ARC 0759D

HUMAN SERVICES DEPARTMENT[441]

Notice of Intended Action

Proposing rulemaking related to foster care placement and services and providing an opportunity for public comment

The Department of Health and Human Services hereby proposes to rescind Chapter 202, "Foster Care Placement and Services," Iowa Administrative Code, and to adopt a new Chapter 202 with the same title.

Legal Authority for Rulemaking

This rulemaking is proposed under the authority provided in Iowa Code sections 234.6 and 235.7.

State or Federal Law Implemented

This rulemaking implements, in whole or in part, Iowa Code sections 135H.6, 234.6, 234.7, 234.35, 235.7, and 237.19 and 2026 Iowa Acts, House File 2526.

Purpose and Summary

This proposed chapter was reviewed as part of the Red Tape Review as set forth by Executive Order 10. As a part of this review, restrictive terms were eliminated, and rules were updated to reflect modern practices. The proposed chapter sets forth the rules and regulations around the evaluation, placement, and service provisions for children in foster care. The Department also used this opportunity to implement 2026 Iowa Acts, House File 2526, by removing existing subrule 202.12(2), which outlines notification of biological parents of foster child placement information.

Regulatory Analysis

A Regulatory Analysis for this rulemaking was published in the Iowa Administrative Bulletin on October 14, 2026. A public hearing was held on the following date(s):

- November 3, 2026

Fiscal Impact

This rulemaking has no fiscal impact to the State of Iowa.

Jobs Impact

After analysis and review of this rulemaking, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rulemaking would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any, pursuant to 441—Chapter 2504.

Public Comment

Any interested person may submit written or oral comments concerning this proposed rulemaking, which must be received by the Department no later than 4:30 p.m. on December 15, 2026. Comments should be directed to:

Victoria L. Daniels
Department of Health and Human Services
Lucas State Office Building
321 East 12th Street

Des Moines, Iowa 50319
Phone: 515.829.6021
Email: compliancerules@hhs.iowa.gov

Public Hearing

Public hearings at which persons may present their views orally or in writing will be held as follows:

December 15, 2026 10 to 10:30 a.m.	Microsoft Teams Meeting ID: 211 572 644 831 451 Passcode: ZT6A8r9A
December 15, 2026 2 to 2:30 p.m.	Microsoft Teams Meeting ID: 226 219 564 194 258 8 Passcode: iH72gM9K

Persons who wish to make oral comments at a public hearing may be asked to state their names for the record and to confine their remarks to the subject of this proposed rulemaking.

Any persons who intend to attend a public hearing and have special requirements, such as those related to hearing or mobility impairments, should contact the Department and advise of specific needs.

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rulemaking by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rulemaking at its regular monthly meeting or at a special meeting. The Committee's meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

The following rulemaking action is proposed:

ITEM 1. Rescind 441—Chapter 202 and adopt the following **new** chapter in lieu thereof:

CHAPTER 202
FOSTER CARE PLACEMENT AND SERVICES

441—202.1(234) Definitions.

"Age- or developmentally appropriate activities" means activities or items that are generally accepted as suitable for children of the same chronological age or level of maturity or that are determined to be developmentally appropriate for a child, based on the development of cognitive, emotional, physical, and behavioral capacities that are typical for an age or age group; and in the case of a specific child, activities or items that are suitable for the child based on the developmental stages attained by the child with respect to the cognitive, emotional, physical, and behavioral capacities of the child.

"Caregiver" means a foster parent with whom a child in foster care has been placed or a designated official for a child care institution (including a group home, residential treatment, a shelter, or another congregate care setting) in which a child in foster care has been placed.

"Case permanency plan" means the plan identifying goals, needs, strengths, problems, services, time frames for meeting goals and for delivery of the services to the child and parents, objectives, desired outcomes, and responsibilities of all parties involved and reviewing progress. This includes information describing efforts to retain existing medical and mental health care providers for a child entering or in foster care and activities to evaluate service needs to avoid inappropriate diagnoses of mental illness, other emotional or behavioral disorders, medically fragile conditions, or developmental disabilities.

"Child" means the same as defined in Iowa Code section 234.1.

"Child foster care" or *"foster care"* means the same as defined in Iowa Code section 237.1(6).

"Eligible child" means a child for whom the court has given guardianship to the department or has transferred legal custody to the department or for whom the department has agreed to provide foster care services on the basis of a signed placement agreement or who has been placed in emergency care for a period of not more than 30 days upon the approval of the department.

"Facility" means the personnel, program, physical grounds, and equipment of a person or agency providing child foster care.

"Fictive kin" means the same as defined in Iowa Code section 232.2.

"Kinship foster caregiver" means the same as defined in 441—Chapter 125.

"Person" or *"agency"* means individuals, institutions, partnerships, voluntary associations, and corporations, other than institutions under the management or control of the department, who are licensed by the department as a foster family home, child caring agency or child placing agency, or approved as a shelter care facility.

"Reasonable and prudent parent standard" means the same as defined in Iowa Code section 237.1.

"Relative" means the same as defined in Iowa Code section 237.1.

"Resource family" means an individual person or couple who is licensed to provide foster family care or approved for adoption.

"Safety-related information" means information that indicates whether the child has behaved in a manner that threatened the safety of another person, has committed a violent act causing bodily injury to another person, or has been a victim or perpetrator of sexual abuse.

"Social history" means a written description of the child that includes strengths and needs; medical, mental, social, educational, placement and court history; and the child's relationships with the birth family and significant others.

441—202.2(234) Eligibility.

202.2(1) Only an eligible child as defined in these rules will be considered for foster care services supervised by the department.

