

**2023 HOUSE HUMAN SERVICES**

**HB 1534**

# 2023 HOUSE STANDING COMMITTEE MINUTES

## Human Services Committee Pioneer Room, State Capitol

HB 1534  
1/23/2023

Relating to waiver of certain adoption requirements for licensed foster care providers.

Chairman Weisz called the meeting to order at 9:49 AM.

Chairman Robin Weisz, Vice Chairman Matthew Ruby, Reps. Karen A. Anderson, Mike Beltz, Clayton Fegley, Kathy Frelich, Dawson Holle, Carrie McLeod, Todd Porter, Brandon Prichard, Karen M. Rohr, Jayme Davis, and Gretchen Dobervich present. Rep. Kiefert not present.

### **Discussion Topics:**

- Simplification of adoption process
- Long-term stability of foster homes
- Foster home study
- Permanency plan
- Family's ability to support children in the case of difficulties or disruptions

Rep. Prichard introduced HB 1534 with supportive testimony (#15307).

Bailey Grainer, foster parent and North Dakota citizen, spoke in support of bill.

Tasha Gorentz, foster parent and North Dakota citizen from Bottineau, spoke in support of bill.

Cory Pederson, Director of the Children and Family Services Section with the Department of Health and Human Services, opposition testimony (#15458) (#15171).

### **Additional written testimony:**

Melissa Anderson, foster parent and North Dakota citizen, supportive testimony (#15345).

Chairman Weisz adjourned the meeting at 10:06 AM.

*Phillip Jacobs, Committee Clerk*

# 2023 HOUSE STANDING COMMITTEE MINUTES

## Human Services Committee Pioneer Room, State Capitol

HB 1534  
2/14/2023

Relating to waiver of certain adoption requirements for licensed foster care providers.

Chairman Weisz called the meeting to order at 9:15 AM.

Chairman Robin Weisz, Vice Chairman Matthew Ruby, Reps. Karen A. Anderson, Mike Beltz, Clayton Fegley, Kathy Frelich, Dawson Holle, Dwight Kiefert, Carrie McLeod, Todd Porter, Brandon Prichard, Karen M. Rohr, Jayme Davis, and Gretchen Dobervich. All present.

### Discussion Topics:

- Committee work
- Amendment (23.0752.01001)
- Adoption home study
- Length of adoption process
- State social services
- Long-term foster parents

Representative Prichard proposed amendment to (23.0752.01001) to HB 1534.

Representative Prichard moved to adopt amendment (23.0752.01001) to HB 1534.

Seconded by Representative Kiefert.

### Roll Call Vote:

Representatives	Vote
Representative Robin Weisz	Y
Representative Matthew Ruby	Y
Representative Karen A. Anderson	Y
Representative Mike Beltz	N
Representative Jayme Davis	N
Representative Gretchen Dobervich	N
Representative Clayton Fegley	Y
Representative Kathy Frelich	Y
Representative Dawson Holle	Y
Representative Dwight Kiefert	Y
Representative Carrie McLeod	Y
Representative Todd Porter	Y
Representative Brandon Prichard	Y
Representative Karen M. Rohr	Y

Motion carries 11-3-0.

Cory Pederson, answered questions from the committee.

Christopher Dodson, Executive Director for the North Dakota Catholic Conference, answered questions from the committee.

Representative Prichard moved a DO PASS as amended on HB 1534.

Seconded by Representative Rohr.

Roll Call Vote:

<b>Representatives</b>	<b>Vote</b>
Representative Robin Weisz	N
Representative Matthew Ruby	Y
Representative Karen A. Anderson	Y
Representative Mike Beltz	N
Representative Jayme Davis	N
Representative Gretchen Dobervich	N
Representative Clayton Fegley	Y
Representative Kathy Frelich	Y
Representative Dawson Holle	Y
Representative Dwight Kiefert	Y
Representative Carrie McLeod	Y
Representative Todd Porter	N
Representative Brandon Prichard	Y
Representative Karen M. Rohr	Y

Motion carries 9-5-0.

Bill carrier Representative Prichard.

Chairman Weisz adjourned the meeting at 9:55 AM.

*Phillip Jacobs, Committee Clerk By: Leah Kuball*

HA  
2-14-23

PROPOSED AMENDMENTS TO HOUSE BILL NO. 1534

Page 2, line 7, after the period insert "An adoptive home is suitable if, in the manner prescribed by the department, the petitioner is a licensed, certified, or approved family foster home for children."

Page 2, line 8, after "investigation" insert ", which may include the petitioner's foster care assessment to demonstrate the suitability of the adoptive home."

Page 2, line 19, remove "or a foster care provider licensed under section 50-11-01"

Renumber accordingly

**REPORT OF STANDING COMMITTEE**

**HB 1534: Human Services Committee (Rep. Weisz, Chairman)** recommends **AMENDMENTS AS FOLLOWS** and when so amended, recommends **DO PASS** (9 YEAS, 5 NAYS, 0 ABSENT AND NOT VOTING). HB 1534 was placed on the Sixth order on the calendar.

Page 2, line 7, after the period insert "An adoptive home is suitable if, in the manner prescribed by the department, the petitioner is a licensed, certified, or approved family foster home for children."

Page 2, line 8, after "investigation" insert ", which may include the petitioner's foster care assessment to demonstrate the suitability of the adoptive home."

Page 2, line 19, remove "or a foster care provider licensed under section 50-11-01"

Renumber accordingly

**2023 SENATE HUMAN SERVICES**

**HB 1534**

# 2023 SENATE STANDING COMMITTEE MINUTES

**Human Services Committee**  
Fort Lincoln Room, State Capitol

HB 1534  
3/21/2023

Relating to waiver of certain adoption requirements for licensed foster care providers.

10:52 AM **Madam Chair Lee** called the hearing to order. **Senators Lee, Cleary, Clemens, K. Roers, Weston, and Hogan** are present.

## **Discussion Topics:**

- Home study
- Adoption process
- Foster care process

10:52 AM **Representative Brandon Prichard** introduced HB 1534 and testified in favor #25119

11:04 AM **Bailie Graner, foster parent**, testified in favor. #25323

11:14 AM **Tasha Gorentz, foster parent** testified online in favor. #25947

11:23 AM **Cody Gorentz, foster child**, testified online in favor. #25948

11:27 AM **Cory Pedersen, Director of the Children and Family Services Section, Department of Health and Human Services**, testified in opposition. #26001, #26104

11:35 AM **Kimberly Jacobson, Zone Director, Agassiz Valley Human Service Zone**, testified in opposition. #25255

11:40 AM **Christopher Dodson, Executive Director, North Dakota Catholic Conference**, testified in opposition. #28016

11:46 **Christina Sambor, Attorney at Law**, proposed an amendment neutral. #25349

## **Additional Testimony:**

**Susan Grundysen, Program Director for Adoption Services, The Village Family Service Center** in opposition #23928

**Jean Nasers, Interim Director, Christian Adoption Services** in opposition #23818

**Cassidy Lyngaas** in favor #25194

11:58 PM **Madam Chair Lee** adjourned the hearing.

*Patricia Lahr, Committee Clerk*



# 2023 SENATE STANDING COMMITTEE MINUTES

Human Services Committee  
Fort Lincoln Room, State Capitol

HB 1534  
3/27/2023

Relating to waiver of certain adoption requirements for licensed foster care providers.

4:40 PM **Madam Chair Lee** called the meeting to order. **Senators Lee, Clemens, K. Roers, Weston, and Hogan** were present. **Senator Cleary** was absent.

### Discussion Topics:

- Home study
- Adoption process
- Foster care process

**Senator Lee** calls for discussion.

4:44 PM **Christina Sanborn, Attorney at Law**, provided information verbally.

4:49 PM **Cory Pedersen, Children and Family Services Director, ND Department of Health and Human Services**, provided information verbally.

**Senator Hogan** moved **DO NOT PASS**.  
**Senator K. Roers** seconded the motion.

Roll call vote.

Senators	Vote
Senator Judy Lee	Y
Senator Sean Cleary	AB
Senator David A. Clemens	Y
Senator Kathy Hogan	Y
Senator Kristin Roers	Y
Senator Kent Weston	Y

Motion passed. 5-0-1.

**Senator Hogan** will carry HB 1534.

### Additional Written Testimony:

**Becky Graner** neutral #26785

**Cory Pedersen** neutral #26786

4:57 PM **Madam Chair Lee** adjourned the meeting.

*Patricia Lahr, Committee Clerk*

**REPORT OF STANDING COMMITTEE**

**HB 1534, as engrossed: Human Services Committee (Sen. Lee, Chairman)** recommends **DO NOT PASS** (5 YEAS, 0 NAYS, 1 ABSENT AND NOT VOTING). Engrossed HB 1534 was placed on the Fourteenth order on the calendar. This bill does not affect workforce development.

