

HUMAN SERVICES DEPARTMENT[441]

Adopted and Filed

Pursuant to the authority of Iowa Code section 217.6, the Department of Human Services hereby amends Chapter 108, “Licensing and Regulation of Child-Placing Agencies,” Chapter 112, “Licensing and Regulation of Child Foster Care Facilities,” Chapter 113, “Licensing and Regulation of Foster Family Homes,” Chapter 114, “Licensing and Regulation of All Group Living Foster Care Facilities for Children,” Chapter 116, “Licensing and Regulation of Residential Facilities for Mentally Retarded Children,” Chapter 117, “Foster Parent Training,” Chapter 156, “Payments for Foster Care,” and Chapter 202, “Foster Care Placement and Services,” Iowa Administrative Code.

These amendments revise outdated terminology and regulations and align the rules with child care regulations and make needed revisions for contractor requirements for preservice training for the recruitment, retention, training and support contracts effective July 1, 2017.

Notice of Intended Action was published in the Iowa Administrative Bulletin as **ARC 3040C** on April 26, 2017.

The Department received comments from 18 respondents during the public comment period. The respondents’ comments and the Department’s responses are as follows:

Comment 1: One respondent requested that physician assistants (PAs) in addition to physicians be able to complete a physical examination to authorize an alternate sleeping position. The respondent noted that the proposed language was physician-centric and restricted other qualified health professionals from performing this task.

Department response 1: The Department has revised paragraph “6” of subparagraph 113.5(3)“a”(5) in Item 16 to provide that PAs and advanced registered nurse practitioners may provide a signed authorization for an alternate sleeping position. The paragraph now reads as follows:

“6. If an alternate sleeping position is needed for an infant, a signed authorization with a statement of a medical reason is required and shall be submitted by a physician, advanced registered nurse practitioner, or physician assistant.”

Comment 2: One respondent questioned the changes to staff qualifications for a child-placing agency employee or volunteer with qualifications for foster parents.

Department response 2: Staff qualifications for a child-placing agency employee or volunteer are not the same as qualifications for foster parents. The Department will not revise the relevant rule.

Comment 3: There were five comments from respondents about the maximum number of children in the home not exceeding eight unless a variance is needed for a sibling placement to keep siblings together or there is a variance to licensed capacity for placement of a specific child.

1. One respondent requested that both licensing variances and child-specific variances be allowed at the same time. The respondent stated that the maximum number of children needs to be determined on a case-by-case basis, as some families have more children.

2. One respondent asked that the maximum number of children in the foster home be reconsidered.

3. One respondent was familiar with one family who has nine adopted children. The respondent stated that in the past, that family had been issued a variance for two children. The respondent stated that the proposed language would eliminate a family, in this circumstance, from being a good foster family.

4. One respondent who already had eight of the respondent’s own children provided several reasons to allow for more than eight children: Reasons to extend the number of children beyond eight might be if there are grandparents or extended family or older children living in the home to care for the children and a supervision plan is developed.

5. One respondent stated that some large families are licensed and are able to provide care for additional children.

Department response 3: The Department has revised subparagraph 113.4(1)“c”(2) in Item 14 to provide clarity. The subparagraph now reads as follows:

“(2) A variance beyond the maximum capacity of the foster home license is needed for the placement of a specific child in foster family care. A child-specific variance shall end when that child leaves the placement or any other change brings the family into licensed capacity. Unless a variance is needed for the placement of a sibling(s) of a foster child already in the home, or to keep siblings together, the maximum number of children in the home shall not exceed eight. On a case-by-case basis, if it is determined the foster parents have shown the parenting skills and have the social support system to meet the children’s needs for parenting more than eight children, the social work administrator shall approve the foster parents to parent more than eight children. A foster family may have both a licensing and a child-specific variance concurrently.”

Comment 4: Two respondents provided comments regarding foster homes’ provision of environmental protections to protect foster children against hazards and provision of constant and active supervision while children use the pool. One respondent who has a pool by the deck of the respondent’s home stated that they lock their doors to the deck and have gates to the yard. This respondent questioned whether the proposed rule language was reasonable. A second respondent stated that the examples of environmental protections that need to be maintained could create a financial barrier to foster parents.

Department response 4: The Department will not amend the rule regarding environmental protections as the Department is responsible for the safety and well-being of foster children placed in a foster home.

Comment 5: One respondent was concerned about a definition of an aboveground swimming pool, stating that, by the definition in the rule language, a child’s plastic pool would need to have a fence or approved cover. The respondent requested that the Department provide a definition of a nonclimbable fence.

Department response 5: The Department has revised the language in new paragraph 113.5(2)“c” in Item 15. The Department did not add a definition of an aboveground swimming pool or a nonclimbable fence. The Department did add language regarding a child’s plastic pool. Paragraph 113.5(2)“c” now reads as follows:

“c. When there is a swimming pool or child’s plastic pool on the premises:

“(1) A child’s plastic pool shall be drained daily and shall be inaccessible to children when it is not in use.

“(2) An aboveground or in-ground swimming pool that is not fenced shall be covered whenever the pool is not in use. The cover shall meet or exceed the ASTM International (formerly known as the American Society for Testing and Materials) specification intended to reduce the risk of drowning by inhibiting access to the water by children under five years of age.

“(3) An uncovered aboveground swimming pool shall be enclosed with an approved fence that is nonclimbable and is at least four feet high. The height of the side of the pool may be included.

“(4) An uncovered in-ground swimming pool flush with the ground shall be enclosed with an approved fence that is nonclimbable and is at least four feet high.”

Comment 6: Two respondents had questions about the swimming pool rule. One respondent expressed confusion about the rule and stated that a person would have to have either an approved swimming pool cover or have a fence for an aboveground or in-ground pool. The other respondent stated that in regard to paragraph 113.5(2)“c,” the subparagraph on pools with covers contradicts the subparagraphs on uncovered aboveground swimming pools and uncovered in-ground swimming pools.

Department response 6: The Department did not revise paragraph 113.5(2)“c” in response to these comments because there is no contradiction. Aboveground or in-ground pools with covers and not fenced are required to be covered whenever the pools are not in use, and the pool cover shall meet or exceed the ASTM specification to reduce the risk for children under 5 years of age having access to the water and drowning.

Aboveground or in-ground pools without covers need to be enclosed with a fence. There is no contradiction between the subparagraphs. One subparagraph speaks to both aboveground pools with covers and in-ground pools with covers, the next subparagraph speaks only to noncovered aboveground pools, and the last subparagraph speaks to noncovered in-ground pools.

Comment 7: One respondent commented on accompanying children and providing constant and active supervision while the children use the pool. This respondent thought the stated requirements included pools not at the foster parent home and required that the foster parents be in the pool with the children.

Department response 7: The Department will not revise the rule language to provide constant and active supervision for pools not on the foster parent property. The rule language in this rule making applies only to a pool located at the foster parent home and does not require the foster parent to be in the pool with the children. The Department has revised new subparagraph 113.5(2)“d”(2) in Item 15 to read as follows:

“(2) The foster parent or other adult shall provide reasonable supervision according to the ages and swimming abilities of the foster children when they are using the pool.”

Comment 8: One respondent stated that the requirement for a bedroom window large enough to allow for an unrestricted exit by a foster child is subjecting the family to subjective variation by the licensor. The respondent asked if a child who fits through the assigned bedroom window when the child is 7 years old but can no longer fit through the window when the same child is 12 years old must be moved to a different bedroom.

Department response 8: The Department will not revise this rule language in paragraph 113.5(3)“a.” A bedroom window large enough for a foster child must be large enough for any child matched to the foster home.

Comment 9: Two respondents supported the rule which states that crib-like furniture must meet the standards or recommendations from the U.S. Consumer Product Safety Commission or ASTM International.

