

# HOUSE BILL REPORT

## HB 3039

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**As Reported by House Committee On:**  
Children & Family Services

**Title:** An act relating to evaluation for identification of long-term needs of children entering the foster care system.

**Brief Description:** Extending the period for evaluation for identification of long-term needs of children entering the foster care system.

**Sponsors:** Representatives Delvin, Boldt, Kagi and Kenney.

**Brief History:**

**Committee Activity:**

Children & Family Services: 2/2/04, 2/4/04 [DPS].

**Brief Summary of Substitute Bill**

- The period of time within which all children entering the foster care system must be evaluated for identification of long-term needs is extended to within 45 days of placement for the evaluation of medical and educational needs.

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### HOUSE COMMITTEE ON CHILDREN & FAMILY SERVICES

**Majority Report:** The substitute bill be substituted therefor and the substitute bill do pass. Signed by 9 members: Representatives Kagi, Chair; Darneille, Vice Chair; Boldt, Ranking Minority Member; Roach, Assistant Ranking Minority Member; Bailey, Dickerson, Miloscia, Pettigrew and Shabro.

**Staff:** Cynthia Forland (786-7152).

**Background:**

The Secretary of the Department of Social and Health Services (DSHS) is required to conduct an evaluation of all children within the foster care agency caseload to identify those children who are likely to need long-term care or assistance because they face physical, emotional, medical, mental, or other long-term challenges. In addition, all children entering the foster care system must be evaluated for identification of long-term needs within 30 days of placement.

In response to this evaluation requirement, the Children's Administration of the DSHS has implemented a standardized, validated approach, known as Kidscreen, to assessing children in foster care within the first 30 days of placement. Kidscreen consists of screening in five life domains: physical/medical, developmental, family/social, educational, and emotional/behavioral. For children placed from January 1, 2003 through April 30, 2003, the average number of days to complete a Kidscreen was 45 days.

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**Summary of Substitute Bill:**

The period of time within which all children entering the foster care system must be evaluated for identification of long-term needs is extended to within 45 days of placement for the evaluation of medical and educational needs.

**Substitute Bill Compared to Original Bill:**

The extension of the period of time to within 45 days of placement, within which all children entering the foster care system must be evaluated for identification of long-term needs, is limited to the evaluation of medical and educational needs.

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**Appropriation:** None.

**Fiscal Note:** Not requested.

**Effective Date of Substitute Bill:** The bill takes effect 90 days after adjournment of session in which bill is passed.

**Testimony For:** (Original bill) By extending the length of time within which Kidscreen must be conducted, the bill will improve the ability of the DSHS to conduct quality screenings and to have more complete information on children. The DSHS has completed 80 percent of the required Kidscreens for children placed from September 2001 through January 2004. The DSHS has worked very hard on completing Kidscreens. Gathering medical and educational information has been particularly difficult. Many children will go home within the first two weeks, so many workers wait to start the Kidscreen. The DSHS has made efforts to correct that.

(With concerns) We understand the challenges, but we have already seen some delays in getting Kidscreens underway. We are very concerned about 45 days turning into 55 or 60 days. Even for those children who are returned home early on, any information collected will be helpful for those children and families. An extension limited to medical and educational information could alleviate some of these concerns.

**Testimony Against:** None.

**Persons Testifying:** (In support) LaVerne Lamoreux, Children's Administration of the Department of Social and Health Services.

(With concerns) Laurie Lippold, Children's Home Society.

**Persons Signed In To Testify But Not Testifying:** None.