**TESTIMONY**

**HB 1534**

**Testimony**  
**House Bill No. 1534**  
**House Human Services Committee**  
**Representative Weisz , Chairman**  
January 23, 2023

Chairman Weisz, and members of the House Human Services Committee, I am Cory Pedersen, Director of the Children and Family Services Section with the Department of Health and Human Services (Department). I appear before you in opposition to House Bill 1534 and ask the committee to give it a do not pass recommendation.

The Department through its Children and Family Services Section (CFS) has been facilitating a work group to discuss the need to offer efficiencies and better streamline the foster and adoption home study efforts. Adults Adopting Special Kids (AASK), the Department's contracted vendor, together with the CFS Adoption Administration and CFS Licensing Unit have been reviewing forms and eliminating duplicative processes wherever possible. What this work group has identified thus far is we often have two parallel processes working in tandem, conducting assessments through two different lenses. The first represents a temporary arrangement - foster care, and the second represents a lifetime commitment - adoption. Our experience tells us that this dual assessment impacts approximately 13% of the licensed foster care provider population.

Overall, adoption assessments are more comprehensive than the current foster care study process. In adoption we are looking to assess the family's ability to provide for the child's safety and well-being for a lifetime, without the supports of an agency that can step in if there are difficulties or if the placement destabilizes.

The "investigation" as referenced in chapter 14-15 of the North Dakota Century Code, and required for most adoption hearings, is more than an adoptive family home study. It provides not only information about the adoptive family, but also about the child and the birth family, and includes a narrative that summarizes the child's placement in the home and a formal recommendation by the agency for the finalization. All of this information is taken into consideration by the judge who is making the finalization decision.

The language proposed in House Bill 1534 will not change the requirement that the family complete background checks for adoption that are separate from foster care as that is a federal requirement of the FBI.

CFS Licensing Unit is less than one year old, and we are committed to continuing our efforts to identify areas where we can improve the process and streamline practices to be more efficient for our providers while balancing what is best for the children and their families who are served by this work.

This concludes my testimony, and I would be happy to answer any questions you may have.



# North Dakota House of Representatives

STATE CAPITOL  
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## Representative Brandon Prichard

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## COMMITTEES:

Human Services  
Agriculture

**House Bill 1534**  
**House Health and Human Services Committee**  
**Representative Weisz, Chairman**  
**January 23, 2023**

Chairman Weisz and members of the House Health and Human Services Committee,

My name is Rep. Brandon Prichard and I represent District 8 which covers all of Emmons County, rural and suburban portions of Burleigh County, and Wilton which is in McLean County. I am here to testify in support HB 1534 which would combine the home studies for foster care and the adoption process. The process of adoption should be easy if a licensed foster parent wants to take the next step and raise a child in the foster care program. This bill would streamline the process and encourage adoption for foster parents.

The home study is an evaluation of prospective adoptive families and of the physical and emotional environment into which a child would be placed. It consists of a series of interviews with a social worker, including at least one interview in the home. During this process, families will, with the social worker's assistance, consider all aspects of adoptive parenthood and identify the type of child they wish to adopt. Some agencies use a group approach to the educational part of this adoption preparation process because it creates a built-in support group among families. In North Dakota, families adopting children from foster care are trained through the Foster / Adopt PRIDE model - a training program that familiarizes families with the needs of these special children.

Many of the questions asked in the home study are personal. These questions are necessary for the social worker's evaluation of prospective parents. Some questions are about income, assets, and health and the stability of the marriage (if married) and/or family relationships. Physical exams to ensure that prospective parents are healthy are usually required. North Dakota requires prospective adoptive parents to undergo a fingerprint and background check to ensure that individuals do not have a felony conviction for domestic violence or child abuse. A home study is usually completed in a few months, depending upon the agency's requirements and the number of other clients.<sup>1</sup>

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<sup>1</sup> [Steps to Adoption: Adoption Program: Children and Family Services: Services: Department of Human Services: State of North Dakota](#)

Unlike adoptive home studies, the foster care studies a family for the temporary care of children while they are under the custody of the agency and have the full support of case management and other services. Upon conversations with the Department of Health and Human Services, adoption studies are slightly more comprehensive in nature and more global in their assessment of the family since they are recommending the family for a lifetime commitment to a child's safety and well-being. However, the redundancy is staggering, and few differences exist between the processes. In fact, the largest change between the adoptive process and the foster process is simply the time the adult(s) intend to care for the child.

Therefore, after speaking with foster parents around the State of North Dakota who have adopted children or who are working through the process, a common complaint has been the unnecessary repetitiveness behind the home studies. While opponents of this legislation would argue that the intended timeframe for holding a child differs between foster care and adoption, why should the state be allowing children in the foster system to stay with a foster parent who is unsafe? If we are allowing an individual or family to become licensed foster care providers, they should be trusted with a child regardless of the timeframe. The adoption process is long enough for perspective parents. We should not make it more complicated for foster families who have been through a almost verbatim process.

I would like to suggest a simple amendment to HB 1534. Upon discussions with the Department of Health and Human Services, I realized that a complete combination of the adoptive process with the foster process is not possible. In particular, the background check is a federal requirement by the Federal Bureau of Investigation. Including language in the bill about the requirement to complete the background check would comply with federal guidelines.

I encourage the Health and Human Service Committee to support foster families who want to adopt children in their care. I respectfully ask for the committee to support HB 1534 by giving the bill a "Do Pass" recommendation.

**Testimony**  
**House Bill No. 1534**  
**House Human Services Committee**  
**Representative Robin Weisz, Chairman**  
**January 23, 2023**

Chairman Weisz, members of the House Human Services Committee, I am Melissa Anderson, a licensed foster parent of 11 years and mother to (currently) 12 children who have joined our family through various means... biologically, foster care, adoption, and guardianship. I submit this testimony in support of House Bill 1534, which waives certain adoption requirements for licensed foster care providers.

To become a licensed foster parent, we undergo numerous steps to ensure that we are a safe, stable option for the children that will potentially be placed in our home. These steps include fingerprint background checks, references, trainings, and a home study, among other requirements. Each year after becoming licensed, we must renew our license by completing more paperwork that includes background checks, health questionnaires, financial forms, and more. A state licensing worker then visits our home where it is inspected closely. During this licensing home visit, we also sit down for a face-to-face interview.

When a child is placed in our home, our home becomes a revolving door to caseworkers who visit (at least) monthly, therapists of different specialties, as well as a Guardian ad Litem. These professionals become an extension of our family because they get to know us so well through the children we serve.

By the time a child is eligible for adoption, they have typically lived in their foster home for several months, or in some cases like ours, several years. Another background check and full investigation is not necessary — we submit to these every year already. We are currently waiting to finalize the adoption of our little girl. She is a sibling to our son that we adopted in 2016. She



has been with us since she was barely one. Today, she is just three months shy of six. The parental rights of her biological parents were terminated eight months ago, yet she is still not adopted because we must first submit a full investigation to the court. Being that she came to us first through a private agreement with her first parents, and then a legal guardianship through the courts, we received no financial assistance from the state. Every cost, was and will still be, paid out-of-pocket by us, including the costs associated with another investigative home study. We paid our own legal fees as we tried to keep her safe while she endured two traumatic reunification attempts, which totaled nearly \$30,000. We took her to weekly mental health therapy sessions throughout the process. We watched our happy, thriving little girl turn into a shell of herself, often emotional or withdrawn, all because the law says guardianships are meant to be temporary (that will be testimony for another time). I will never forget how my heart broke when her preschool teacher told us how our girl went from coloring beautiful, colorful pictures in class to using a black crayon and scribbling over the lines. When we were finally able to terminate rights last spring, we saw the smile come back to her face and the color return to her masterpieces.

Our daughter was adamant that she change her name, one can only guess that she wanted to put the trauma associated with it behind her. She started kindergarten last fall and wanted so badly to be adopted before school started so that she could use her chosen name. It didn't happen. She's able to use her new first name in her classroom but is reminded of the trauma every time we must go to an appointment or register her for an activity and still have to use her other name. She has been waiting to become an Anderson for months now, only because the court requires a full investigative study. She has been waiting for permanency now for 1,732 days. Please don't make her wait any longer.

I urge you pass HB 1534 to eliminate the investigative study requirement for licensed foster parents trying to adopt a child in their care. Please consider adding an emergency clause to bring this bill into law sooner rather than later. Thank you.



## CHILDREN & FAMILY SERVICES

Children and Family Services has been facilitating a work group to discuss the need to offer efficiencies and better streamline the foster and adoption home study efforts. Adults Adopting Special Kids (AASK), the Department's contracted service provider, along with CFS adoption administration and CFS Licensing Unit have been reviewing forms and eliminating duplicative practices wherever possible.