202.2(2) The need for foster care placement and social and other related services, including but not limited to medical, psychiatric, psychological, and educational services, will be determined by an assessment of the child and family to determine their needs and the appropriateness of services.

a. Assessments will include:

(1) The educational, physical, psychological, social, family living, and recreational needs of the child,

(2) The family's ability to meet those needs, and

(3) A family genogram to determine relatives and other suitable support persons who have a kinship bond with the child.

b. The assessment is a continual process to identify needed changes in service or placement for the child.

202.2(3) With the exception of emergency care situations, a social history will be completed on each child before a department recommendation for foster care placement, using the Social History form prescribed by the department.

a. For voluntary emergency placements, a social history shall be completed before a decision is made to extend the placement beyond 30 days.

b. For court-ordered emergency placements, a social history shall be completed before the disposition hearing.

202.2(4) Foster care placement will be recommended by the department only after efforts have been made to prevent or eliminate the need for removal of the child from the family unless the child is in immediate danger at home.

202.2(5) The need for foster care and the efforts to prevent placement will be evaluated by a review committee prior to placement or, for emergency placements only, within 30 days after the date of placement. For children who are mentally or developmentally disabled and receive case management services, this requirement may be met by the interdisciplinary staffing described in 441—Chapter 90 as long as the department approves, the department worker attends the staffing, and the staffing meets the requirements of this subrule. The review will meet the following requirements:

a. Department staff on the review committee will be the department case manager, a supervisor knowledgeable in child welfare, and one or more additional persons appointed by the department.

b. The review will be open to the participation of the parents or guardian of the child, local and area education staff, juvenile court staff, the guardian ad litem, current service providers and previous service providers who have maintained a license.

c. The present foster care provider, if any, will be notified of the review and have the opportunity to participate.

d. Written notice of the review will be sent to the child's parents or guardian at least five working days prior to the date of the review.

e. Other persons may be invited to the review with the consent of the parents or guardian.

f. A written summary of the review recommendations will be sent to the child's parents or guardian following the review.

g. Review committee recommendations will be advisory to the department. The department is responsible for development of the department case plan and for reports and recommendations to the juvenile court.

h. At least one of the persons on the review committee shall be someone without responsibility for the case management or the delivery of services to either the child or the parents or guardian who are the subject of the review.

202.2(6) The citizenship or alien status of a child who enters foster care must be verified.

a. When the child will remain in foster care for no more than 60 days, the Statement of Citizenship Status for Foster Care form signed by the parent or guardian of the child is sufficient.

b. When the child will remain in foster care for more than 60 days, any one of the following documents will be accepted as satisfactory documentation of citizenship or nationality:

(1) A certificate of birth in the United States.

(2) Report of Birth Abroad of a Citizen of the United States issued by the U.S. Citizenship and Immigration Services.

(3) Certification of Birth Abroad issued by the U.S. Citizenship and Immigration Services.

(4) A United States passport.

(5) United States Citizen Identification Card issued by the U.S. Citizenship and Immigration Services.

(6) Certificate of United States Citizenship issued by the U.S. Citizenship and Immigration Services.

(7) Certificate of Naturalization issued by the U.S. Citizenship and Immigration Services.

(8) A valid state-issued driver's license or other identity document described in Section 274A(b)(1)(D) of the United States Immigration and Nationality Act as amended to August 1, 2026, but only if the state issuing the license or document either:

1. Requires proof of United States citizenship before issuance of the license or document; or

2. Obtains a social security number from the applicant and verifies before certification that the number is valid and is assigned to the applicant who is a citizen.

(9) Another document that provides proof of United States citizenship or nationality as the Secretary of the U.S. Department of Health and Human Services may specify by regulation pursuant to 42 U.S.C. §1396b(x)(3)(B)(v) or 1396b(x)(3)(C)(v) as amended to August 1, 2026.

c. A child entering foster care is exempt from these requirements when the family has previously presented satisfactory documentary evidence of citizenship as specified by the Secretary of the U.S. Department of Health and Human Services.

d. The parent or guardian of the child shall have a reasonable period to obtain and provide proof of citizenship. For the purposes of this requirement, the "reasonable period" begins on the date when the child is placed in foster care and continues to the date when the proof is provided or when the department establishes that the parent or guardian is no longer making a good faith effort to obtain the proof.

441—202.3(234) Voluntary placements.

202.3(1) All voluntary placement agreements for children under the age of 18 will terminate after 90 days.

202.3(2) When the voluntary placement is of a child who is under the age of 18, the Voluntary Foster Care Placement Agreement form shall be completed and signed by the parent(s) or guardian and the county office where the parent or guardian resides. Voluntary Foster Care Placement Agreements shall not be used to place children outside Iowa and shall not be signed by parents or guardians who reside outside Iowa. Voluntary Foster Care Placement Agreements will terminate if the child's parent or guardian moves outside Iowa after the placement.

202.3(3) Voluntary placement of a child aged 18 or older may be granted for six months at a time.

a. The department will enter into the agreement only when the child:

(1) Meets the definition of "child" in Iowa Code section 234.1;

(2) Was in foster care or a state institution immediately before reaching the age of 18;

(3) Has continued in foster care or a state institution since reaching the age of 18;

(4) Has demonstrated a willingness to participate in case planning and to fulfill responsibilities as defined in the case permanency plan; and

(5) Will be placed in foster family care or supervised apartment living in Iowa.

b. Payment will be limited pursuant to 441—paragraph 156.14(1)*"b."*

c. When the voluntary placement is of a child who is aged 18 or older and who has a court-ordered guardian, the Voluntary Foster Care Placement Agreement form shall be completed and signed by the guardian and the local office where the guardian resides. Voluntary Foster Care Placement Agreements shall not be signed with guardians who reside outside Iowa. Voluntary Foster Care Placement Agreements will terminate if the child's guardian moves outside Iowa after the placement.

d. When the voluntary placement is of a child who is aged 18 or older and who does not have a court-appointed guardian, the Voluntary Foster Care Placement Agreement form shall be completed and signed by the child and the local office where the child resides.

e. An exception to the requirement for continuous placement may be made for a youth who leaves foster care at age 18 and voluntarily returns to supervised apartment living foster care before the youth's twentieth birthday in order to complete high school or obtain a general equivalency diploma.