Department response 9: The Department appreciates the support of the respondents.

Comment 10: Several of the respondents provided comments regarding the requirement that infants not be allowed to sleep on a bed/sofa/air mattress with a soft surface. One respondent commented on not allowing a child to sleep in any item not designed for sleeping, such as an infant or car seat, swing or bouncy seat, and asked what to do if a baby falls asleep in one of these items. Another respondent stated infant napping would be prohibited in other areas around the house and limited to the infant’s crib. Four respondents thought this rule applied to an infant in a car seat while traveling in a car. One respondent wanted it to be allowable for an infant to nap on a sofa and wanted the rule to be revised to only apply to night sleeping.

Department response 10: The Department is responsible for the safety and well-being of foster children placed in a foster home. The Department will not revise the rule regarding an infant/child sleeping in any item not designed for sleeping such as an infant or car seat, swing or bouncy seat. These safe sleeping standards apply to a foster child’s bedroom and not to a foster child traveling in a car in a car seat. However, the Department has revised the rule referring to a child in a car seat in a car. Specifically, the Department has revised numbered paragraph “3” of subparagraph 113.5(3)“a”(5) to read as follows:

“3. Infants shall not be allowed to sleep on a bed, sofa, air mattress or other soft surface. No child shall be allowed to sleep in any item not designed for sleeping. This is not referring to a child in a car seat in a car.”

Comment 11: One respondent commented that with regard to ensuring the bedroom and crib are free of hazards, it is appropriate to allow the foster parents to determine hazards in the bedroom and crib.

Department response 11: The Department is responsible for the safety and well-being of foster children placed in a foster home. The Department will not revise the rule regarding hazards, such as toys, soft objects, etc., being allowed in the sleeping area with an infant.

Comment 12: One respondent was opposed to not being able to have a blanket or bumper pad in the crib for a child with sensory issues who could get the child’s arms or legs caught in the bars of the crib. The respondent stated that the bumper pad would help avoid having a child’s arms or legs be caught in the crib.

Department response 12: A mesh cover that goes over the crib bars can be used to prevent an infant’s arms or legs from being caught in the crib bars. The Department is responsible for the safety and

well-being of foster children placed in a foster home. The Department will not revise the rule regarding the restriction of items in the sleeping area of an infant.

Comment 13: Several respondents were concerned about the proposed language which stated that “[s]leeping infants shall be actively observed by sight and sound.” The respondents asked what the proposed language meant in regard to observation of sleeping infants. The respondents stated that it was unrealistic to watch a child at all times. The respondents were concerned that the proposed rule language would never allow the foster parents to be able to sleep.

Department response 13: The Department removed the proposed paragraph relating to these comments, specifically, paragraph 113.5(3)“a”(5)“6,” and renumbered the remaining paragraphs.

Comment 14: Several respondents had concerns regarding the paragraph stating that no video or surveillance cameras are allowed in children’s bedrooms or bathrooms in the foster home. Several respondents asked if baby monitor/videos would be allowed for an infant. Other respondents stated they understood not having a camera in a bathroom but thought a camera should be allowed in the child’s bedroom, with one respondent stating that a camera in a bedroom is for safety reasons. Another respondent stated that the respondent’s child would wake up if someone went into his bedroom to check on him. Finally, one respondent stated a camera would be used to monitor a sexually reactive child to ensure the child is following healthy behaviors.

Department response 14: The Department has revised the standard found in new paragraph 113.5(3)“e” to allow a baby video monitor for children from birth to two years of age. Paragraph 113.5(3)“e” now reads as follows:

“e. Except for baby video monitors for children birth to two years of age used in their bedrooms, video or surveillance cameras are not allowed in children’s bedrooms or bathrooms.”

Comment 15: One respondent stated that deletion of the rule requiring foster parents to have a designated bedroom would allow foster parents to sleep in the living room on a chair or couch.

Department response 15: The deletion of the requirement for foster parents to have a designated bedroom does not create a safety condition. The Department will not amend the rule based on the respondent’s comment.

Comment 16: One respondent asked that the word “annually” be taken out in regard to testing of a private water supply before the foster care license is renewed as some renewal licenses can be renewed for two-year periods of time. This respondent asked why the testing is required for three consecutive years.

Department response 16: The private water supply (a well) can be unsafe one year and not the next year depending upon fertilizer or weed killer or other poisonous material leaching into the water. The Department has revised paragraph 113.6(3)“a” to provide clarity concerning the requirement to test private water supplies. Paragraph 113.6(3)“a” now reads as follows:

“a. Each privately operated water supply shall be tested prior to initial licensure and tested before license renewal, and evaluated for obvious deficiencies such as open or loose well tops or platforms and poor drainage around the wells.”

Comment 17: One respondent stated that the respondent understood the purpose of safety plans but wanted suggestions on how to do this with an infant.

Department response 17: The Department assumes that the respondent may be questioning how these plans are practiced with foster children. While an infant would not understand these safety plans, it is a good practice exercise for the foster parents to put into action these safety plans in the event there may be a fire or tornado. The Department will not revise the rule on this subject.

Comment 18: One respondent interpreted the rule on preservice training to mean that the inclusion of an agency-approved medication management, CPR, first-aid, mandatory reporter training, etc. must be approved by the Department.

Department response 18: The Department has revised new paragraph 113.8(1)“c” to read as follows:

“c. Preservice training, which shall include:

“(1) An agency-approved medication management training,

“(2) A face-to-face cardiopulmonary resuscitation (CPR) and first-aid training,

“(3) Mandatory reporter training on child abuse identification, and

“(4) The reasonable and prudent parent standard training; and”

Comment 19: Two respondents commented on the proposed rules regarding maintaining certification in first aid and cardiopulmonary resuscitation (CPR). Specifically, one respondent asked what if the first-aid certification expires in two years. Another respondent stated that first-aid/CPR certification is either two years or three years and asked whether there is consistency being applied to that.

Department response 19: If certification for first aid/CPR expires in two years, then foster parents are required to be recertified. There may not be consistency in the time period of certification as these trainings may have different certifications. The Department will not revise this rule.

Comment 20: One respondent stated that classes on first aid/CPR are hard to find and expensive. The respondent also asked how certifications are going to be tracked to ensure that the certifications for first aid/CPR are up to date.

Department response 20: Classes on first aid/CPR are provided across the state by the Red Cross and the American Heart Association. In addition, many local communities offer classes on first aid/CPR. The Iowa Foster and Adoptive Parents Association (IFAPA) has also provided trainings on first aid/CPR, and the new recruitment, retention, training and support (RRTS) services contractor will also be offering classes in these subject areas. The Department does provide an annual stipend of \$100 to be used toward training. The Red Cross will provide the trainings for free if the cost of the trainings is a financial hardship. In regard to the question on how the Department will track trainings and certifications, the Department provides a form for foster parents to use to track all of their trainings. The Department will not revise this rule.

Comment 21: One respondent asked why an adopted child would need an updated health report within three months of adoption finalization.

Department response 21: The Department has revised subrule 113.11(1) to remove the relevant sentence. The subrule now reads as follows:

“**113.11(1) Health report required.** The foster parents shall furnish the licensing agency with a health report on the family completed no more than six months before the application for licensure. The report shall include information on all family members, including foster parents, their minor children who reside in the home, and adult household members. An updated report shall be provided upon request of the department licensing worker or the recruitment and retention contractor.”

Comment 22: One respondent expressed concern that costs associated with the requirement that foster parents obtain a physical health report could create a financial barrier.

Department response 22: The Department will not amend the rule regarding furnishing a physical health report on the family and for anyone residing in the home. Physical health reports should not be a financial barrier as most people have insurance and also the Affordable Care Act requires medical insurance unless a person opts out of it.