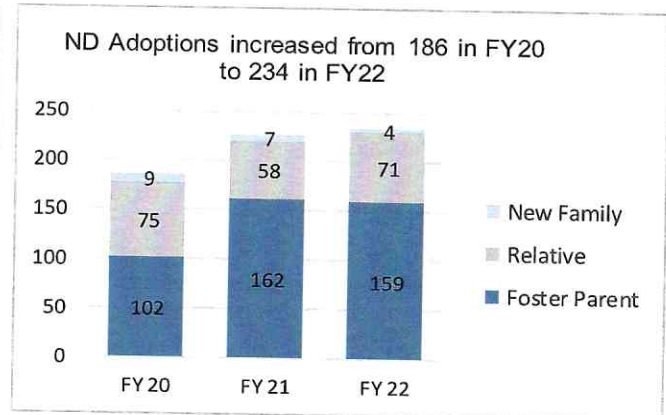
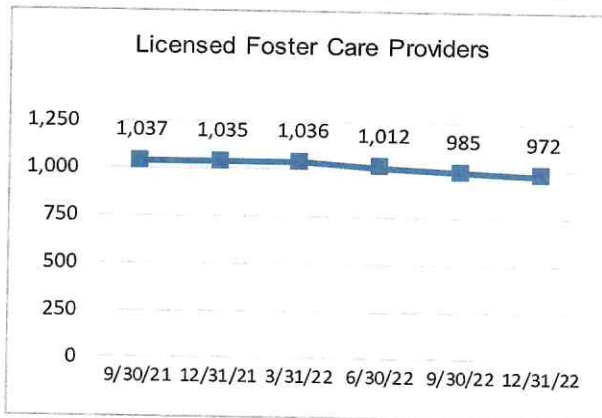
This group's work has made clear that there are two parallel processes that work in tandem to each other, both of which assess situations through a different lens. Foster care oriented assessments are focused on a situation that is meant to be temporary and Adoption assessments are meant to be for a lifetime. These **dual assessment** situations **impact approximately 13%** of licensed foster care providers.



### Licensed Providers Adopting ND Children in Foster Care

North Dakota Department of Health and Human Services (HHS) licenses approximately 1,000 family foster care providers; approximately 13% are later identified as an adoption option. The charts below show foster care licensure and adoption data over time.

In FY 2020, 186 adoptions were finalized; 55% (102) of the adoptive families were licensed foster care providers. In 2021, 71% (162) of the 227 finalized adoptions were licensed foster care providers. In FY 2022 68% (159) of the 234 finalized adoptions were by a licensed foster parent.



The work group will continue to balance its goals of streamlining processes and practices to optimize efficiency for the relatively small percentage of providers who engage in both the foster care and adoption processes and assuring appropriate consideration of the needs of children and families who are served by these processes.



**Testimony of Jean Nasers**  
**Interim Director of Christian Adoption Services**

**Before the North Dakota Senate Committee on Human Services on HB 1534**

**IN OPPOSITION**  
**February 23, 2023**

Thank you, Ms. Chairperson, and members of the Committee for providing the opportunity to submit written testimony in opposition of House Bill 1534. I am the interim director for Christian Adoption Services, a Licensed Child Placing Agency that has been in operation since 1985.

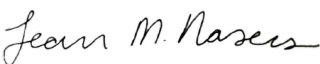
As adoption case workers, we take our work and the home study evaluation process very seriously because we are entrusted with the lives of children. Our work is life changing for everyone involved, but for the children it impacts every single part of their lives. Their past, present, and future will forever be changed by their adoption. Children cannot choose their parents and we are entrusted with their health, safety, and wellbeing when we evaluate families through the home study process.

The home study process is much more than just going through a series of steps and completion of paperwork. Each family is unique and has distinctive events, characteristics, histories, and traits that need to be discussed or approached differently throughout the home study process. The adoption process, in general, is very taxing and requires a good deal of emotional regulation and overall stability. The home study is the calmest part of the whole process because it is based on many things that are in the adoptive family's control. After the home study, everything is very uncertain: the waiting, being presented to expectant parents, being chosen, and matched with an expectant parent, having a match fall through, navigating a relationship with a birth family, and then transitioning from not having a child one day to suddenly having one the next. It is a roller coaster and filled with new things many of us have never had to even consider being prepared for.

This all being said, it is crucial that you understand that assessing a family for foster care versus adoption is very different. Families are trained, educated, and evaluated with different end goals in mind. The goal of foster care is always reunification. The goal of adoption is always permanency. The training and education surrounding foster care focuses on crisis intervention, short term stability, and therapeutic parenting. The training and education for adoption focuses on helping parents know how to support their adopted child throughout their life and how to have a long term, loving relationship with their child's birth family. The other unique piece that is not typically addressed or discussed in the foster care home study process is the impact a family has experienced from infertility. Infertility has left a mark on the hearts of many looking to grow their family through adoption. These families have a different level of grief that they must process before entering into adoption. Failure to address the impact infertility has had on a family before they are approved for adoption can have life long negative effects on them and, more importantly, their adoptive children.

At this time, I recommend an amendment to the current proposal that states: a Licensed Child Placing Agency may approve an existing foster care home study for adoption after the family has completed the additional required training, education, paperwork, meetings, and evaluations required by the LCPA. These studies are in place to protect the children that are entrusted to our care. With that in mind, please protect our children and do not support House Bill 1534 as it is currently written. Thank you for the opportunity to submit written testimony.

Sincerely,

  
 Jean M Nasers

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Chairperson Sen Lee, members of the Senate Human Services Committee and interested others. My name is Susan Grundysen. I am a licensed master social worker in ND, serving as the Program Director for Adoption Services offered by The Village Family Service Center, with a personal history of 37 years serving children and families, and an agency with a history of providing service to the most vulnerable throughout ND, dating back to 1891. I am submitting this written testimony today in opposition to HB 1534.

I am in opposition of the current bill, as outlined below:

- 1) Adoption is first and foremost about children. This bill seeks to make the process easier for adoptive families. While I understand the effort, I do not agree with the resulting impacts.
- 2) While I agree the FC and Adoption process are parallel, and pieces are duplicative, I know the Department has been working to bring these two processes together *where possible*. I trust they are in a position to carefully look at all sides of this issue, likely not as fast as some would prefer.
- 3) In reality, it is not possible to totally make the processes the same as they are evaluating different outcomes:
  - a. FC is a short-term solution for a child with a focus on reunification with biological family, while Adoption is a long term solution for a child when reunification with biological family is not appropriate.

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- b. FC's priority is dealing with the immediate crisis need of physical shelter & current emotional well-being, while Adoption's priority is long lasting health and well-being.
- c. The training and preparation for FC families is much different than that for Adoptive families; both good, but with a different focus as again the goal is different.
- d. Exploring motivations is critical in both FC and Adoption, yet these motivations likely have differences.
- e. Many families come to adoption after a long ordeal with infertility. This one issue is critical to evaluate as the emotional rollercoaster often culminates in a change in the person. It is important to assess how the adoptive applicant(s) have dealt with the losses with infertility, maintained or returned to a healthy sense of self, and are capable of loving a child that is not their "dreamed" of child. Any adoption professional will tell you this is one of the most important issues to thoroughly explore in every adoption. This is not done in Foster Care.
- f. Openness in adoption is a second critical issue. In my opinion, there should be no adoption ever without some degree of openness. Even in child welfare adoptions, where "safety" is often used as reason for no openness, the nuances of how to make openness work for the betterment of the child in the long run are generally only addressed in Adoption, pre and post.
- g. While ND has created the Post Adopt Network, these staff are not magicians. And adoption-specific therapists are few and far in between. If a FC family adopts without the full experience and training of adoption, the child and the family loses. Many of the supports that were available to FC families are no longer available in Adoption.

Without modification and/or involvement by professionals in adoption, this bill as it stands will hurt children.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'S Grundysen', followed by a long, wavy horizontal line extending to the right.

Susan R Grundysen, LMSW

The Village Family Service Center





# North Dakota House of Representatives

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## Representative Brandon Prichard

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## COMMITTEES:

Human Services  
Agriculture

**House Bill 1534**  
**Senate Health and Human Services Committee**  
**Senator Lee, Chairman**  
**March 15, 2023**

Chairman Lee and members of the Senate Health and Human Services Committee,

My name is Rep. Brandon Prichard and I represent District 8 which covers all of Emmons County, rural and suburban portions of Burleigh County, and Wilton which is in McLean County. I am here to testify in support HB 1534 which would combine the home studies for foster care and the adoption process. The process of adoption should be easy if a licensed foster parent wants to take the next step and raise a child in the foster care program. This bill would streamline the process and encourage adoption of children currently in a foster home.

The home study is an evaluation of prospective adoptive families and of the physical and emotional environment into which a child would be placed. It consists of a series of interviews with a social worker, including at least one interview in the home, though the number of home visits is usually four. During this process, families will consider all aspects of adoptive parenthood and identify the type of child they wish to adopt with the social worker's assistance. Some agencies use a group approach to the educational part of this adoption preparation process because it creates a built-in support group among families. In North Dakota, families adopting children from foster care are trained through the Foster / Adopt PRIDE model - a training program that familiarizes families with the needs of these children.

Many of the questions asked in the home study are personal. These questions are necessary for the social worker's evaluation of prospective parents. Some questions are about income, assets, and health and the stability of the marriage (if married) and/or family relationships. Physical exams to ensure that prospective parents are healthy are usually required. North Dakota requires prospective adoptive parents to undergo a fingerprint and background check to ensure that individuals do not have a felony conviction for domestic violence or child abuse. A home study is usually completed in a few months, depending upon the agency's requirements and the number of other clients.<sup>1</sup> During some periods, this process can take over a year.