202.3(4) All voluntary placements must be approved by the department.

441—202.4(234) Selection of facility.

202.4(1) Placement consistent with the best interests and special needs of the child will be made in the least restrictive, most family-like facility available and in close proximity to the child's home. Race, color, or national origin may not be routinely considered in placement selections.

202.4(2) Efforts will be made to place siblings together unless to do so would be detrimental to any of the children's physical, emotional or mental well-being. Efforts to prevent separating siblings, reasons for separating siblings, and plans to maintain sibling contact will be documented in the child's case permanency plan.

202.4(3) The department will first consider placing the child in a relative's home unless no relatives are available or willing to accept placement or such placement would be detrimental to the child's physical, emotional, or mental well-being.

a. If a relative or a suitable person who has a kinship bond with the child will accept placement of the child:

(1) The person shall sign the Non-Law Enforcement Record Check Request form.

(2) The department will complete record checks to evaluate if the person's home is appropriate for the child before making the placement.

(3) The department will make a referral to the recruitment and retention provider to initiate an informational contact with the kinship foster caregiver. The recruitment and retention provider shall inform the kinship foster caregiver about the monthly kinship foster caregiver payment as outlined in rule 441—156.4(234) and explain the process of becoming a licensed foster parent.

b. Efforts to place the child in a relative's home and reasons for using a nonrelative placement will be documented in the child's case permanency plan.

202.4(4) Foster family care will be used for a child unless the child has problems that require specialized services that cannot be provided in a family setting. Reasons for using a more restrictive placement will be documented in the child's case permanency plan.

202.4(5) A foster family will be selected on the basis of compatibility with the child, taking into consideration:

a. The extent to which interests, strengths, abilities and needs of the foster family enable the foster family members to understand, accept and provide for the individual needs of the child.

b. The child's individual problems, medical needs, and plans for future care.

c. The capacity of the foster family to understand and accept the child's case permanency plan, the needs and attitudes of the child's parents, and the relationship of the child to the parents.

d. The characteristics of the foster family that offer a positive experience for the child who has specific problems as a consequence of past relationships.

e. An environment that will cause minimum disruption of the child including few changes in placement for the child.

202.4(6) A foster group care facility will be selected on the basis of its ability to meet the needs of the child, promote the child's growth and development, and ensure physical, intellectual and emotional progress during the stay in the facility. The department will place a child only in a licensed or approved facility that has a current contract with the department pursuant to 441—Chapter 152.

441—202.5(234) Preplacement.

202.5(1) Except for placements made in less than 24 hours, a child placed in a facility shall have a preplacement visit involving:

a. The child,

b. The foster parents or agency staff, if the child is placed in a public or private agency,

c. The department, and

d. The child's parents, unless their presence would be disruptive to the child's placement.

202.5(2) Before placement, the department will provide the facility with general information regarding the child, including a description of the child's medical needs, behavioral patterns including safety-related information, educational plans, and permanency goal. The department or the department's agent may share otherwise confidential information about a child with a licensed resource parent being considered as a possible placement for the child to the extent such disclosure is relevant to the placement decision and the proper care of the child. This may also include facilitating the sharing of contact information of the previous licensed resource parent with the potential licensed resource parent in an effort to support the continuity of care for a child. Safety-related information shall be withheld only if:

a. Withholding the information is ordered by the court; or

b. The department or the agency developing the service plan determines that providing the information would be detrimental to the child or to the family with whom the child is living or pose a risk to the safety of the licensed resource parent.

202.5(3) The child shall have a physical examination by a physician, advanced registered nurse practitioner, or a physician associate within 14 calendar days of placement. The physician, advanced registered nurse practitioner, or physician associate shall complete a preliminary screening for dental and mental health and refer the child to a dentist or mental health professional if appropriate. To address any immediate medical needs, the child shall be seen immediately at an emergency room, an urgent care center, or another community health resource.

441—202.6(234) Placement.

202.6(1) At the time of placement, the department worker will furnish to the foster care provider any available information regarding the child.

a. The information provided will include:

(1) The child's full name and date of birth;

(2) The names, work addresses, and telephone numbers of the placement worker and the worker's supervisor, including a home telephone, cell phone, or on-call number;

(3) The names, addresses, and telephone numbers of the child's physician and dentist;

(4) The names, addresses, and telephone numbers of significant relatives of the child, including parents, grandparents, brothers and sisters, aunts and uncles, and any other significant persons (for an adopted child, the adoptive parents and adoptive relatives);

(5) The case permanency plan;

(6) The results of a physical examination, including immunization history;

(7) The child's medical needs, including allergies, physical limitations, dental and medical recommendations, and special needs of HIV;

(8) Behavioral patterns including safety-related information;

(9) Educational arrangements, including but not limited to the school the child attends, special education needs, and school contacts;

(10) The placement contract or agreement, including the date of acceptance for care;

(11) Medical authorizations, service authorizations, and other releases as needed; and

(12) If the child is a Native American, the identification of the child's tribe and tribal social service agency, including telephone number and contact person.

b. Before releasing specific information about HIV, the department will use the Authorization to Release HIV-Related Information form to obtain a release from the child or the child's parent or guardian, or a court order permitting the release of the information.

(1) The person receiving this information shall complete the Receipt of HIV-Related Information form to document understanding of the confidentiality of this knowledge.