Comment 23: One respondent asked if there was a form for the written report of the foster parents’ methods of training and discipline.

Department response 23: The form used by the Department to report foster parents’ methods of training and discipline is the Resource Parent Home Study.

Comment 24: One respondent asked what the certified respite program was and if it was a formal program.

Department response 24: The certified respite program is a formal program offered in specific counties of the state.

Comment 25: One respondent thought the proposed rule on animal waste meant regularly picking up dog feces in the foster parent’s yard.

Department response 25: The proposed amendment on animal waste is speaking to animal waste in the foster home. There have been foster homes where animal waste was not disposed of routinely and the home smelled so bad from animal feces and urine that no one wanted to enter the home. The presence of improperly disposed animal waste presents a health hazard to foster children. The Department did not revise the amendment.

Comment 26: One respondent was concerned about the requirement for foster parents to provide evidence of marital stability.

Department response 26: The Department has revised paragraph 113.12(5)“a” to read as follows:
“a. Provide evidence of relationship stability.”

Paragraph 113.14(4)“c” has also been revised to strike the word “marital” and add the word “relationship.”

Comment 27: One respondent requested that the Department clarify the requirement found in paragraph 113.12(5)“i” to respect the gender identity and sexual orientation of the foster child.

Department Response 27: The Department has revised new paragraph 113.12(5)“i” to read as follows:

“i. Articulate their strengths and concerns and limitations which are essential to the department’s matching the foster children with foster parents appropriately.”

General comments. Several comments from respondents dealt with subject matter not found in the Notice of Intended Action for this rule making. Those comments may be found in the **ARC 3040C** Comments and Department Response document on the Department’s Web site.

Technical changes. In review of the proposed rule making, the Department made the following technical changes to provide clarity and consistency within the rules.

Technical change 1: Subparagraph 113.3(4)“b”(6) was modified to remove a specific form name and form number. The subparagraph now reads as follows:

“(6) An evaluation of the applicant’s willingness to accept a child who has medical problems (such as HIV), an intellectual disability, or emotional or behavioral problems. The applicant shall complete the department form to indicate choices about caring for children who have or are at risk for HIV infection and other medical problems.”

Technical change 2: The subrule renumbered as 117.8(2) was modified for consistency within the rule making. The subrule now reads as follows:

“**117.8(2) First aid.** All foster parents shall be certified in first aid at least every three years and shall maintain their first-aid certification and a certificate or card indicating the date of training and expiration.”

The Council on Human Services adopted these amendments on June 14, 2017.

These amendments do not provide for waivers in specified situations because requests for the waiver of any rule may be submitted under the Department’s general rule on exceptions at 441—1.8(17A,217).

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

These amendments are intended to implement Iowa Code section 217.6.

These amendments will become effective September 1, 2017.

The following amendments are adopted.

ITEM 1. Amend rule 441—108.4(238) as follows:

~~**441—108.4(238) Staff qualifications.** An agency employee or volunteer shall be a person of good character, emotional stability, and have necessary ability, experience, and education to perform the duties assigned. An employee or volunteer shall not have a criminal record or founded child abuse report, unless the department has evaluated the crime or founded report and concluded that the crime or report does not merit prohibition of employment or licensure.~~

108.4(1) Qualifications for all staff. A child-placing agency employee or volunteer shall be emotionally stable and have the experience and education to perform the duties assigned. The agency shall not employ any person or give any person direct volunteer responsibility for a child or access to a child when the child is alone if that person has been convicted of a crime involving the mistreatment or exploitation of a child. The agency shall not employ any person or give any person direct volunteer responsibility for a child or access to a child when the child is alone if that person has a record of a criminal conviction or founded child abuse report unless the department has evaluated the crime or abuse and determined that the crime or abuse does not merit prohibition of volunteering or employment. If the child-placing agency is out of state, the agency shall complete that state’s child abuse record check and a criminal record check.

a. If a record of criminal conviction or founded child abuse exists, the person shall be offered the opportunity to complete and submit Iowa’s Record Check Evaluation form.

b. In its evaluation, the department shall consider:

(1) The nature and seriousness of the crime or founded abuse in relation to the employment or volunteer position sought;

(2) The time elapsed since the commission of the crime or founded abuse;

(3) The circumstances under which the crime or founded abuse was committed;

(4) The degree of rehabilitation; and

(5) The number of crimes or founded abuses committed by the person involved.

c. The agency shall maintain the following information with respect to each staff person:

(1) Documentation that a criminal record check with the Iowa division of criminal investigation has been completed on the staff person prior to the staff person's providing any care or service directly or indirectly to children under the care of the agency. A copy of the department's evaluation of the criminal record check shall be kept in the staff record.

(2) A written, signed and dated statement furnished by the staff person which discloses any founded reports of child abuse on the person that may exist prior to the staff person's providing any care or services to or on behalf of the facility.

(3) Documentation that a child abuse record check of the staff person has been completed with the Iowa central abuse registry for any founded reports of child abuse prior to the staff person's providing any care or services directly or indirectly to children under the care of the agency. A copy of the department's evaluation of this child abuse record check shall be kept in the staff record.

~~108.4(1)~~ ~~108.4(2)~~ *Contracted employees.* A child-placing agency which contracts for services shall ensure that contracted employees meet the same qualifications, training, and evaluation requirements as those of workers in employed positions. A child-placing agency is responsible for the services provided by contracted providers as well as volunteers and agency employees.

~~108.4(2)~~ ~~108.4(3)~~ *Qualifications of administrator.* An agency administrator shall possess one of the following:

a. and b. No change.

~~108.4(3)~~ ~~108.4(4)~~ *Caseworker qualifications.* Therapy and counseling services, psychosocial evaluation and assessment and care plan development shall be provided by staff who meet one of the following minimum education and experience criteria:

a. to e. No change.

~~108.4(4)~~ ~~108.4(5)~~ *Person filling more than one position.* A person functioning in more than one position specified by these rules shall meet the requirements for each of the positions the person fills.

ITEM 2. Amend rule 441—112.1(237) as follows:

441—112.1(237) Applicability. This chapter relates to licensing procedures for all child foster care facilities authorized by Iowa Code chapter 237. Rules relating to specific types of facilities are located in 441—Chapter 113, “Licensing and Regulation of Foster Family Homes,” 441—Chapter 114, “Licensing and Regulation of All Group Living Foster Care Facilities for Children,” 441—Chapter 115, “Licensing and Regulation of Comprehensive Residential Facilities for Children,” and 441—Chapter 116, “Licensing and Regulation of Residential Facilities for ~~Mentally Retarded~~ Children with an Intellectual Disability.”

This rule is intended to implement Iowa Code chapter 237.

ITEM 3. Amend rule ~~441—112.2(237)~~, definitions of “Applicant,” “Foster family home,” “Group facility” and “Residential facility for mentally retarded children,” as follows:

“Applicant:”

1. ~~The applicant for~~ For a foster family home license, the applicant is the foster parent or parents person or persons applying.

2. For a proprietary child caring facility, the applicant is the owner of the facility.

3. For facilities having a board of directors, the applicant may be the president of the board or the board's designee.

“*Foster family home*” means a home in which an individual person or persons or a married couple who wishes to provide or is providing, for a period exceeding 24 consecutive hours, board, room, and care for a child in a single family living unit.

“*Group facility*” means a community residential facility, a comprehensive residential facility, or a residential facility for ~~mentally-retarded~~ children with an intellectual disability.

“*Residential facility for ~~mentally-retarded~~ children with an intellectual disability*” means any residential facility which serves children ~~who meet the definition of mentally-retarded~~ with an intellectual disability as defined in Iowa Code chapter 222.