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<sup>1</sup> [Steps to Adoption: Adoption Program: Children and Family Services: Services: Department of Human Services: State of North Dakota](#)



Unlike adoptive home studies, the foster care studies a family for the temporary care of children while they are under the custody of the agency and have the full support of case management and other services. Upon conversations with the Department of Health and Human Services, adoption studies are slightly more comprehensive in nature and more global in their assessment of the family since they are recommending the family for a lifetime commitment to a child's safety and well-being. However, the redundancy is staggering, and few differences exist between the processes. In fact, the largest difference between the adoptive process and the foster process is simply the time the adult(s) intend to care for the child.

The purpose of the investigation required in subsection 2 of CC 14-15-11 is to determine whether the adoptive home is a suitable home and whether the proposed adoption is in the best interest of the minor. The intent of the new language in subsection 2 of HB 1534 is to provide that an adoptive home is suitable under this subsection if the petitioner is a foster parent; therefore, they do not need to submit to any further state investigation related to whether their home is suitable. Section 3 provides a foster care assessment made by the department of health and human services may be used as evidence of the suitability of the home for the investigative report for adoption. Thus, if a foster parent petitions for adoption, the agency may use the petitioner's foster care assessment to demonstrate that the petitioner's home is suitable in the report of the investigation. For clarification, this bill would only impact the home study and home visits for licensed, certified, or approved foster care families who wish to adopt a child. The background check mandated by the Federal Bureau of Investigation, paperwork needed to complete an adoption, and training seminars are not affected by this bill.

Therefore, after speaking with foster parents around the State of North Dakota who have adopted children or who are working through the process, a common complaint has been the unnecessary repetitiveness behind the home studies. While opponents of this legislation would argue that the intended timeframe for holding a child differs between foster care and adoption, why should the state be allowing children in the foster system to stay with a foster parent who is unsafe? If we are allowing an individual or family to become licensed foster care providers, they should be trusted with a child regardless of the timeframe. The adoption process is long enough for perspective parents. We should not make it more complicated for foster families who have been through an almost verbatim process. Additionally, foster families often care for a foster child for months or years waiting for termination of parental rights, court proceedings, and agency requirements for adoption. If there is no complaint against the foster family in this long period of care, why put the family and foster child through a long process to find a result that should be determined based upon the level of care provided while the child was in foster care?

I would like to suggest a simple amendment to HB 1534. Upon discussion with legislative council, a recommendation was made to clarify what "the manner prescribed by the department, the petitioner is a licensed, certified, or approved family foster home for children" means according to existing code. NDCC 50-11-01 outlines the process for becoming a foster parent in North Dakota. Therefore, the intent of the bill is not changed, but a process to become a foster parent is identified. The bill is good in the version it passed the House of Representatives. However, the amended version is an improvement.

I encourage the Health and Human Service Committee to support foster families who want to adopt children in their care. I respectfully ask for the committee to support HB 1534 by giving the bill a "Do Pass" recommendation.

23.0752.02001

**FIRST ENGROSSMENT**Sixty-eighth  
Legislative Assembly  
of North Dakota**ENGROSSED HOUSE BILL NO. 1534**

Introduced by

Representatives Prichard, K. Anderson, Fegley, Fisher, Frelich, Kiefert

Senators Cleary, Clemens, Larson, Weston

1 A BILL for an Act to amend and reenact section 14-15-11 of the North Dakota Century Code,  
2 relating to waiver of certain adoption requirements for licensed foster care providers.

3 **BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

4 **SECTION 1. AMENDMENT.** Section 14-15-11 of the North Dakota Century Code is  
5 amended and reenacted as follows:

6 **14-15-11. Notice of petition - Investigation and hearing.**

7 1. a. After the filing of a petition to adopt a minor, the court shall fix a time and place  
8 for hearing the petition. At least twenty days before the date of hearing, notice of  
9 the filing of the petition and of the time and place of hearing must be given by the  
10 petitioner to the department and if the minor to be adopted is in the custody of the  
11 human service zone to the human service zone; any agency or individual whose  
12 consent to the adoption is required by this chapter but who has not consented; an  
13 individual whose consent is dispensed with upon any ground mentioned in  
14 subdivisions a, b, f, h, i, and j of subsection 1 of section 14-15-06 but who has not  
15 consented; any appropriate Indian tribe; and any individual identified by the court  
16 as a biological parent or a possible biological parent of the minor, upon making  
17 inquiry to the extent necessary and appropriate, as in proceedings under section  
18 27-20.3-22, unless the individual has relinquished parental rights or the  
19 individual's parental rights have been previously terminated by a court. The  
20 notice to the department and if the minor to be adopted is in the custody of the  
21 human service zone to the human service zone must be accompanied by a copy  
22 of the petition.

Sixty-eighth  
Legislative Assembly

- 1           b. Notice of the filing of a petition to adopt an adult must be given by the petitioner  
2           at least twenty days before the date of the hearing to each living parent of the  
3           adult to be adopted.
- 4           2. An investigation must be made by a licensed child-placing agency to inquire into the  
5           conditions and antecedents of a minor sought to be adopted and of the petitioner for  
6           the purpose of ascertaining whether the adoptive home is a suitable home for the  
7           minor and whether the proposed adoption is in the best interest of the minor. An  
8           adoptive home is suitable if, in the manner prescribed by the department, the  
9           petitioner is a licensed, certified, or approved family to furnish foster home care for  
10          children under section 50-11-01.
- 11          3. A written report of the investigation, which may include the petitioner's foster care  
12          assessment to demonstrate the suitability of the adoptive home, must be filed with the  
13          court by the investigator before the petition is heard.
- 14          4. The report of the investigation must contain a review of the child's history; a  
15          preplacement adoption assessment of the petitioner, including a criminal history record  
16          investigation of the petitioner; and a postplacement evaluation of the placement with a  
17          recommendation as to the granting of the petition for adoption and any other  
18          information the court requires regarding the petitioner or the minor.
- 19          5. An investigation and report is not required in cases in which a stepparent is the  
20          petitioner or the individual to be adopted is an adult. The department and human  
21          service zone, when required to consent to the adoption, may give consent without  
22          making the investigation. If the petitioner is a relative other than a stepparent of the  
23          minor, the minor has lived with the petitioner for at least nine months, no allegations of  
24          abuse or neglect have been filed against the petitioner or any member of the  
25          petitioner's household, and the court is satisfied that the proposed adoptive home is  
26          appropriate for the minor, the court may waive the investigation and report required  
27          under this section.
- 28          6. The department and human service zone, when required to consent to the adoption,  
29          may request the licensed child-placing agency to conduct further investigation and to  
30          make a written report thereof as a supplemental report to the court.

HB 1534

Human Service Committee Members of the Senate,

I write this brief letter in **support** of HB 1534. When researching through the guidelines of our state along with others it seems as though there are 2 pathways in North Dakota to provide children a safe home within foster care.

1. Foster Care- Temporary Placement
2. Adoption – Permanent Placement

The two pathways of finding homes for children in North Dakota do not align & communicate with one another yet both fall within the jurisdiction of North Dakota Health & Human Services. All children who are in foster care enter with the intent of a temporary placement however transition occurs through the legal process of needing temporary care to needing permanent care.

This bill does not replace the need for private agencies connecting people who desire to experience the adoption process outside of foster care but instead creates an opportunity for foster parents to continue to love a child through adoption without needing to complete the same paperwork, the same home study, the same finger prints, for the same state agency that they have already been working with through their minimum 6 month foster care placement.

I understand the goal of foster care is reunification. In reality there are children who will not reunify with their birth parents or relatives and are in need of a safe place to call home forever. If there are foster parents that are currently already taking care of these children, why must they go through the same process to now adopt?

I have provide 3 links to check out how other states have combined these two pathways compared to how our system looks. These states are already providing an opportunity for those who may adopt through foster care.

North Dakota - <https://www.adoptuskids.org/adoption-and-foster-care/how-to-adopt-and-foster/state-information/north-dakota>

Washington - <https://www.adoptuskids.org/adoption-and-foster-care/how-to-adopt-and-foster/state-information/washington>

Georgia - <https://www.adoptuskids.org/adoption-and-foster-care/how-to-adopt-and-foster/state-information/georgia>

I urge DO PASS recommendation from the committee and a green vote on the floor!

Cassidy Lyngaas

Testimony Prepared for the  
**Senate Human Services Committee**  
March 15, 2023  
By: Kim Jacobson

**RE: HB 1534: Relating to creating waiver of certain adoption requirements  
for licensed foster care providers**

Chair Lee, and members of the Senate Human Services Committee. For the record, my name is Kim Jacobson. I serve as the Agassiz Valley Human Service Zone Director with the service areas of Traill and Steele Counties. In addition, I serve as President of the North Dakota Human Service Zone Director Association. I am here today to provide testimony in opposition of HB 1534.