(2) The HIV General Agreement form shall be completed by foster parents who have agreed to care for children who have AIDS, test HIV positive, or are at risk for HIV infection.

c. Safety-related information shall be withheld only if:

(1) Withholding the information is ordered by the court; or

(2) The department or the agency developing the service plan determines that providing the information would be detrimental to the child or to the family with whom the child is living.

202.6(2) For each foster care placement in a foster family home supervised directly by the department, the Foster Family Placement Contract shall be completed by the foster family and the placement worker and supervisor. A new Foster Family Placement Contract shall be completed when the rate of payment or special provisions change.

202.6(3) A follow-up visit will be made to the child at the foster family home within two weeks of the initial placement for placements supervised directly by the department.

202.6(4) The case permanency plan will be reviewed at least every six months to ensure appropriateness of the child's placement. A copy of the subsequent case plan will be submitted to the court every six months unless the court orders a different frequency for reports.

202.6(5) In conjunction with the case plan review, the case will be presented every six months to a review committee that conforms to the requirements in subrule 202.2(5). The department may also approve a review by a local foster care review board authorized in Iowa Code section 237.19 or the court as meeting this requirement as long as the review conforms to paragraphs 202.2(5)*"b"* through *"h"* and 202.6(5)*"a"* through *"e."* The review committee shall:

a. Evaluate the continuing necessity for foster care placement.

b. Evaluate the continuing appropriateness of the foster care placement.

c. Evaluate the extent of compliance with the case plan.

d. Evaluate the extent of progress made toward lessening the causes for foster care placement.

e. Project a likely date by which the child will leave foster care.

441—202.7(234) Out-of-area placements.

202.7(1) When the department makes a placement of a child in the foster care system out of the service area in which the child resides, this placement will occur only when there is no appropriate placement within the service area, when the placement is necessary to facilitate reunification of the child with the parents, or when an out-of-area agency is closer to the community where the child resides than an in-area agency offering the same services.

202.7(2) The authority for approving out-of-area placements rests with both the placing and receiving departments.

202.7(3) Transfer of responsibility for supervision, planning, and visitation shall be approved by the placing and receiving departments and, when appropriate, by the court.

441—202.8(234) Out-of-state placements.

202.8(1) The department will make an out-of-state foster family care placement only with the approval of the service area manager. Approval will be granted only when the placement will not interfere with the goals of the child's case permanency plan and when one of the following conditions exists:

a. The foster family with whom the child is placed is moving out of state.

b. An out-of-state family having previous knowledge of the child desires to provide foster care to the child.

c. An out-of-state family is approved to adopt the child under subsidy and is eligible to receive maintenance payments until the adoption is final.

d. An out-of-state placement is necessary to facilitate reunification of the child with the parents.

202.8(2) Placements will be made in an out-of-state group care facility only with the approval of the service area manager and department.

202.8(3) All out-of-state placements will be made pursuant to interstate compact procedures.

202.8(4) The reasons for selecting an out-of-state placement will be documented in the child's case permanency plan.

441—202.9(234) Supervised apartment living. A supervised apartment living arrangement will provide a child with an environment in which the child can experience living in the community with supervision and prepare for self-sufficiency. The child should have the capacity to live in the community with less supervision than that provided by a foster family or in a group care setting and be able to follow the provisions of the case plan and participate in activities and services to achieve self-sufficiency.

202.9(1) *Living arrangements.*

a. The two types of supervised apartment living arrangements are as follows:

(1) A cluster setting, which provides support in a structured setting. Up to six children reside in apartments or bedrooms in one building (such as an apartment building or residential housing), supervised by one agency. The supervising agency must have an adult staff member present and available on site in the living arrangement at any time when more than one child is present.

(2) A scattered-site setting, which is the less restrictive of the two types of living arrangements. Up to three children supervised by one agency may reside in individual housing arrangements, such as apartments or residential housing, located in one building. Children must be able to contact supervising agency staff 24 hours a day, seven days a week.

b. If an agency rents an apartment to the child, there shall be a signed lease between both parties that includes but is not limited to:

(1) Amount to be paid for the rental unit.

(2) The term of the lease with both a beginning and an ending date.

(3) Rights and responsibilities of the tenant.

(4) Rights and responsibilities of the landlord.

(5) Conditions under which the lease can be terminated.

202.9(2) *Eligibility.* To be eligible for supervised apartment living placement, a child shall meet all of the following conditions:

a. If the child is under the age of 18, the child must:

(1) Satisfactorily attend school, in accordance with the school's attendance policies, with the objective of obtaining a high school diploma; or

(2) Satisfactorily attend an instructional program, pursuant to the program's policies, necessary to obtain a high school equivalency diploma; or

(3) Attend school to obtain postsecondary education or training on a full-time basis (based upon the institution's definition of full-time) or attend on a part-time basis and be either working or participating in a work training program leading to employment; or

(4) Work at least an average of 80 hours per month if not enrolled in school; or

(5) Participate in a work training program leading to employment if not enrolled in school.

b. If the individual is aged 18 or older, the individual must:

(1) Meet the definition of "child" in Iowa Code section 234.1; and

(2) Have been in foster care immediately before reaching the age of 18 and have continued in foster care since reaching the age of 18. The service area manager may waive the requirement for continuous placement for a child who leaves foster care at age 18 and voluntarily returns before the child's twentieth birthday in order to complete high school or obtain a high school equivalency diploma; and

(3) Attend school on a full-time basis leading to a high school diploma or attend an instructional program leading to a high school equivalency diploma.

c. The child must need foster care placement and services based on an assessment completed according to rule 441—202.2(234).

d. The child must participate in services and activities to achieve self-sufficiency.

e. The child must have the capacity to live in the community with less supervision than that provided by a foster family or in a group care setting, as determined by an assessment that reviews available information on the child to identify the needs, strengths, and resources of the child, especially as they pertain to the child's ability to function in the community. To determine if a supervised apartment living foster care placement is suitable for the child, the referring staff member must complete the Preplacement Screening for Supervised Apartment Living Foster Care form.

f. The child must have an approved living situation that meets the following minimum standards:

(1) Comply with applicable state and local zoning, fire, sanitary and safety regulations.