ITEM 4. Amend paragraph **112.3(1)“a”** as follows:

a. *Foster family care*. A person wishing to apply to be a foster parent shall contact the department’s recruitment and retention contractor at ~~1-800-243-0756~~ in the applicable service area to request an application packet. This procedure also applies to:

(1) and (2) No change.

ITEM 5. Amend paragraph **112.3(4)“a”** as follows:

a. Before it results in adverse action, a founded abuse report on a director, a sole proprietor involved in the facility’s operation, or any facility staff or foster parent applicant shall be evaluated by the department to determine if the abuse merits prohibition of employment or licensure.

ITEM 6. Amend rule 441—112.4(237) as follows:

441—112.4(237) License.

112.4(1) and **112.4(2)** No change.

112.4(3) When corrective action is completed on or before the date specified on a provisional or renewal license, a full license shall be issued for the remainder of the licensure term.

112.4(4) When the corrective action is not completed by the date specified on a provisional or renewal license, a full license shall be denied.

112.4(5) No change.

112.4(6) A foster family home license shall be approved for a term of one year for the first and second years of licensure. Thereafter, the license shall be approved for a term of two years unless it is determined by the administrator that a one-year license ~~may~~ shall be issued. A group facility license shall be approved for a term of one to three years according to the following criteria:

a. to c. No change.

This rule is intended to implement Iowa Code sections 237.3 and 237.5.

ITEM 7. Amend rule 441—112.10(232) as follows:

441—112.10(232) Mandatory reporting of child abuse.

112.10(1) No change.

112.10(2) *Required training*. ~~Within one year of becoming a~~ After completing the initial mandatory reporter training, and every five years thereafter, any person required to make a report under subrule 112.10(1) shall complete two hours of training relating to the identification and reporting of child abuse.

112.10(3) No change.

112.10(4) *Training content*.

a. Training in child abuse identification shall include physical and behavioral signs of physical abuse, denial of critical care, ~~and~~ sexual abuse and other categories of child abuse pursuant to Iowa Code section 232.68.

b. No change.

112.10(5) No change.

This rule is intended to implement Iowa Code section 232.69.

ITEM 8. Amend rule 441—112.11(237) as follows:

441—112.11(237) Required training on the reasonable and prudent parent standard. Each group facility shall have an on-site official authorized to apply the reasonable and prudent parent standard as

defined in rule 441—202.1(234). Within one year of being identified as an authorized on-site official, each authorized official shall complete the same department-approved training on the reasonable and prudent parent standard in the same manner as required for prospective foster parents and referenced in 441—subrule ~~117.8(6)~~ 117.1(4).

ITEM 9. Amend rule **441—113.2(237)**, definition of “Foster family home,” as follows:

“*Foster family home*” means a home in which an individual person or persons or a married couple who wishes to provide or is providing, for a period exceeding 24 consecutive hours, board, room, and care for a child in a single family living unit.

ITEM 10. Adopt the following **new** definitions of “Health care provider” and “Public water supply system (PWS)” in rule **441—113.2(237)**:

“*Health care provider*” means a licensed medical doctor, doctor of osteopathy, physician assistant or advanced registered nurse practitioner who completes a health report.

“*Public water supply system (PWS)*” means a system for the provision to the public of water for human consumption through pipes or other constructed conveyances, if such system has at least 15 service connections or regularly serves an average of at least 25 individuals daily at least 60 days out of the year.

ITEM 11. Amend subrule 113.3(1) as follows:

113.3(1) Application. Applications for an initial license to operate a foster family home shall be submitted and processed as directed in rule 441—112.3(237). In addition to the application form, the applicant shall submit the following forms during the licensing process:

a. and *b.* No change.

~~*e.* Form 470-3226, HIV General Agreement, to indicate choices about caring for children who have or are at risk for HIV infection.~~

~~*c.* Form 470-0693, Foster Care Private Water Supply Survey, if applicable.~~

~~*d.* Form 470-4657, Floor Plan. A The applicant or the recruitment and retention provider shall complete a drawing of the floor plan of the family’s home.~~

~~*e.* If licensed to drive, a copy of the driver’s license and motor vehicle insurance.~~

ITEM 12. Amend subrule 113.3(4) as follows:

113.3(4) Home study. The worker for the recruitment and retention contractor shall complete a family home study.

a. Process. Information for the home study is gathered primarily through the required preservice training as described in rule 441—117.1(237). In addition:

(1) The worker shall hold at least two face-to-face interviews with the applicant with one of the interviews taking place in the applicant’s home.

(2) The worker shall hold at least one face-to-face interview with each member of the household in the applicant’s home.

(3) ~~At least one of the interviews shall take place at the applicant’s home.~~ A physical inspection of the home is required. The worker shall use the Foster Family Survey Report to complete the physical inspection of the home to verify compliance with the licensing and regulation standards in this chapter.

(4) No change.

b. Family assessment topics. The assessment of the prospective foster family shall evaluate the family’s ability to parent a special needs child. The assessment shall include the following:

(1) to (5) No change.

(6) ~~The An evaluation of the applicant’s willingness to accept a child who has medical problems (such as HIV), mental retardation an intellectual disability, or emotional or behavioral problems. The applicant shall complete the department form to indicate choices about caring for children who have or are at risk for HIV infection and other medical problems.~~

(7) to (16) No change.

c. Written report. The recruitment and retention contractor shall prepare a written report of the family assessment using ~~Form 470-4029, PS-MAPP Family Profile Summary, and RC-0025, Home~~

~~Study Summary and Recommendation Outline~~ Form 470-5436, Resource Parent Home Study. The ~~summary~~ Resource Parent Home Study shall include a recommendation for the number, age, sex, characteristics, and special needs of a child or children the family can best parent; and any other pertinent information in making the licensing recommendation. The home study shall be maintained in the foster family record.

ITEM 13. Amend paragraph **113.3(5)“a”** as follows:

a. Upon approval, the department shall issue the applicant a foster family home license as described at rule 441—112.4(237) ~~to care for~~. The license shall indicate the licensed capacity for the number of foster children allowed approved for placement in the foster family home under subrule 113.4(1).

ITEM 14. Amend paragraph **113.4(1)“c”** as follows:

c. Meet one of the following criteria:

~~(1) A variance is necessary to keep a sibling group together. No variance shall be granted if the foster home is at licensed capacity and there are no members of the sibling group in the foster home.~~

~~(2) (1)~~ The foster parents have three or more children in the home and have shown the ability to parent a large number of children. A licensing variance may be approved at initial or renewal licensure to allow the placement of up to three foster children as set forth in the chart below:

No. of Children in the Home (birth/relative/adoptive placements)	Maximum License Capacity:	
	Without variance	With variance
0 children	5	Not applicable
1 child	4	Not applicable
2 children	3	Not applicable
3 children	2	3
4 children	1	3
5 or more children	Not applicable	3

~~(3) (2)~~ A variance beyond the maximum capacity of the foster home license is needed for the placement of a specific child in foster family care. A child-specific variance shall end when that child leaves the placement or any other change brings the family into licensed capacity. Unless a variance is needed for the placement of a sibling(s) of a foster child already in the home, or to keep siblings together, the maximum number of children in the home shall not exceed eight. On a case-by-case basis, if it is determined the foster parents have shown the parenting skills and have the social support system to meet the children’s needs for parenting more than eight children, the social work administrator shall approve the foster parents to parent more than eight children. A foster family may have both a licensing and a child-specific variance concurrently.

ITEM 15. Amend subrule 113.5(2) as follows:

113.5(2) Grounds.

a. No change.

b. The foster child shall be adequately supervised and protected against hazards including, but not limited to, traffic, pools bodies of water, railroads, waste material, and contaminated water. The foster parent shall provide environmental protections such as door alarms, baby monitors, fences, and foliage barriers.

c. When there is a swimming pool or child’s plastic pool on the premises:

(1) A child’s plastic pool shall be drained daily and shall be inaccessible to children when it is not in use.