Human Service Zone Directors, the Division of Juvenile Services and Tribal child welfare agencies serve as legal custodians of foster children when care/custody/control of children is removed from their parents or legal caregivers. Foster care is a complex system with many legal and case management child-specific considerations. When children cannot be successfully reunited with their parent, the Court may consider and order a Termination of Parental Rights (TPR). At this point, a child is free and eligible for adoption, which is considered a final permanency option. When a TPR occurs, the responsibility for making adoptive placement decisions and consenting to adoption, falls upon the duty and authority of the Human Service Zone Director.

As a Human Service Zone Director, this is one of the most important responsibilities and duties that I am obligated to fulfill. At times, this is a very straight forward decision. Other times, there are multiple individuals who all love and want to be the identified adoptive placement for a specific child. I find adoptive home studies critical to my decision-making process. It helps

me explore the needs of the child and fit of the perspective adoptive home. It is important to remember that home studies for the purposes of foster parent licensure are very different than the home studies for adoptive placement. Foster care is intended to be short-term, temporary care to meet a child's immediate needs. It is with that intent and lens that foster care home study/licensure is fixed upon. However, adoptive home studies are a much more robust process looking at the interested parties to meet the long-term needs of a child, through special needs adoption. Adoptive homes are forever homes. Adoptive placement is a significant and life altering decision. A decision that forever impacts a child and something that should not be rushed or be subject to short-cut.

While I understand the intent of HB 1534, it does remove a valuable, essential, and non-duplicated assessment as well as a critical tool to those who bear the responsibility of making adoptive placement decisions. For these reasons, I urge a Do Not Pass on HB 1534.

Thank you for considering of my testimony. I stand for any questions the committee.

Good afternoon Senate Committee Members

My name is Bailie Graner and I am in favor of passing HB 1534. I am a foster mom and almost adoptee mother who saw a flaw in the system and knew we could fix it. I'm going to layout why passing this bill is important for the kids, court system, state social work team members, and state funds.

I want to first give you a background on how adoption through the foster care comes about. First reunification with the parents is the number one priority of the foster care system and social work team. Should that goal not be attainable, all suitable family members are sought out for a permanent home for the child. In our personal case, the family who was suitable was not able to take on another child. So now I have a good friend who is also my daughter biological auntie. Now we are at a place when adoption needs to be sought out by non-family members. The first choice is the foster family who they have been living with. Just for context the sweet girl we have has been in our home for 2.5 years.

We do an in-depth study of our home through the foster licensing process. Then when a placement comes into our home, The social work team gets to really know us, on a very personal level for many months and years. They come into our home monthly for visits and safety checks. We are all part of the co-parenting team when it comes to doctor's appointments, forms that need to be signed, and so on.

When family is not able to care for the child, the social work team will then choose us, the foster home, to be her adoptive parents, not an agency. There are federal laws in place in the foster to adoption process that will not be affected by this bill. Federally, the child needs to be in the home for a minimum of 6 months, we need to be finger printed for a second time, and have no large life event for 1 year. What I am saying is we are not looking for loopholes or short cuts, because they will not exist. With this bill, we will be cutting out a redundant second home study paperwork that was already fulfilled in our initial foster licensing. This second home study is delaying the adoption process. Why do we need to re-prove we can take care of her. Since beginning our second home study back in July, so 8 months ago, we are still not done.

This bill will not necessarily affect the current families who want to strictly foster and without adopting. Instead, this is creating more accessible opportunity to continue to care for a child who is in their home who needs that permanent plan. We can then do the federal adoptive paperwork if it appears that a child is going to be a permanent resident, or we can even fill out the paperwork right away when initially licensed for the families who are able to adopt.

Now having been through both home studies, what we have found to be different is a deeper look into our finances and the health of our marriage. I ask now, in what financial circumstances would a child not be adopted by the foster parents. The answer is never. Financial status does not prove safety or wellbeing of a child. If that were the case, if any family were to fall below the federal poverty line, those children would be in foster care. Even in our fostering license process, we have to prove that we can care for children without the stipend.

Now with this delayed adoption, we are also tying up the court system. We have another permanency hearing coming up to tell the judge that we are still working on adoption. This court time could instead be used for the families and children who need it. I won't dive into this rabbit hole too deeply but you just have to ask someone in the court system "how far out is a court date in family court if you need to reschedule?"



The State's social work team is also tied up with our delayed adoption process. My now case worker can not take any new cases until our daughter is no longer on her work load. So for an extended 8 months she is essentially tied up while we are in this second home study period.

Let's talk about our state dollars. The state continues to pay a stipend for a child while they are in the home during the second home study. So for round numbers let's round to \$30 a day times 30 days a month equals roughly \$900 a month. We will use roughly 10 months for the second home study by our own example and I know of some who have extended well into a year. So that is \$9000 roughly per child that is paid during this interim second home study time. Last year in North Dakota there were 250 of our kids who were adopted out of fostercare. So now take that \$9000 times 250 children a year. That is roughly 2.5 million dollars a year being paid by that state during this waiting period. How about who pays for the second home study to be completed by an outside entity? I do not have the cost that our tax payers are paying for that, but we can figure some money into that as well.

We have other states who are already doing 1 home study to suit the state for foster care and follow federal guidelines for adoption. I do not have the exclusive list, but my examples are Montana, Georgia, Washington and Oregon. Again, this is NOT private adoptions and this bill is strictly affecting those who are already fostering.

You are going to hear that the foster system is designed to be temporary while adoption home study is for permanency. I ask then what is temporary and what care requirements are different. Temporary is the goal of foster care, however as you heard it is not always the reality. Our foster son who is also in our home was initially placed for a temporary 10 days. He has now been with us for a year and a half. So what is really the difference in being able to take care of someone "temporarily" vs "permanently".

If we are good enough to foster, we are good enough to adopt. I also want you to know that this bill will no longer affect me personally, but it is a great fix. We can really impact other children by achieving permanency sooner. Thank you and pass 1534

As a mother who has gone through both home study processes, I stand for any questions.



**Testimony in Support of HB 1534*****Christina Sambor, Attorney at law, testifying in my individual capacity*****North Dakota Senate Human Services Committee****March 15, 2023**

Chairman Lee and Members of the committee:

My purpose today is not to take a position on the bill as currently drafted, but rather to request a related amendment that seems it may be related to the concerns that motivate the bill as currently drafted. As a practicing family law attorney, I had the occasion over the last several years to assist a family who provided guardianship care to child, beginning at age one. That child, now five years old, is still in the family's care, and the birth parents' rights have been terminated by the court. The guardians are licensed foster parents, have a current AASK home study, and have had a court supervised guardianship of the child which has resulted in several reports by a guardian ad litem, investigating the child's history, the sufficiency of the care provided by the guardians, and ultimately, has recommended that the child be adopted by the guardians.

Their case uniquely falls into a gap in current statute wherein there is not an obvious waiver for an additional investigation and report. Yet, there is no question that on several fronts, at least as much, if not more information has been collected on the child's placement in this home, the adequacy of the placement, and the child's best interests. Because this information exists in reports other than a traditional adoption home study, it is unclear as to whether or not the reports that exist are sufficient. Therefore, I am recommending the following amendment to HB 1534:

Page 2, line 21, after "a" add: court-appointed legal guardian, or

SB 1534

My name is Tasha Gorentz. I have 5 years of experience providing foster care in Cass County and have adopted one child.

I came here today in support of SB 1534 due to my personal experience adopting as a foster parent and seeing first hand the additional trauma the drawn out process of adoption gave my son.

My first child was the kinship placement of my youngest biological half-brother with whom I share a biological father. My little brother entered the foster care system while our father was incarcerated for selling and using meth and his mother faced eviction while struggling with her own addiction and mental health issues. I immediately got started on the rigorous home study training and was eventually granted my foster care license.

I found myself stepping up to be the instant caretaker of a very neglected, terrified, emotionally shut down 8 year old little boy.

My father hadn't allowed me to be very present in my brother's life during the few years before he entered care, so I hadn't been aware of things that had been happening but it didn't take long for the trauma this young man endured to start painting pictures of themselves. Physical domestic abuse, mental and emotional abuse, sexual assault, pornography addictions, school truancy and child neglect were just a few of the traumatic events that were normalized in this home.

My brother was afraid to ride the school bus on his own, so I drove behind it convoy style every day for weeks until he finally felt safe.

He didn't feel safe sleeping in a bedroom alone and would describe nightmares about his dad's drug addict friends breaking in the bedroom window with a gun and kidnapping him to get ransom money.

We would have panic attacks regularly due to various triggers that would remind him of being in the care of his parents and he would completely disassociate and shut down.

We started weekly therapy and started the work of making him feel safe and trying to help him heal from abuse and neglect he suffered for years. We felt like we were making some progress but we hit a wall when he would start wondering about his future and asking if he was going to have to go back with his parents.

The hardest part of trying to stabilize and protect this child emotionally was not being able to ensure him that I would always be able to keep him safe.