(2) Be located so as to provide reasonably convenient access to schools, places of employment, and services and supports required by the child.

(3) Be reasonably priced so as to fit within the child's budget.

g. If supervised apartment living foster care is deemed suitable for the child, the referring staff member will complete the Request for Approval of Supervised Apartment Living Foster Care Placement form to request approval for the placement. This form may also be used to request that the service area manager waive the requirement for continuous placement for a child who leaves foster care on or after the child's eighteenth birthday and voluntarily returns before the child's twentieth birthday in order to complete high school or obtain a high school equivalency diploma.

h. The placement must have the approval of the juvenile court if the child is under court jurisdiction.

202.9(3) *Services to be provided.* To ensure that the supervised apartment living arrangement is meeting the child's needs, required services will be provided directly by the department or purchased from an agency that has a contract with the department to provide supervised apartment living foster care services. The following services are required:

a. Development of a case or service plan (by either the department case manager or the service provider, if contracted out) in consultation with the child and the child's family (unless a reason for noninvolvement is documented in the case record) and significant others whenever appropriate that documents the following:

(1) Goals, intended to meet the specific needs of the child to achieve self-sufficiency, with projected dates of accomplishment.

(2) Objectives (action steps) to be taken by the child, the child's support system, and staff, with projected dates of accomplishment.

(3) Services to be provided and activities to be undertaken, the frequency of such services, who will provide the services, the child's progress with the goals and objectives, and the child's compliance with the service plan.

(4) A budget, developed with the child, based upon the child's monthly stipend payment, any start-up allowance, any earned or unearned incomes and financially related assistance (e.g., food assistance). Staff will work with the child to ensure payment of bills and receipt of necessary items as outlined in the budget.

b. Life skills training involving interpersonal and daily living skills training to prepare the child to maintain a safe, healthy, and stable lifestyle and achieve self-sufficiency. Life skills training includes training of "hard" skills (e.g., money management, self-care and hygiene, physical and mental health care, skills related to educational and employment goals, housing and home management, time management, accessing community resources) and training of "soft" skills (e.g., decision making, problem solving, developing healthy relationships, self-advocacy). Life skills training should be individualized to the needs of the child toward achieving self-sufficiency. If a child needs a specific life skills training service or services (e.g., parenting skill development or counseling services to reduce stress and social, emotional, or behavioral problems that affect the child's stability or ability to achieve self-sufficiency) in addition to basic life skills training services and other purchased services, the department's service area staff will specify the necessary services under special provisions on the Placement Agreement and Service Authorization for Supervised Apartment Living form.

c. Through visits with the child and to the living situation, determination and documentation that:

(1) The living arrangement and mode of living are safe and suitable and provide an environment that allows for the child's social and emotional needs to be met; and

(2) There is no reasonable cause to believe that the child's living situation or mode of living presents any unacceptable risks to the child's health or safety; and

(3) The child has access to a telephone; and

(4) There is an operating smoke alarm on each level of occupancy; and

(5) The child is receiving any necessary medical care; and

(6) The child is receiving appropriate and sufficient services and supports to achieve the child's goals and facilitate objectives according to the child's service plan.

d. Supervision to assist the child in developing the needed structure to live in the supervised apartment living setting and in locating and using other needed services. If the child is under the age of 18, supervision shall include a minimum of weekly face-to-face contacts. For a child aged 18 or older, supervision shall include a minimum of biweekly (every other week) face-to-face contacts. Supervision may include guidance, oversight, and behavior monitoring.

e. Ongoing assessment activities to monitor the child's ability to achieve self-sufficiency.

f. If services are purchased, visits by the department to the child according to subrule 202.11(2).

g. If services are purchased, compliance by the provider with all reporting requirements as required by the provider's contract with the department, including requirements for the individual service plan, quarterly reports, and a termination summary.

h. A review of the case and case plan every six months.

202.9(4) *Method of service provision.* Supervised apartment living services may be provided directly by the department or purchased from an agency that has a contract with the department to provide supervised apartment living foster care services. If services are purchased:

a. Department staff will be responsible for determining the specific service components to be provided and any special provisions of this care. The department case permanency plan will specify the goals and objectives of the services that are being purchased. If services are purchased, the case manager will complete the Placement Agreement and Service Authorization for Supervised Apartment Living form to place the child with the contractor, to authorize service, and to identify any special provisions for the case.

b. Supervised apartment living billings shall follow the terms of the contract with the department.

202.9(5) *Termination of services.*

a. Mandatory termination. Supervised apartment living services will be terminated when the child:

(1) No longer meets eligibility criteria;

(2) No longer needs services or needs a more restrictive level of placement;

(3) Chooses to live in a nonapproved setting; or

(4) Refuses to follow the provisions of the case plan.

b. When services are purchased and the department plans to remove a child from the supervised apartment living placement, the department will inform the provider in writing of the date of removal,

the reason for the removal, the recourse available, if any, and that the contested case (appeal) proceeding pursuant to Iowa Code chapter 17A does not apply to the removal.

c. The provider will be informed ten days in advance of the removal, except when the court orders removal of the child from the placement or there is evidence of neglect or physical or sexual abuse.

441—202.10(234) Services to foster parents. Foster parents shall be provided necessary supportive services for the purpose of aiding them in the care and supervision of the child. These services shall include but not be limited to:

202.10(1) Availability of social service staff on a 24-hour basis in case of emergency.