(2) An aboveground or in-ground swimming pool that is not fenced shall be covered whenever the pool is not in use. The cover shall meet or exceed the ASTM International (formerly known as the American Society for Testing and Materials) specification intended to reduce the risk of drowning by inhibiting access to the water by children under five years of age.

(3) An uncovered aboveground swimming pool shall be enclosed with an approved fence that is nonclimbable and is at least four feet high. The height of the side of the pool may be included.

(4) An uncovered in-ground swimming pool flush with the ground shall be enclosed with an approved fence that is nonclimbable and is at least four feet high.

d. If children are allowed to use an aboveground or in-ground swimming pool, or other body of water:

(1) Equipment needed to rescue a child or adult shall be readily accessible.

(2) The foster parent or other adult shall provide reasonable supervision according to the ages and swimming abilities of the foster children when they are using the pool.

ITEM 16. Amend subrule 113.5(3) as follows:

113.5(3) Bedrooms for foster children.

a. Bedrooms shall either have been constructed for the purpose of providing sleeping accommodation or remodeled for sleeping to provide proper heat and ventilation. Bedroom additions to a home shall meet building code requirements. All bedrooms used by foster children ~~must~~ shall have:

(1) and (2) No change.

(3) An unobstructed, operable window that opens from the inside that is large enough to allow for an unrestricted exit by a foster child;

(4) A closet, wardrobe, armoire, or dresser for the child's clothes; and

(5) A standard bed, ~~or a crib~~ for infants and toddlers who cannot safely use a standard bed-, a crib or crib-like furniture which has a waterproof mattress covering and sufficient bedding to enable a child to rest comfortably and which meets the current standards or recommendations from the U.S. Consumer Product Safety Commission or ASTM International for juvenile products for each child under two years of age if developmentally appropriate. The provider shall follow safe sleep practices as recommended by the American Academy of Pediatrics for infants under the age of one. Safe infant sleep practices shall conform to the following standards:

1. Infants shall always be placed on their backs for sleep.

2. Infants shall be placed on a firm mattress with a tight fitting sheet that meets U.S. Consumer Product Safety Commission federal standards.

3. Infants shall not be allowed to sleep on a bed, sofa, air mattress or other soft surface. No child shall be allowed to sleep in any item not designed for sleeping. This is not referring to a child in a car seat in a car.

4. No toys, soft objects, stuffed animals, pillows, bumper pads, blankets, or loose bedding shall be allowed in the sleeping area with the infant.

5. No co-sleeping shall be allowed.

6. If an alternate sleeping position is needed for an infant, a signed authorization with a statement of a medical reason is required and shall be submitted by a physician, advanced registered nurse practitioner, or physician assistant.

b. to d. No change.

e. Except for baby video monitors for children birth to two years of age used in their bedrooms, video or surveillance cameras are not allowed in children's bedrooms or bathrooms.

e. f. Bedrooms belowground shall:

(1) to (4) No change.

(5) Have a finished ceiling such as drywall or a drop ceiling; and

(6) No change.

ITEM 17. Amend subrule 113.5(6) as follows:

113.5(6) Physical care standards for foster children.

a. Grouping children in bedrooms shall take into consideration the age and sex of children.

(1) No change.

~~(2) Foster children over the age of 2 shall not share a bedroom with any person over the age of 18 in the home unless approved by the social work administrator or designee.~~

~~(3)~~ (2) Foster children shall not share a bed with any other child. The social work administrator may approve a waiver of this policy.

~~b.~~ Foster parents shall have a designated bedroom. Children 2 years of age or older shall be provided bedroom space other than in the foster parents' bedroom. Foster children under the age of 2 may share a bedroom with the foster parent.

~~c.~~ There shall be ~~provisions a plan~~ for isolating ~~from other healthy children;~~ from a child who is ill or suspected of having a contagious disease.

~~d.~~ No change.

~~e.~~ Linens shall be changed at least weekly and more frequently for children with bladder or bowel control problems. Bedding shall be clean, odor-free, and free of urine and feces.

~~f.~~ Waterproof mattress covers shall be provided for children under three years of age and for any child who lacks bowel or bladder control.

~~g.~~ Individual space shall be provided for the child's clothes and personal possessions.

~~h.~~ f. Foster parents shall follow universal precautions to reduce exposure to bloodborne pathogens and other infectious materials when providing care to all children placed in their physical custody.

~~i.~~ Children under the age of 1 year shall be placed on their backs when sleeping unless otherwise authorized in writing by a physician.

~~j.~~ g. Smoking and vaping shall be prohibited in the foster home or any vehicle when the foster child is present.

ITEM 18. Amend paragraph **113.5(10)“a”** as follows:

~~a.~~ The heating plant shall have a capacity to maintain a temperature of approximately 65 degrees Fahrenheit: in the bedrooms with the door closed.

~~(1)~~ At a point 24 inches from the floor during the day in severe weather, and

~~(2)~~ In the bedrooms with the door closed.

ITEM 19. Amend rule 441—113.6(237) as follows:

441—113.6(237) Sanitation, water, and waste disposal.

113.6(1) Food preparation and storage. Food preparation areas shall be clean, and there shall be facilities to store perishable food at cold temperatures and storage areas for other nonperishable food supplies.

~~113.6(2) Milk supply.~~ Fluid or powdered milk sufficient to meet the needs of the foster child shall be provided.

~~113.6(3)~~ **113.6(2) Public water supply.** The water supply is approved when the water is obtained from a public water supply system.

~~113.6(4)~~ **113.6(3) Private water supply.**

~~a.~~ Each privately operated water supply shall be ~~annually checked~~ tested prior to initial licensure and tested before license renewal, and evaluated for obvious deficiencies such as open or loose well tops or platforms and poor drainage around the wells.

~~b. to d.~~ No change.

~~e.~~ When the water sample is not approved, no foster family home license shall be issued until the foster parents provide a written statement that foster children will be provided potable water, including where the water will be obtained, and how it will be transported and stored.

~~(1)~~ No change.

~~(2)~~ Annual When the family has made ongoing alternative arrangements for the use of safe, potable water, annual testing of the water may be waived after the private water supply has tested unpotable for three consecutive years when the family has made ongoing alternative arrangements for the use of safe, potable water.

~~113.6(5)~~ **113.6(4) Sewage treatment.**

~~a. and b.~~ No change.

~~113.6(6)~~ **113.6(5) Garbage storage and disposal.**

a. and b. No change.

This rule is intended to implement Iowa Code section 237.3.

ITEM 20. Amend rule 441—113.7(237) as follows:

441—113.7(237) Safety.

113.7(1) Fire protection for bedrooms. Any floor of a house, including the basement, ~~used for the sleeping of foster children~~ shall be equipped with the following:

a. A working smoke detector. On floors that are used for sleeping, the smoke detector shall be in a location where sleeping areas can be alerted. For hearing-impaired children, the foster parent shall install a smoke detector in the child's bedroom that will use an alternative means of waking the child.

b. and c. No change.

113.7(2) No change.

113.7(3) Safety plan. The family shall have an emergency safety plan to be used ~~in case of~~ for fire, tornado, blizzard, flood, other natural or manmade disasters, accidents, medical issues, and other life-threatening situations for children in out-of-home placements. The safety plans shall state the action that the foster parents and children are to take in each situation that may occur.

a. ~~Safety~~ The safety plans for fire and tornadoes shall be documented and reviewed with foster children at the time of placement and. Fire and tornado plans shall be practiced with the foster children throughout the year within one week of placement and no less than annually thereafter.

b. ~~In the case of~~ a disaster requiring evacuation of the foster home, the foster parents shall notify the department of the evacuation and the address and telephone number of the foster parents' temporary residence within ~~48~~ 24 hours after evacuation.

c. No change.