Reunification is always the initial goal. As a foster parent, I support the plan and hope that reunification can be achieved in the best interest of the child or children that come into care. However, we all know that reunification is not always appropriate.

His entire team, case worker, therapist, school staff, foster parent and the child all knew that reunification was not appropriate in this situation. However his biological parents were granted chance after chance after chance to start making progress to show they wanted him back. My brother ended up writing personal letters to both his biological mom and dad begging them to terminate parental rights and allow him to be adopted because he didn't want to exist in limo any longer. He wanted some answers as to what his future was going to be. He wanted the anxiety over wondering what will happen and when to stop. He wanted safe permanency.

His parental rights were terminated and he was very excited, but then we had to start the adoption home study process. The anxiety he thought would pass with termination, didn't because he still had to wait and wait and wait.

It took three long years from time of placement to finalizing adoption. Three years for this young man who had already been through so much to finally be able to feel like he could get comfortable with the idea that he would always be safe. That he was home and that he wasn't going anywhere.

I am in support of this bill because I believe we work as a team in the best interest of the children who end up in the foster care system.

Being removed from a child's family/home is traumatic no matter what the reasons requiring removal are. These children deserve permanency assurance as soon as they can get it so they can start taking the steps to heal. They shouldn't be forced to wait additional months while their adoptive parents are subject to another repetitive home study when the adoption process can be structured to better support the foster to adopt process in the situations when it truly is the best option.

In addition to benefiting the children, restructuring the foster to adopt process would also be of great benefit to adoptive parents as well. The repetitive home study, the lengthy, drug out process and the wait of the adoption approval process is a great stress to those providing care for children. It can be so emotionally draining waiting to be approved again after already providing care for a child in your home. After welcoming a child into your life and loving them as a part of your family. It can be so painful to know a child will not be going home to their biological family but not knowing if or when your application to adopt them will be approved.

Why are foster parents seen as good enough to provide care for but not good enough to parent?

If you trust the home study for foster care to approve families who sometimes end up providing care for kids for years before they either start an additional home study for adoption or the child

ends up aging out of the system, why would you not trust them to also an approved permanency option for the same children?

I believe that both foster and adoptive homes should be treated with the same requirements.

I believe that one thorough, in depth, home study should set the standard for both foster and foster to adopt parents. It would be in the best interest of the kids we all work so hard to support by streamlining adoption approval when adoption is appropriate.

Hello, my name is Cody Gorentz. I am a 17 year old who was adopted and I am in support of SB1534.

My biological half sister, Tasha (look at her), took me in at 8 years old.

My birth parents didn't know anything about what it took to be responsible for a child. Everyday was a guessing game, wondering if I was even going to be able to eat that day or not. Sometimes they would send me up to mcdonalds with a couple bucks. I would ride my bike the few miles there and back all by myself as a young kid.

They were both drug addicts and didn't make any effort to hide it from me.

My parents would intentionally keep me home from school, causing me to miss about 70 days per school year which made me fall really behind. I moved in with my sister in the middle of 4th grade. Last year, my sophomore year of highschool was the very first time I reached actually being at my grade level in all of my classes. That is how behind I was.

Leaving my parents and moving in with my sister wasn't an easy transition. I loved my parents and as a kid, it is not always easy to understand that your needs are not being met, but I know it was the best thing to happen to me.

I knew I was in a safe, loving place but I struggle a lot. I was happy to be with my sister but I never knew how long I would be there or if I was going to have to go live with my parents again. I had a lot of anxiety over not knowing what the future would hold. I was so afraid. I never wanted to be in a room by myself. If my sister got up and walked into another room, I would follow her. I didn't want to sleep alone. I even struggled with going into the bathroom for very long to shower knowing my sister was a few rooms away. It scared me not having her right next to me because I worried that my parents would come and try to take me away. My anxiety was through the roof. I started working with my therapist to try and control my anxiety but not knowing what the future held was overwhelming.

I decided to write letters to my birth parents asking them to terminate their rights so my sister could adopt me. They agreed but it still took a really long time for my adoption day to actually happen. The whole process was spread out over a very scary and stressful three years.

I would like for other kids who go through the same type of situation as me to reach permanency faster than I did. I think they would be able to avoid a lot of anxiety over the uncertainty of what might happen if the process for foster to adopt is simplified.

Kids who are better off not going back to their birth parents deserve permanency with a loving family as soon as parental rights are terminated.

I am asking for your support on this bill so that kids like me can feel safe and loved sooner.

**Testimony  
Engrossed House Bill No. 1534  
Senate Human Services Committee  
Senator Judy Lee, Chairman  
March 15, 2023**

Chairman Lee, and members of the Senate Human Services Committee, I am Cory Pedersen, Director of the Children and Family Services Section (CFS) with the Department of Health and Human Services (Department). I appear before you to provide information to Engrossed House Bill 1534.

CFS has been facilitating a work group to discuss the need to offer efficiencies and better streamline the foster and adoption home study efforts. Adults Adopting Special Kids (AASK), the vendor contracted with the Department for subsidized adoption, together with the CFS Adoption Foster Care Licensing Units, have been reviewing forms and making efforts to eliminate duplication wherever possible. Senate Bill 2080, which passed out of this Committee in the first half of the session, is representative of some of the work group's efforts to date.

This work group has identified that we have two processes working often working in parallel to each other, completing assessments through two related by different lenses. The foster care lens represents a temporary placement while the adoption lens represents a lifetime commitment. Our experience tells us that this dual assessment impacts approximately 13% of the licensed foster care provider population.

Overall, adoption assessments are more comprehensive than the current foster care study process. In adoption we are looking to assess the family's ability to provide for the child's safety and well-being for a lifetime, without

the supports of an agency that can step in if there are difficulties, or the placement destabilizes.

The "investigation" as referenced in North Dakota Century Code chapter 14-15, and required for most adoption hearings, is more than an adoptive family home study. It provides not only information about the adoptive family, but also the child and birth family, and includes a narrative that summarized the child's placement in the home and a formal recommendation by the agency for the finalization. All of this information is taken into consideration by the Judge who is making the finalization decision.

The language proposed in House Bill 1534 will not change the requirement that the family complete background checks for adoption that are separate from foster care as that is a federal requirement of the FBI.

What we expect this bill would do is slow down the foster care license, certification, and approved processes for the approximately 87 percent of foster parents who will never adopt.

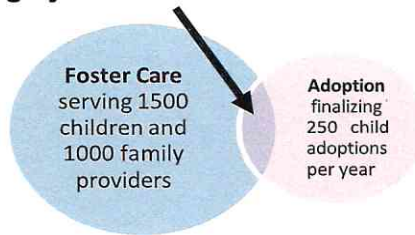
The newly centralized CFS Licensing Unit is less than one year old (authorized via 2021 Senate Bill 2086). We are committed to looking for areas where we can improve and streamline processes, with the goal of becoming more efficient for our providers while balancing what is best for the children and their families.

This concludes my testimony, and I would be happy to answer any questions you may have.



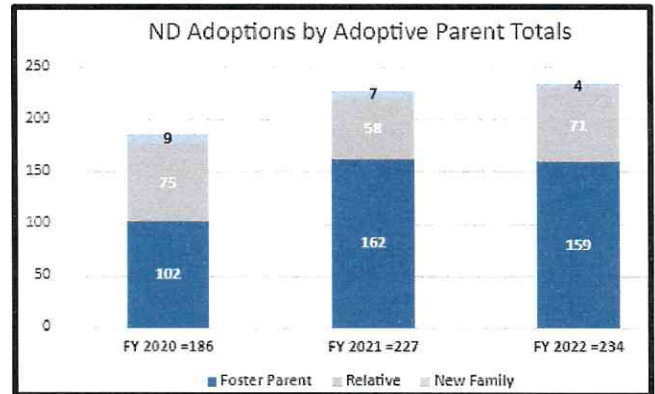
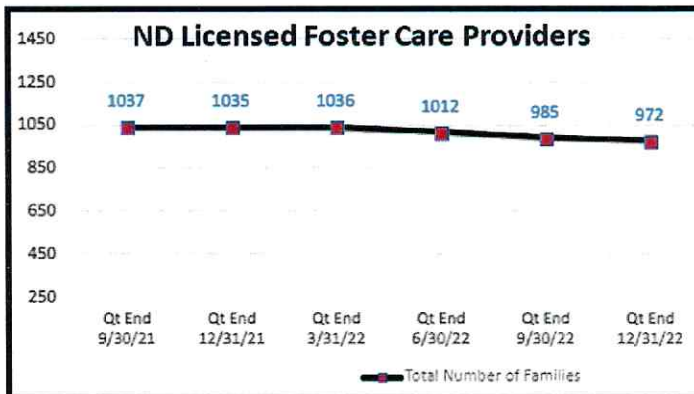
Children and Family Services has been facilitating a work group to discuss the need to offer efficiencies and better streamline the foster and adoption home study efforts. Adults Adopting Special Kids (AASK), the vendor contracted with the department, along with CFS adoption administration and CFS Licensing Unit have been reviewing forms and eliminating duplication. What this work group has identified thus far:

- ND has two parallel processes working in tandem
- Assessing through two different lenses'; Temporary (foster care) vs. Lifetime commitment (adoption)
- **Dual assessment impacts roughly 13% of the licensed foster care provider population**



**A. Licensed Providers Adopting ND Children in Foster Care**

North Dakota Department of Health and Human Services (HHS) licenses roughly 1000 family foster care providers, with roughly 13% of the ND foster care providers identified as an adoption option. The charts below show the timeline of licensed foster care providers and three years' worth of adoption data. In FY 2020, 186 adoptions were finalized with 102 (55%) of the adoptive families being licensed foster care providers. In 2021, 227 adoptions were finalized with 162 (71%) of the adoptive families being licensed foster care providers. In FY 2022, 234 adoptions were finalized with 159 (68%) of adoptions were finalized by a licensed foster parent. *The work group will continue to identify areas where the processes can be streamlined, but not to negatively impact the larger population of foster care providers (87%) who may not ever engage in the adoption investigation process.*



The largest and most important difference between the foster care and adoption process is the lens utilized to assess two different placement types (temporary foster care vs. long term adoptive). While there may be similarities between the two assessments, an adoption investigation must assess the ability to not only meet a child's immediate needs, but ensure that the developmental, emotional, physical, spiritual, educational, and financial needs will be met lifelong without the supports of the child welfare system. Adoption investigation gathers information regarding the adoptive family, the child, their history of entry, details of the child's birth family, and more which is used to provide the required summary of investigation for the court.



## Foster Care Home Study (Licensing)

**\$Cost\$:** Free to the provider. No cost to get licensed. Monthly reimbursement (\$818-\$1028) is issued once they are licensed and providing care to a child in foster care.

### Items required by a prospective provider in efforts to be approved as a ND foster care provider (temporary):

1. **Background Check:** Federally required fingerprint based Criminal Background Check
  - a. [Foster Care Checks](#)
2. **Home Study:** Licensing Specialist is assigned to complete a mutual family assessment of the applicant/s for the purposes of temporary care.
3. **Home Visits:** At least three home visits to assess the property for safety, interview family, and make a determination about their ability to provide temporary foster care to a child in need.
4. **Relevant Forms**
  - a. [SFN 893](#) "Foster Care Application" completed by the applicant/s.
  - b. [SFN 889](#) "Initial Home Study" completed by the assigned licensing specialist.
  - c. [SFN 1037](#) "Licensing Packet" completed by the applicant/s.
  - d. [SFN 974](#) "Physical Exam Verification" completed by the applicant/s during initial licensing only.
  - e. [SFN 1038](#) "Foster Parent Policy and Standards Review" is to be reviewed by the licensing specialists with the providers.
5. **Training**
  - a. Pre-Service Training (27 hours)
  - b. Fire Safety Training (initial + annual)
  - c. 13 hours per year
6. **Renewal Options:** Applicants are required to complete an annual renewal of their licensure. This requires an onsite visit from the licensing specialist, completion of necessary safety checklists, review of the training transcript, and interview of placements, and system strengths and challenges.



## Adoption Home Study (Approval to Adopt)

**\$Cost\$:** Up to \$2000 out of pocket costs reimbursed per child. No cost for the adoption assessment. Families do pay their attorney fees, testing fees, background checks, travel costs, etc. and submit receipts. Monthly adoption subsidy is reimbursed to the family.

### Items required by an adoptive family in efforts to be approved as an adoption option (lifelong):

1. **Background Check:** Federally required fingerprint based Criminal Background Check
  - a. [Adoption Checks](#)
2. **Home Study:** Adoption specialist is assigned to complete a mutual family assessment of the prospective adoptive family for the purposes of a long-term, lifetime commitment to a child.
3. **Home Visits:** At least four home visits to assess, interview, educate, and make a determination about their ability to provide a lifelong commitment to a child.
  - a. **Testing (TJTA/Prepare Enrich/AAPI):** Assess strength and growth areas within communication, conflict resolution, financial management, stress, affection, marriage expectations, social and relationship roles, personality, and parenting and adoption expectations.
  - b. **References:** Five personal references and all adult children are obtained in writing and verified verbally.
  - c. **Education:** Interactive preparation for long-term success. Engaging in "what-if" scenarios and talking through how to handle difficult situations independently without agency intervention.
  - d. **Referrals/Services:** Assessing if referrals for services (couples counseling, individual therapy, financial counseling, etc.) are necessary.
4. **Relevant Forms:**
  - a. Application, Fee Schedule, Reference Request, and Program ROI
  - b. Family Fact Finding Form (being revised)
  - c. Self-Disclosure Statement
  - d. Declaration of Good Health
  - e. Privacy Practice, Client's Rights, and Technology Acknowledgements
  - f. Foster Care and Adoption Declaration History
5. **Training:**
  - a. Pre-Service Training (27 hours)
  - b. As Needed/Per Recommendation
    - i. CORE Teen Right Time Training
    - ii. Trauma Knowledge Masterclass
    - iii. Other
6. **Renewal Options:** For the limited number of waiting families who have not been matched with a child, an update to their home assessment every two years. This includes two home visits, required paperwork, reference checks, and education to reaffirm their adoption assessment recommendation.





## CHILDREN & FAMILY SERVICES

Human Service Zone	Total children with TPR	Total Children in Foster Care	% of Children in care with TPR	Children 14+ with TPR	Native American children with TPR
Agassiz Valley	2	17	12%	0	0
Buffalo Bridges	9	37	24%	3	2
Burleigh	23	169	14%	10	13
Cass	91	257	35%	20	26
Central Prairie	0	3	0%	0	0
Dakota Central	1	14	7%	1	0
Eastern Plains	0	2	0%	0	0
Grand Forks	24	205	12%	3	11
Mountain Lakes	25	74	34%	1	18
Mountrail-McKenzie	6	12	50%	4	1
North Star	6	83	7%	1	1
Northern Prairie	1	12	8%	0	1
Northern Valley	6	16	38%	1	1
Roughrider North	4	37	11%	2	1
RSR	1	16	6%	0	0
South Country	2	9	22%	0	1
Southwest Dakota	0	14	0%	0	0
Three Rivers	21	64	33%	7	0
Ward	21	139	15%	9	8
<b>TOTALS</b>	<b>243</b>	<b>1180</b>	<b>21%</b>	<b>62</b>	<b>84</b>

Tribal Agency IV-E Eligible Cases Only	Total IV-E children with TPR	Total IV-E Children in Foster Care	% of IV-E Children in care with TPR	Children 14+ with TPR
Spirit Lake	20	50	40%	2
Standing Rock	5	53	9%	2
Three Affiliated	3	18	17%	
Turtle Mountain	76	187	41%	11
<b>TOTALS</b>	<b>104</b>	<b>308</b>	<b>34%</b>	<b>15</b>

Data: CFS KPI Data 1.1.23

**Wolf, Sheldon**

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**From:** Lee, Judy E.  
**Sent:** Tuesday, March 21, 2023 9:25 PM  
**To:** -Grp-NDLA Senate Human Services; Wolf, Sheldon; NDLA, Intern 02 - Pouliot, Lindsey; Lahr, Pat  
**Subject:** FW: HB1534

Message from mom of one who testified today.

Senator Judy Lee  
1822 Brentwood Court  
West Fargo, ND 58078  
Home phone: 701-282-6512  
Email: jlee@ndlegis.gov

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**From:** bgraner@bektel.com <bgraner@bektel.com>  
**Sent:** Tuesday, March 21, 2023 2:24 PM  
**To:** Lee, Judy E. <jlee@ndlegis.gov>  
**Subject:** HB1534

*Greetings Senator Lee,*

This morning I listened to the testimony on HB 1534.

I am Bailie Graner's mother in law and have been a witness to the life their family has lived while both fostering and adopting children in our state.

I have been retired from nursing for about 10 years. I worked over 20 years in maternal child health. Today I listened to testimony both for and in opposition to HB 1534.

I ask:

Why are foster families not scrutinized to the same degree adoptive families are assessed? Do the children not deserve and need a fully vetted family, a family who is capable of handling all the baggage that often accompanies any child removed from their birth family?

Is it because it is SO incredibly difficult to find families willing to open their homes as temporary placement as the child's family attempts to pull things together? Those placement days are often framed as we have a child or children who we need emergency placement for just a few days. Those few days in my experience often turn into weeks, months and years.

Those traumatized children need special care for their physical needs, their mental needs, and their often-horrible shattered little spirits. They are handed over to families who have completed the standard training to qualify for foster

care. I cannot help but ask, why is the bar set at different levels just because of the length of time the child may or may not be in ones home?