202.10(2) Conferences to develop in-depth planning regarding family visits, expectations of the department, future objectives and time frames, use of resources, and termination of placements. The department or the department's agent shall consider the needs and scheduling demands of a child, the child's parents, the child's siblings, and the resource parent caring for the child when scheduling supervised or any other visitation between the child and the child's siblings, family members, or fictive kin. The department will not require a resource parent to conduct or be present during scheduled supervised visits.

202.10(3) Visitation by the department's service area staff at least monthly regardless of the duration of the placements.

202.10(4) Notifying a resource parent of any appropriate meetings relating to the case permanency plan of a child that are known to the department, including individualized education program meetings and any medical appointments required or scheduled.

202.10(5) Making available all known pertinent information needed for the care of the child with a communicable disease, including safety-related information and special confidentiality requirements.

a. Before releasing specific information about a communicable disease, the department will use a Communicable Diseases General Agreement to obtain a release from the child or the child's parent or guardian, or a court order permitting the release of the information.

b. Safety-related information will be withheld only if:

(1) Withholding the information is ordered by the court; or

(2) The department or the agency developing the service plan determines that providing the information would be detrimental to the child or to the family with whom the child is living.

c. When continued breastfeeding of the child is determined to be in the best interest of the child by parents and medical professional as necessary, the department's service area staff and the foster parents shall make reasonable efforts to support the continued breastfeeding of the child by the mother.

202.10(6) Notifying a resource parent of any change in law or regulation that is known to the department that would have a substantive impact on the resource parent's obligations and responsibilities relating to family foster care.

202.10(7) Providing a resource parent with a written report that details the conclusions of any investigation conducted by the department that may affect a resource parent's ability to provide family foster care.

202.10(8) Maintaining a process to allow a resource parent to file complaints with the department electronically.

441—202.11(234) Services to the child. The department's service area staff will maintain a continuous relationship with the child.

202.11(1) The department will:

a. Help the child plan for the future,

b. Evaluate the child's needs and progress,

c. Supervise the living arrangement,

d. Arrange for social and other related services, including but not limited to medical, psychiatric, psychological, and educational services from other resources as needed, and

e. Counsel the child in adjusting to the placement.

202.11(2) The assigned service area staff will personally visit each child in out-of-home care at least once every calendar month, with the frequency of the visits based upon the needs of the child.

a. The visit will take place in the child's place of residence the majority of the time.

b. The visit will be of sufficient length to focus on issues pertinent to case planning. During the visit, the worker will address the safety, permanency, and well-being of the child, including the child's needs, services to the child, and achievement of the case permanency plan goals.

202.11(3) When placement of a breastfeeding child is made, the department's service area staff will:

a. Assess in consultation with the parent and medical professional whether continued breastfeeding by the mother is in the best interest of the child;

b. Make every reasonable effort to support the mother's continued breastfeeding for the child if determined appropriate; and

c. Document the assessment and efforts in the child's case plan and case notes.

202.11(4) When a child is in continuous foster care, a new physical examination will not be required when the child transfers from one foster care placement to another unless there is some indication that an examination is necessary. The department will obtain from the health practitioner or practitioners an annual medical review of treatment the child has received.

202.11(5) Throughout the provision of care, the foster care provider shall actively ensure that the child stays connected to the child's kin, culture, and community as documented in the child's case permanency plan. A resource parent shall be allowed to provide family foster care according to the resource parent's own culture and beliefs if such resource parent does not actively discourage a child to disregard the child's own culture and beliefs and if a biological parent whose parental rights have not been terminated or a legal guardian for the child does not object to the practice or activity that is consistent with the resource parent's own culture and beliefs.

202.11(6) Throughout the provision of care, the foster care provider is permitted to use the reasonable and prudent parent standard to create opportunities for participation of the child in age- or developmentally appropriate activities.

202.11(7) Transition planning. The purpose of transition planning is to provide services, supports, activities, and referrals to programs that assist children currently or formerly in foster care in acquiring skills and abilities necessary for transition to successful adulthood. Transition planning offers a life skills assessment; transition plan development; and transition-related services, supports, activities and referrals to programs.

a. Eligibility. To be eligible for the aftercare program, a child must be or have been in foster care and must meet at least one of the following eligibility requirements:

(1) Is currently in foster care and is 14 years of age or older.

(2) Is under the age of 21 and was adopted from foster care at 16 years of age or older.

(3) Is under the age of 21 and was placed in a subsidized guardianship arrangement from foster care at 16 years of age or older.

(4) Was formerly in foster care and is eligible for and participating in Iowa's aftercare services program as described in 441—Chapter 187.

(5) Was formerly in foster care and is eligible for and participating in Iowa's postsecondary education and training voucher (ETV) program as described in 42 U.S.C. §677(a)(6-7) as amended to August 1, 2026.

b. Assessment. A life skills assessment shall be administered to all children in foster care who are aged 14 or older. An assessment shall be available upon request to any child who has been discharged from foster care but meets the eligibility requirements in paragraph 202.11(7)*"a."* The assessment is designed to evaluate the child's strengths and needs in areas, including but not limited to:

(1) Education;

(2) Physical and mental health;

(3) Employment;

(4) Housing and money management; and

(5) Supportive relationships.

c. Transition plan development. A transition plan shall be completed for all children in foster care who are aged 14 or older as provided in Iowa Code section 232.2(6)*"g."* The transition plan will be part of a case permanency plan. Transition plan requirements include the following:

(1) The transition plan shall be personalized at the direction of the child and shall be developed in consultation with the child and reviewed by the department in collaboration with a child-centered transition team, honoring the goals and concerns of the child.

(2) The transition plan shall document that the child received and signed a document that describes the rights of the child with respect to education, health, visitation, and court participation. The document must be signed by the child indicating that the child has been provided with a copy of the document and that the rights contained in the document have been explained to the child in an age-appropriate way.