113.7(4) Medications and poisonous substances. All ~~prescription~~ medications and poisonous, toxic, or otherwise unsafe substances shall be kept ~~in a locked storage container out of the reach of~~ secured from access by children.

a. All prescription medication shall be administered as prescribed and documented in a ~~prescription~~ medication log that is given to the child's department caseworker when the child leaves the placement.

b. No change.

113.7(5) Weapons. All weapons, firearms, and ammunition shall be inaccessible to a child of any age.

a. and b. No change.

c. The weapons, firearms, and ammunition storage unit shall not share the same key or matching security code. If a key is used, the key shall be stored in a place inaccessible to the foster child.

~~e.~~ d. Any motor vehicles used to transport foster children shall not contain a loaded gun, and any ammunition in the vehicle shall be kept in a separate, locked container.

~~d.~~ e. Foster parents who have a permit to carry a firearm shall sign Form 470-4657, Firearms Safety Plan. Foster parents who have firearms but do not have a permit to carry shall complete the safety plan section of the Firearms Safety Plan form.

113.7(6) No change.

113.7(7) Supervision. The foster parents shall provide reasonable and prudent supervision of foster children to ensure their safety.

a. Foster parents shall ~~reasonably~~ adequately supervise foster children while the children are using any hazardous or dangerous objects or equipment. In order for foster children to participate in age- or developmentally appropriate activities, the foster parent would apply the reasonable and prudent parent standard.

b. Foster parents shall ~~monitor~~ use reasonable and prudent supervision of foster children ~~while they~~ when the foster children are using the Internet or other social media.

113.7(8) Household pets. Household pets and any outdoor animals or pets accessible to foster children shall have a current veterinary health certificate verifying that the ~~animal has had routine~~

vaccinations that are required by local ordinance animal's routine immunizations, e.g., rabies, are current.

a. At the time of the initial home study and any time thereafter, foster parents shall report an animal's history of aggression towards people and inform the department of the animal's aggression towards people within 24 hours of an occurrence.

b. Foster parents who have pets or animals with any history of aggression shall have a written plan that addresses strategies to reduce the risk of aggression by their pets or animals with which the child will have contact.

c. Animal waste will be contained and disposed of on a routine basis.

113.7(9) No change.

This rule is intended to implement Iowa Code section 237.3.

ITEM 21. Amend rule 441—113.8(237) as follows:

441—113.8(237) Foster parent training.

113.8(1) Preservice training. All foster parent applicants shall complete the following training before licensure and the placement of a child in foster care in their home:

a. Orientation pursuant to rule 441—117.2(237); and

b. Preservice training pursuant to rule 441—117.1(237);

c. Preservice training, which shall include:

(1) An agency-approved medication management training,

(2) A face-to-face cardiopulmonary resuscitation (CPR) and first-aid training,

(3) Mandatory reporter training on child abuse identification, and

(4) The reasonable and prudent parent standard training; and

d. Mandatory reporter training on child abuse identification and reporting before initial licensure and every five years thereafter as required by rule 441—112.10(232) and 441—subrule 117.8(3).

113.8(2) In-service training. All licensed foster parents shall complete six hours of in-service training annually as required by rule 441—117.7(237).

~~a. All Each foster parents parent shall complete training in medication management, cardiopulmonary resuscitation, first aid, and the reasonable and prudent parent standard in their first year of licensure as required by rule 441—117.8(237) maintain certification in CPR and first-aid training.~~

~~b. All licensed foster parents shall complete mandatory reporter training on child abuse identification and reporting in their first year of licensure and every five years thereafter as required by rule 441—112.10(232) and 441—subrule 117.8(4).~~

This rule is intended to implement Iowa Code section 237.5A.

ITEM 22. Amend rule 441—113.10(237) as follows:

441—113.10(237) Information on the foster child.

~~**113.10(1) Initial information.** Rescinded IAB 7/29/09, effective 10/1/09.~~

113.10(2) 113.10(1) Foster child information. Foster parents shall maintain a separate folder of information on each foster child placed in the foster family home. This folder shall be provided to the department or the child's parent or guardian when the child leaves the placement. The folder shall contain:

~~a. Names The names and addresses of all doctors, mental health professionals, and dentists who have treated the foster child; current medications prescribed, including over-the-counter medications; medication log; and the type of treatment medical, dental, vision, and mental health treatments and hearing examinations received while the foster child is in the foster home.~~

~~b. to d. No change.~~

~~**113.10(3) 113.10(2) Confidentiality.** Foster parents shall maintain confidentiality regarding a child in placement except as required to comply with rules on mandatory reporting of child abuse and with~~

the child's case permanency plan. Foster parents shall not without parent or guardian and department consent post pictures or information concerning a foster child on any Internet Web site or on social media.

This rule is intended to implement Iowa Code section 237.7.

ITEM 23. Amend rule 441—113.11(237) as follows:

441—113.11(237) Health of foster family.

113.11(1) Health report required. The foster parents shall furnish the licensing agency with a health report on the family completed no more than six months before the application for licensure. The report shall include information on all family members, including foster parents, their minor children who reside in the home, and adult household members. An updated report shall be provided upon request of the department licensing worker or the recruitment and retention contractor.

113.11(2) No change.

113.11(3) Capability for caring for the child. If there is evidence that the foster parent is unable to provide necessary care for the child, the department licensing worker, the recruitment and retention contractor, or the physician may require additional medical and mental health reports, including a substance abuse evaluation.

This rule is intended to implement Iowa Code section 237.7.

ITEM 24. Amend subrule 113.12(5) as follows:

113.12(5) Personal characteristics. The foster parents shall:

- a. Provide evidence of ~~marital adjustment and~~ relationship stability.
- b. to g. No change.
- h. Ensure that all family members are aware of ~~and in agreement with~~ having foster children in the home.
- i. Articulate their strengths and concerns and limitations which are essential to the department's matching the foster children with foster parents appropriately.

ITEM 25. Amend subrule 113.12(6) as follows:

113.12(6) Determination of characteristics. The areas discussed in subrules 113.12(4) and 113.12(5) shall be explored through observation of the family and interviews with family members and documented in a foster home study as described in subrule 113.3(4), or in the foster family record when explored after licensure and prior to renewal. Any additional areas that the family or worker identifies as a possibility for creating problems shall also be documented in the foster family record.

ITEM 26. Amend rule 441—113.13(237) as follows:

441—113.13(237) Record checks. Record checks are required for each foster parent applicant and for anyone who is 14 years of age or older living in the home of the applicant. The purpose of the record checks is to determine whether any of these persons has any founded child abuse reports or criminal convictions or has been placed on the sex offender registry.

113.13(1) Procedure. The department's contractor for the recruitment and retention of resource families shall assist applicants in completing required record checks, including fingerprinting.

a. *Iowa records.* Each foster parent applicant and anyone who is 14 years of age or older living in the home of the applicant shall be checked for records with:

- (1) The Iowa central abuse registry, using Form 470-0643, Request for Child and Dependent Adult Abuse Information;
- (2) The Iowa division of criminal investigation, using Form 595-1396, DHS Criminal History Record Check, Form B; ~~and~~
- (3) The Iowa sex offender registry; and
- (4) Iowa Courts Online.

b. *Other records.*

- (1) No change.
- (2) Each foster parent applicant shall also be fingerprinted for a national criminal history check. ~~Other adults living in the home may be fingerprinted if the department determines that a national criminal~~

~~history check is warranted.~~ Fingerprinting, for the purpose of a national criminal history check, is required on all other adult household members at the time of initial application effective with applications dated on or after October 1, 2011. When warranted, the department may require fingerprinting for a national criminal history check on adult household members who move in after initial application.