The other point that caught my attention is the admonition that the kids in foster care are under the custody of the state. That the state decides what should be done with them and for them. While, technically that is true, in reality the "state" is far too overwhelmed with the stark number of children that are assigned to them. The state does not really decide anything as they rarely see the child, really don't know the child, and fully depend on the reports/ communication with the foster parents in making any decisions. It is not the state that seeks health care, dental care, eye care, etc. It is the foster family who notices things are needing attention, who make the phone call to get "permission" to take the child for care. It is the foster family who potty trains the 4 year old still in diapers, it is the foster family who holds the 7 year old who has night terrors. It is the foster family who deals with undiagnosed and untreated mental health conditions. The state may have legal custody, but they do not provide the day to day care, they subsidize it. They really are in a partnership with foster families. This bill asks that the system be assessed, that the present way of doing things be re-evaluated so that the best interests of the child are best met. It also seeks to make sure the money that makes this particular wheel turn be spent in a way that is financially prudent.

**Becky Graner**

[bgraner@bektel.com](mailto:bgraner@bektel.com)



The data below is excerpted from AASK Annual Reports for SFY's 2020, 2021 and 2022.

Adoption placement disruption is when a child disrupts from an adoptive placement, prior to finalization.  
adoption dissolution would be when a child's adoptive parent terminate their parental rights.

### **SFY 2022**

Adoptive Placement Disruptions: 7

In further analysis of the disrupted adoptive placements, the following was determined:

In-State Disruptions: 7

- 3 of the 7 in-state disruptions were recruitment cases
- Of the 7 total disruptions, 3 were placed with non-relatives and 4 were placed with relatives
- Of the 7 total disruptions, 2 were newly placed into a home and 5 were already residing in the home
  - Of the 5 already residing in the home, 3 had concerns arise which led to the adoptive parents being ineligible to adopt
  - Of the 5 already residing in the home, 1 was ineligible to inherit his biological family's estate if he was adopted

Adoption Dissolutions Reported: 0

### **SFY 2021**

Adoptive Placement Disruptions: 16

In further analysis of the disrupted adoptive placements, the following was determined:

- Incoming ICPC Disruptions: 3 (Michigan, Texas, Oregon)
- Outgoing ICPC Disruptions: 3 (South Carolina, South Dakota)
- In State Disruptions: 10
  - 7 of the 10 in-state disruptions were recruitment cases and 4 of the 10 were tribal exception cases
  - Of the 16 total disruptions, 9 were placed with non-relatives and 7 were placed with relatives
  - Of the 16 total disruptions, 13 were newly placed into a home and 3 were already residing in the home
  - Of the 3 already residing in the home, concerns arose which led to the adoptive parents being ineligible to adopt

Adoption Dissolutions Reported: 1

### **SFY 2020**

Adoption Disruptions:

- 1 Incoming ICPC child experienced a disruption of their adoptive placement
  - The identified family was not able to manage the child's needs

Adoption Dissolutions Reported: 0



*Representing the Diocese of Fargo  
and the Diocese of Bismarck*

**To:** Senate Human Services  
**From:** Christopher Dodson, Executive Director  
**Subject:** House Bill 1534 - waiver of certain adoption requirements for licensed foster care provider  
**Date:** March 15, 2023

The North Dakota Catholic Conference opposes House Bill 1534.

The processes for adoption home approval and foster care home approval include some of the same steps. They are, however, different processes, and those processes are shaped with different goals and purposes in mind. Equating the processes jeopardizes the overriding goal of achieving what is in the best interests of the child.

Sue Grundysen, the program director for adoption services at Village Family Services, has submitted testimony explaining the differences and the problems with this bill. When I read it, I thought I could not explain it better, and would merely refer the committee to her testimony.

Then I read the submitted testimony of Jean Nasers, the interim director for Christian Adoption Services, and thought the same thing. Then I reviewed the notes of Kara Eastlund, the director of the Adults Adopting Special Kids (AASK) program and Catholic Charities North Dakota. AASK works to place children in foster care into permanent homes. Although it discussed the original bill, it also does a great job of explaining the problems with House Bill 1534. (Those notes are attached to my testimony.)

The three adoption agencies that facilitate almost all adoptions in North Dakota oppose this bill. I cannot explain the reasons as well as they do. The best I can do is offer an analogy.

There comes a point with every family where the parents have to leave for a few days and not take the children. They may decide that the kids can stay at Aunt Sally's and Uncle Bob's for the weekend. They trust them to watch the kids for a weekend and Aunt Sally and Uncle Bob have the parents' phone numbers if anything goes wrong.

This situation is very different than when the parents are meeting with their lawyer and deciding who should raise their children if both of them die. An entirely different set of considerations go into making that decision, compared to deciding about a weekend stay. Uncle Sally and Uncle Bob might be great for a short visit, but they may not be the right choice for permanently becoming parents.

We urge a **Do Pass** recommendation on House Bill 1534.

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## HB 1534

The largest (and most important difference) between the foster care and adoption home assessment is the lens that is utilized to assess two different type of placements (temporary foster care placement and a long term adoptive placement).

While there may be similarities in topics of conversation, an adoption professional must assess an applicant's ability to not only meet a child's needs temporarily, but ensure that the developmental, emotional, physical, spiritual, educational, and financial needs of a child will be met for a lifetime without the supports of the child welfare system.

In a recent article published by the Child Welfare Information Gateway (a service of the Children's Bureau), contributing factors to discontinuity in an adoption can include caregiver(s) unrealistic expectations of an adoption and a diminished commitment to an adopted child especially when difficult behavioral circumstances arise.\* When a foster parent intends to provide temporary care for a foster child, these factors are understandably not at the forefront of assessment due to the temporary nature of a foster parent's role. However, with an adoption trained lens, these factors are discussed at length. Additionally, there are vast differences between the two processes, some outlined below:

### Professional Trainings/Specialization

- Adoption workers receive specialized training to understand the unique complexities of children in foster care and ensuring they are equipped to prepare adoptive families. In addition to several North Dakota and agency specific trainings, they also receive the following adoption specific trainings:
  - o 30 hour National Adoption Competency Mental Health Training Initiative (NTI)
  - o 14 hour CORE Teen curriculum (through Spaulding for Children)
- The adoption agency is accredited through the Council on Accreditation (COA) in adoption standards. COA is national organization that sets the "gold standard" for how to provide the best services based on researched methods of practice.

### Assessing for Temporary Care vs a Lifetime Commitment

- Supports
  - o Foster care focuses on assessing a family's ability to provide for a child on a temporary basis WITH day to day supports from the child welfare system.
  - o Adoption focuses on assessing a family's ability to provide for a child on a long term basis WITHOUT day to day supports from the child welfare system.
    - The North Dakota Post Adopt Network is available to all adoptive families but is only accessed on a voluntarily basis by adoptive families.
    - After an adoption finalization, no child welfare professionals are required to be involved in order to support the family through challenges. Adoption is assessing for a family's long-term ability to problem solve, handle conflict, access services, and advocate on behalf of the child without child welfare professional support and in the best interest of the child

- Questionnaires
  - Adoption home assessments require prospective adoptive parent couples to engage in a questionnaire to help assess strength and growth areas within communication, conflict resolution, financial management, stress, affection, marriage expectations, social and relationship roles, and parenting and adoption expectations. All applicants engage in a parenting inventory to assess an individual's attitudes and beliefs towards parenting. Through these assessments, an adoption worker is able to engage in extensive discussion around strength areas and areas in which further exploration or referral might be necessary. Education and training is continuous throughout these discussions.
- References
  - Per NDAC, adoption home assessments require a minimum of 5 references to speak on behalf of an adoptive applicant. Additionally, references are obtained by all adult birth children of the adoptive applicant(s) to provide insight into parenting techniques, relationship dynamics, and strength and growth areas. References can validate information received and can also provide insight into areas that may need further exploration or referral.
- Education
  - Throughout the adoption home assessment, information gathering is only one piece of the process. A large portion of the process is providing education and preparing adoptive applicants for long-term success during challenging times. Engaging in "what-if" scenarios and talking through how to handle difficult situations independently is a natural part of the adoption home assessment process that is equally as important. Adoptive families do not have the support of the child welfare system after a finalization so preparing, educating, and providing resources is necessary to assess and ensure a family can maintain a stable and healthy family unit now and in the future.

#### Understanding a Family Unit

- Another important component of an adoption home assessment is gathering insight into immediate family member's attitudes and feelings about adoption and committing to a non-biological child for a lifetime. Ensuring members of the family unit are in support of an adoption plan is vital to the long-term commitment of adoptive parents and immediate family members.

NDAC 75-03-36-31 (4) addresses minimally what needs to be assessed and included in an adoption home assessment in North Dakota. All requirements are not assessed in a foster care home assessment so would not suffice under NDAC.

It is important to view the adoption home assessment process as a specialty practice. For example, if a child went in for a check-up and their primary pediatrician indicates they determine the child is experiencing speech delays, that provider is not going to treat the child on their own. They will make a referral to a speech pathologist who will assess the child, educate the parents, and offer specific tools for success. In this scenario, consider adoption as the speech pathologist. Engaging with a professional who specializes in the field and can adequately equip adoptive parents to be the most successful in their family unit is what is necessary.



\*Child Welfare Information Gateway. (2021). Discontinuity and disruption in adoptions and guardianships. U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. <https://www.childwelfare.gov/pubs/s-discon>