&gt;</b>
Brief Indication of Problem	ADHD, ODD. Poor language skills (Asian/American child) & defiant behavior. GAF-55. Father incarcerated for murder and mother abandoned him. Child has been shifted between relatives. Defiant & truant from school. History of running away. Disrupted multiple placements in Minnesota. History of running away. Speculation that he may be involved in a gang.	PTSD, Cyclothymic Disorder, R/O conduct disorder, R/O paraphilia NOS. Charged with sexually assaulting a 6 year old girl.
Placement Date	12/22/04	12/3/03
Facility	Prairie Learning Center	Home on the Range
Sex	×	×
DOB	Minnesota 10/21/89	5/26/90
Sending State	Minnesota	Montana