113.13(2) Evaluation of record. If the applicant or anyone living in the home has a record of founded child or dependent adult abuse, a criminal conviction, or placement on the sex offender registry, the department shall not license the applicant as a foster family unless an evaluation determines that the abuse or criminal conviction does not warrant prohibition of license.

a. Exclusion. An evaluation shall not be performed if the person has been convicted of:

(1) No change.

(2) A crime in another state that would be a felony as set forth in Iowa Code section 237.8(2) “a”(4) ~~if the crime were committed in Iowa.~~

b. Scope. The evaluation shall consider the nature and seriousness of the founded child or dependent adult abuse or crime in relation to:

(1) to (5) No change.

c. Evaluation form. The person with the founded child or dependent adult abuse or criminal conviction report shall complete and return Form 470-2310, Record Check Evaluation, within ten calendar days of the date of receipt to be used to assist in the evaluation. Failure of the person to complete and return Form 470-2310 within the specified time frame shall result in denial of licensure.

113.13(3) Evaluation decision. The service area manager or designee shall conduct the evaluation and make the decision. The department shall issue ~~Form 470-2386, Record Check Decision Form 470-2310, Record Check Evaluation,~~ to ~~explain~~ inform the subject of the decision and describe the basis of the decision reached regarding the evaluation of an abuse or a crime, using the criteria specified in paragraph 113.13(2) “b.” The department shall mail the form to the person on whom the evaluation was completed:

a. and b. No change.

113.13(4) No change.

This rule is intended to implement Iowa Code section 237.8(2).

ITEM 27. Amend rule 441—113.14(237) as follows:

441—113.14(237) Reference checks.

113.14(1) to 113.14(3) No change.

113.14(4) Reference checks shall include only those areas related to the applicant’s ability to care for children and should include discussion of the following areas:

a. and b. No change.

c. ~~Marital adjustment and~~ Relationship stability.

d. to g. No change.

113.14(5) When warranted, additional references may be sought after licensure.

This rule is intended to implement Iowa Code section 237.3.

ITEM 28. Amend rule 441—113.15(237) as follows:

441—113.15(237) Unannounced visits.

113.15(1) to 113.15(3) No change.

113.15(4) The findings from the unannounced visit shall be summarized on ~~Form 470-4512, Unannounced Visit Report~~ Form 470-5438, Progress Notes.

a. and b. No change.

113.15(5) Actions after the unannounced visit.

a. When deficiencies are cited that do not appear likely to cause immediate physical or mental harm to the child, an additional visit may be scheduled. The department licensing worker and the recruitment and retention contractor shall discuss the deficiencies with the foster parents and make suggestions plans for improving the deficiencies.

b. When the reported deficiencies raise questions of concern as to the quality of care provided, the recruitment and retention contractor shall:

(1) No change.

(2) Hold a meeting with the department licensing worker and the foster parents to discuss deficiencies and ~~suggestions~~ the plans for improving the deficiencies and then complete a written corrective action plan as to how the foster parents intend to address the deficiencies.

c. No change.

113.15(6) No change.

This rule is intended to implement Iowa Code section 237.7.

ITEM 29. Amend paragraph **113.16(2)“d”** as follows:

d. Clothing shall be becoming, of proper size, and ~~of the character usually worn by children in the community~~ culturally appropriate.

ITEM 30. Amend rule 441—113.17(237) as follows:

441—113.17(237) Medical examinations and health care of the child.

~~113.17(1) Physical examinations. Rescinded IAB 3/11/09, effective 5/1/09.~~

~~113.17(2) 113.17(1) Medical and dental supervision care. Each child shall be under regular medical and dental supervision. Foster parents shall keep the supervising worker child’s department case manager informed of any health problems medical and dental appointments and treatments prescribed for the child. In case of sickness or accident, immediate medical care shall be secured for the child in accordance with the supervising worker’s directions given at the time of placement.~~

a. Foster parents shall contact the child’s parents to engage them in the process of accessing routine medical and dental care for their child unless parental rights have been terminated.

b. In case of an emergency or urgent situation requiring medical care and treatment of an acute illness, disease or condition of a child, when a delay or inability to access parental or department consent for medical care or treatment would endanger the health or physical well-being of the child, the foster parents can provide consent for medical care and treatment.

~~113.17(3) 113.17(2) Exemption from medical care. Nothing in this rule shall be construed to require medical treatment or immunization for a minor child of any person who is a member of a church or religious organization which is against medical treatment for disease. In such instance, an official statement from the organization and a notarized statement from the parents shall be incorporated in the record. In potentially life-threatening situations, the child’s care shall be referred to appropriate medical and legal authorities.~~

This rule is intended to implement Iowa Code section 237.3.

ITEM 31. Amend rule 441—113.18(237) as follows:

441—113.18(237) Training and discipline of foster children.

~~113.18(1) Foster parents’ methods of training and discipline. The home study evaluation of the each foster parent applicant shall include a discussion and a written report of the foster parents’ methods of training and discipline. Discipline shall be designed to help the child develop self-control, self-esteem, and respect for the rights of others.~~

~~113.18(2) Restrictions on training and discipline. Child training and discipline shall be handled with kindness and understanding.~~

~~a. to d. No change.~~

~~e. Restraints shall not be used as a form of discipline.~~

~~(1) No change.~~

(2) Upon approval of the department, the foster parent shall receive training on the safe and appropriate use of restraints which has been approved as a part of the treatment plan by a licensed practitioner of the healing arts who is working with the child may use restraints only in accordance with the written plan of a licensed mental health professional who is working with the child and the foster parents.

113.18(3) Reports of mistreatment. Reports of mistreatment coming to the attention of the ~~supervising worker~~ department licensing worker and caseworker for the foster child shall be investigated promptly and referred to the proper authorities when necessary.

This rule is intended to implement Iowa Code sections 234.40 and 237.3.

ITEM 32. Amend rule 441—114.1(237) as follows:

441—114.1(237) Applicability. This chapter outlines the basic standards for all group living foster care facilities and contains the basic standards applicable to community residential facilities for children. Additional standards applicable to specific levels of group living are discussed in 441—Chapter 115, “Licensing and Regulation of Comprehensive Residential Facilities for Children,” and 441—Chapter 116, “Licensing and Regulation of Residential Facilities for ~~Mentally Retarded~~ Children with an Intellectual Disability.”

This rule is intended to implement Iowa Code chapter 237.

ITEM 33. Amend **441—Chapter 116**, title, as follows:

LICENSING AND REGULATION OF RESIDENTIAL FACILITIES
FOR ~~MENTALLY RETARDED~~ CHILDREN WITH AN INTELLECTUAL DISABILITY

ITEM 34. Amend rule 441—116.1(237) as follows:

441—116.1(237) Applicability. This chapter relates specifically to the licensing and regulation of residential facilities serving ~~mentally retarded~~ children with an intellectual disability. Refer to 441—Chapter 112 for basic licensing and regulation of all foster care facilities, 441—Chapter 114 for definitions and minimum standards for all group living foster care facilities, including community care facilities, and 441—Chapter 115 for definitions and standards for comprehensive residential facilities for children. Chapters 112 and 114 apply to community residential facilities for ~~mentally retarded~~ children with an intellectual disability and Chapters 112, 114 and 115 apply to comprehensive residential facilities for ~~mentally retarded~~ children with an intellectual disability with the exception of the areas discussed specifically in this chapter.

This rule is intended to implement Iowa Code chapter 237.