(3) The transition plan shall document that the child received a copy of any credit report pertaining to the child as provided by the child's caseworker on an annual basis until the child is discharged from foster care. The child must receive assistance from the child's caseworker in interpreting and resolving any inaccuracies in the report.

(4) The transition plan shall document that any child leaving foster care at the age of 18 or older was provided with the following documents and information unless the child has been in foster care for less than 30 days or is not eligible to receive such document:

1. An official or certified copy of the child's birth certificate.
2. The child's social security card.
3. A driver's license or identification card issued by the state to the child.
4. Health insurance information.
5. A copy of the child's medical and education records.

(5) The transition plan shall document that the caseworker provided to the child, at the case permanency plan review in the 90 days before the child reached the age of 18, information and education about the importance of having a durable power of attorney for health care and a copy of the state's form used to identify such a proxy. The child has the option to complete the form at the age of 18 or older.

(6) The transition plan shall address the strengths and needs identified in the assessment and detail the services, supports, activities and referrals to programs needed to implement the plan to best assist the child in preparing for successful adulthood. The membership of the transition team and the meeting dates for the team shall be documented in the transition plan.

(7) The transition plan shall be reviewed and updated at each case review after the plan's initial development; within 90 days before the child's eighteenth birthday; and within 90 days before the child is expected to leave foster care if the child remains in care after reaching the age of 18.

d. Transition services. Children shall be offered services, supports, activities and referrals to programs within but not limited to education, health, employment, housing, and supportive relationships according to the child's age and development, strengths and needs, permanency goal, and placement as documented in the case permanency plan.

441—202.12(234) Services to parents.

202.12(1) Child welfare services shall be made available to the parents throughout the period of placement for the purpose of reuniting the family in an agreed-upon time frame. Family safety, risk, and permanency services may be provided to:

a. Promote identification and enhancement of family strengths and protective capacities;

b. Address the factors that resulted in the child's being removed from the family home; and

c. Strengthen family connections to community resources and informal supports.

202.12(2) The case plan and treatment plan shall specify the services to be provided and the time frame for reuniting the family. These plans shall be developed in cooperation with the parents.

202.12(3) Personal contact shall be made regularly with the parents and the progress towards goal attainment reviewed and documented in the case record. The frequency of the personal contact shall be at least monthly and shall be specified in the child's case permanency plan.

202.12(4) When placement of a breastfeeding child is made, the department will:

a. Assess in consultation with the worker's supervisor whether continued breastfeeding by the mother is in the best interest of the child;

b. Make every reasonable effort to support the mother's continued breastfeeding of the child if determined appropriate; and

c. Document the assessment and efforts in the child's case plan and case notes.

441—202.13(234) Removal of the child.

202.13(1) When the department plans to remove a child from a facility or foster home, the facility or foster home will be informed in writing of the date of the removal, the reason for the removal, the recourse available to the facility or foster home, if any, and that the contested case (appeal) proceeding pursuant to Iowa Code chapter 17A does not apply to the removal of the child. The department will inform the facility or foster home ten days in advance of the removal, except that the facility or foster home may be informed less than ten days prior to the removal in the following instances:

a. When the parent or guardian removes the child from voluntary placement.

b. When the court orders removal of a child from placement.

c. When there is evidence of neglect or physical or sexual abuse.

202.13(2) The department may remove a child from a facility or foster home when any of the following conditions exist:

a. There is evidence of abuse, neglect, or exploitation of the child.

b. The child needs a specialized service that the facility does not offer.

c. The child is unable to benefit from the placement as evidenced by lack of progress of the child.

d. There is evidence the facility is unable to provide the care needed by the child and fulfill its responsibilities under the case plan.

e. There is lack of cooperation of the facility or foster home with the department.

202.13(3) If a foster family objects in writing within seven days from the date that the department furnishes notice of plans to remove the child, the department will grant a conference to the foster family to determine whether the removal is in the child's best interest.

a. This conference shall not be construed to be a contested case under Iowa Code chapter 17A.

b. The conference will be provided before the child is removed except in instances listed in paragraphs 202.13(1)*"a"* through *"c."* The department will review the propriety of the removal and explain the decision to the foster family.

c. The department, on finding that the removal is not in the child's best interests, may overrule the removal decision unless a court order or parental decision prevents the department from doing so.

202.13(4) When the facility or foster home requests a child be removed from its care, it shall give a minimum of ten days' notice to the department so planning may be made on behalf of the child. This does not apply to a situation where the health or safety of the child or another person in the foster home is threatened by the child's presence in the child's current placement home.

441—202.14(234) Termination. The foster care services will be terminated when the child is no longer an eligible child, when the attainment of goals in the case plan has been achieved, when the goals for whatever reasons cannot be achieved, or when it is evident that the family or individual is unable to benefit from the service or unwilling to accept further services.

441—202.15(234) Case permanency plan.

202.15(1) The department worker will ensure that a case permanency plan is developed for each child who is placed in foster care if the department has agreed to provide foster care through a voluntary placement agreement, if a court has transferred custody or guardianship to the department for the purpose of foster care, or if a court has placed the child in foster care and ordered the department to supervise the placement.

202.15(2) The department worker will develop the case permanency plan with the child's parents, unless the child's parents are unwilling to participate in the plan's development, and with the child, unless the child is unable or unwilling to participate. For a child 14 years of age or older in foster care, the case permanency plan must be developed in consultation with the child. The child may choose up to two members of the case planning team who are not the child's foster parent or caseworker. The department may reject an individual selected by a child at any time if the department has good cause

to believe the individual would not act in the best interests of the child. One individual selected by the child to be a member of a child's case planning team may be designated to be the child's advisor and, as necessary, advocate with respect to the use of the reasonable and prudent parent standard.

202.15(3) The department will consider information regarding medical appointments, treatment needs, educational progress, and services from a resource parent when developing or modifying a child's case permanency plan and in the coordination of care and decisions related to services and care necessary for the child. The information the department receives from a resource parent will be reviewed and considered as decisions about the child's progress and needs are made.

202.15(4) The department worker will be responsible for ensuring the development of the case permanency plan within the time frame specified by the department. In all cases, the case permanency plan will be completed within 60 days of the date the child entered foster care.

202.15(5) Copies of the initial and subsequent case permanency plans will be provided to the child and the child's parents. Copies will also be provided to the following individuals if the individuals are involved in services to the child: the juvenile court officer, the judge, the child's attorney, the child's guardian ad litem, the child's guardian, the child's custodian, the child's court appointed special advocate, the parents' attorneys, the county attorney, the state foster care review board, and any other interested parties identified in the plan.

202.15(6) The initial and subsequent case permanency plans will be completed on the forms prescribed by the department.

441—202.16(135H) Department approval of need for a psychiatric medical institution for children.

202.16(1) Applicants for departmental approval of need shall submit the following to Iowa Medicaid:

a. A description of the population to be served, including age, sex, and types of disorders, and an estimate of the number of these youth in need of psychiatric care in the area of the state in which the applicant is located.

b. A statement of the number of beds requested and a description of the treatment program to be provided, the outcomes to be achieved and the techniques for measuring outcomes.

c. A proposed date of operation as a psychiatric medical institution for children.

d. A description of the applicant's experience with providing similar services to youth, especially the target population.

e. A description of the applicant's plan, including the timeline for achieving accreditation to provide psychiatric services from a federally recognized accrediting organization under the organization's standards for residential settings and licensure as a psychiatric medical institution for children, or a copy of the organization's report if already accredited.

f. References from the department's service area manager in which the proposed psychiatric medical institution for children would be located, the chief juvenile court officer of the judicial district in which the proposed psychiatric medical institution for children would be located, and the applicant's licensor from the department of inspections, appeals, and licensing.

202.16(2) The department will evaluate proposals and issue a decision based on the following criteria:

a. The number of psychiatric medical institutions for children beds for the proposed population that are needed in the area of the state in which the facility would be located, based on the department's most recent needs assessment.

b. The steps the facility has taken toward achieving accreditation from a federally recognized accrediting organization and licensure as a psychiatric medical institution for children.

c. The applicant's ability to provide services and support consistent with the requirements under Iowa Code chapter 232, including but not limited to evidence that:

(1) Children will be served in a setting that is in close proximity to their parents' home.

(2) Each child will receive services consistent with the child's best interests and special psychiatric needs as identified in the child's case permanency plan.

(3) Children and their families will receive services to facilitate the children's return home or other permanent placement.

d. The applicant's ability to provide children with a non-hospital-type living environment if the applicant is not freestanding from a hospital or health care facility.

e. The limits on the number of beds found in Iowa Code section 135H.6(2).

202.16(3) If a facility has not been licensed as a psychiatric medical institution for children within one year after the date of the department's approval of need, the department's approval will expire unless the department has approved an extension. An extension may be approved up to a maximum of six months if the agency has documented extenuating circumstances that prevented completion of the licensing process.

441—202.17(235) Local transition committees. Local transition committees will be established by the department in each of the department's service areas. The service area manager or designee determines the number of local transition committees needed within the service area, sets operating policies and procedures, and appoints committee membership.

202.17(1) *Purpose.* The purpose of local transition committees is to ensure that the transition needs of youth in foster care who are 16 years of age or older have been addressed in order to assist the youth in preparing for the transition from foster care to adulthood.

202.17(2) *Membership.* Each committee will have a designated number of members.

a. The standing committee membership may include but is not limited to:

(1) Department staff involved with child welfare, adult services, or transition planning.

(2) Juvenile court services staff.

(3) Adult service system staff.

(4) Education staff.

(5) Service care provider representation.

(6) Others knowledgeable about community resources.

b. Additionally, nonstanding membership may include those knowledgeable about the youth, including the child's court-appointed special advocate, guardian ad litem, and service or care providers.

202.17(3) *Duties.* Local transition committees shall address the transition needs of youth in foster care who are 16 years of age or older and who have a case permanency plan as defined in Iowa Code section 232.2. Each committee shall have operating policies and procedures to carry out as set forth in this rule.

a. Each committee shall establish a process for review and approval of written transition plans for youth for whom the committee has placement responsibility that meets a continuum of case needs and coordinates with local transition planning protocol. The process may include a paper review or an in-person review, or both, according to case need.

b. The committee may be involved when the youth is at least 16 years of age but shall be involved in reviewing and approving a youth's transition plan before the youth reaches age 17½. When a youth enters foster care at age 17½ or older, the committee shall be involved in reviewing and approving the youth's transition plan within 30 days of completion.

c. In reviewing a youth's transition plan, the committee shall identify and act to address gaps existing in services or supports available that would assist the youth in the transition from foster care to adulthood.

d. For those youth expected to need services as adults, the committee shall ensure that the transition plan was developed with the participation of any person reasonably expected to be a service provider when the youth becomes an adult or to become responsible for the costs of services at that time.

e. The committee shall ensure that transition planning and review is coordinated with overall case planning and review. Committee review and approval shall be indicated in the youth's case permanency plan.

f. With respect to meetings involving a specific youth receiving foster care and the youth's family, the local transition committees are not subject to Iowa Code chapter 21.

g. The information and records of or provided to a local transition committee regarding a youth receiving foster care and the youth's family are not public records pursuant to Iowa Code chapter 22 when the records relate to the foster care placement and transition needs of the youth.

h. Members of the committees are subject to the standards of confidentiality set forth in Iowa Code sections 217.30, 235A.15, 600.16, and 600.16A.

These rules are intended to implement Iowa Code sections 135H.6, 234.6, 234.7, 234.35, 235.7, and 237.19.