ITEM 35. Amend rule **441—116.2(237)**, definitions of “Community residential facility for mentally retarded children” and “Comprehensive residential facility for mentally retarded children,” as follows:

“*Community residential facility for ~~mentally retarded~~ children with an intellectual disability*” means a community residential facility as defined in rule 441—114.2(237) which serves children ~~who meet the definition of mentally retarded~~ with an intellectual disability as defined in Iowa Code chapter 222.

“*Comprehensive residential facility for ~~mentally retarded~~ children with an intellectual disability*” means a comprehensive residential facility as defined in rule 441—115.2(237) which serves children ~~who meet the definition of mentally retarded~~ with an intellectual disability as defined in Iowa Code chapter 222.

ITEM 36. Adopt the following **new** subrule 117.1(4):

117.1(4) Additional preservice training. Before licensure, each foster parent shall complete training in an agency-approved medication management course, cardiopulmonary resuscitation (CPR), first aid, the reasonable and prudent parent standard, and the mandatory reporter training on child abuse identification.

ITEM 37. Amend rule 441—117.7(237), introductory paragraph, as follows:

441—117.7(237) Required in-service training. ~~Training is~~ At least six hours of in-service training are required to assist foster parents in confidently and effectively addressing the needs of children placed in foster care. The Foster Parent Training Plan, Form 470-3341, shall be used to address in-service training needs. The training plan shall be developed with the department or retention and recruitment contractor and the foster parent ~~at annual licensing renewal~~ annually.

ITEM 38. Amend subrule 117.7(3) as follows:

117.7(3) Foster parent training requirements. Each individual foster parent shall complete six credit hours of department-approved in-service training annually when the foster parent has an approved one-year license or an approved two-year license. Failure to meet the requirement for in-service training hours will result in denial of the license renewal.

a. Training cycle. ~~“Annually” means within the annual training cycle as described in this paragraph.~~

~~(1) Initial license.~~ For a newly licensed foster parent, the initial training cycle shall be the 10-month period ending 2 months before the license expires. ~~EXAMPLE: The initial training cycle for a new license effective June 1 is June 1 through March 31.~~

~~(2) a. Renewal license.~~ *Renewal license.* For a one-year license renewal, ~~the each foster parent shall complete six hours of annual in-service training cycle shall be within the 12-month period beginning 2 months before the expiration of the previous license and ending 2 months before the expiration of the subsequent license on the effective date of the foster parent’s renewal license. EXAMPLE: The training cycle for a license effective June 1 would be April 1 through March 31 of the subsequent year. For a two-year license renewal, the each foster parent shall complete six hours of in-service training eyele for the first within the 12 months of the first license year shall be the 12-month period beginning 2 months before the expiration of the previous license year and ending 10 months after beginning on the effective date of the two-year license renewal. The annual training cycle for For the second year of a two-year license shall be the 12-month period beginning 11 months after the effective date of the first year of the license and ending 2 months before the expiration of the license renewal, each foster parent shall complete six hours of in-service training within the 12 months of the second year of the two-year license renewal.~~

b. Content. The choice of in-service training shall be based upon an assessment of the foster parent’s training needs made by the foster parent and the recruitment and retention contractor in collaboration with the department licensing worker.

(1) No change.

(2) At least three credit hours of the annual six hours of in-service training shall be group training.

(3) ~~Except for the classes for the mandatory reporters reporter training on child abuse identification class, cardiopulmonary resuscitation, and first aid, training credit will not be allowed for any in-service training class that is repeated unless the class has been updated with new information.~~

c. No change.

ITEM 39. Amend rule 441—117.8(237) as follows:

441—117.8(237) Specific in-service training required.

~~**117.8(1) Medication management.** Within the initial training cycle, each individual foster parent shall complete one hour of training related to the use and practice of medication management.~~

~~*a.* Training shall be completed through the approved individual self-study course, “Medication Management.”~~

~~*b.* One hour of in-service training credit shall be allowed for completion of this self-study course. This course cannot be repeated for in-service training credit.~~

~~*c.* Foster parents who are already licensed on October 1, 2009, shall complete this training by October 1, 2010.~~

~~**117.8(2) 117.8(1) Cardiopulmonary resuscitation (CPR).** All foster parents shall be certified in CPR every three years and shall maintain their CPR certification and a certificate or card indicating the date of training and expiration. The training shall be provided by:~~

~~*a.* The training shall be provided by:~~

~~(1) *a.* A nationally recognized training organization, such as the American Red Cross, the American Heart Association, the National Safety Council, or Emergency Medical Planning (Medic First Aid), or~~

~~(2) *b.* An equivalent certified trainer and curriculum approved by the department.~~

~~b.~~—Newly licensed foster parents shall complete the training before the end of their initial training cycle. Foster parents who are already licensed on October 1, 2009, shall complete this training by October 1, 2010.

~~117.8(3)~~ **117.8(2)** *First aid.* All foster parents shall be certified in first aid at least every three years and shall maintain their first-aid certification and a certificate or card indicating the date of training and expiration. Newly licensed foster parents shall complete the training before the end of their initial training cycle. Foster parents who are already licensed on October 1, 2009, shall complete this training by October 1, 2010.

~~117.8(4)~~ **117.8(3)** *Child abuse reporting.* Each foster parent shall complete an approved mandatory child abuse reporter training every five years after the foster parent's initial preservice mandatory child abuse reporter training relating to the identification of child abuse and the requirements and procedures for the reporting of child abuse pursuant to Iowa Code section 232.68.

~~a.~~—*Training cycle.* Newly licensed foster parents shall complete mandatory reporter training before the end of their initial training cycle. The training shall be repeated every five years thereafter.

~~b.~~ a. *Training provider.* The foster parent shall be responsible for obtaining the required two-hour mandatory reporter training on child abuse identification and reporting as approved by the Iowa department of public health. A list of approved training opportunities is available on the Iowa department of public health Web site by searching “mandatory reporter training.”

~~e.~~ b. *Documentation.* The foster parent shall secure documentation of the training content, amount, and provider and shall forward the documentation to the recruitment and retention contractor, who will provide the documentation to the department for inclusion in the foster parent's licensing file.

~~117.8(5)~~ **117.8(4)** *Caring for children with HIV.* Before placement of an HIV-infected child occurs, the foster parents shall complete the course “Caring for Children With HIV” or an approved alternative course that contains information on the unique aspects of pediatric HIV disease, transmission and infection control, the spectrum of HIV disease, confidentiality, death and bereavement, and self-care for the caregiver.

~~117.8(6)~~ *Reasonable and prudent parent standard.* Before the end of the foster parent's initial license year, each foster parent shall complete training on the reasonable and prudent parent standard as defined in rule 441—202.1(234). Foster parents licensed before October 1, 2015, shall complete this training no later than September 30, 2016.

ITEM 40. Amend subrule 156.8(7) as follows:

156.8(7) *Respite care.* ~~The service area manager or designee may authorize respite~~ Respite care for a child in family foster care shall be for up to 24 days per calendar year per placement. ~~Respite~~ Except for a certified respite provider, respite shall be provided by a licensed foster family. The payment rate to the respite foster family shall be the rate authorized under rule 441—156.6(234) to meet the needs of the child. ~~Certified respite providers deliver foster child respite services in the foster family home for at least five hours a day at \$20 per day.~~

ITEM 41. Amend subrule 202.5(3) as follows:

202.5(3) The child shall have a physical examination by a physician, advanced registered nurse practitioner, or a physician assistant before the initial placement ~~in~~ into foster care, or the physical examination shall be scheduled within 14 calendar days of placement. The physician, advanced registered nurse practitioner, or a physician assistant 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 other community health resource.

[Filed 6/14/17, effective 9/1/17]

[Published 7/5/17]

EDITOR'S NOTE: For replacement pages for IAC, see IAC Supplement 7/5/17.