

ND Levels of Foster Care: NDCC 50-06-06.14. *Requires the human service zones to explore the option of kinship care if a child is unable to return home due to safety concerns. Absent kinship options, the human service zones shall provide permanency options that are least restrictive and near the family's home. A child in foster care can enter and exit any level of care noted below dependent on their eligibility and presenting needs.*

Note: Psychiatric Residential Treatment Facilities (PRTF), substance use disorder (SUD) treatment, acute hospitalizations, and detention are not foster care placements.

	Prevention Placements		Foster Care Placements			18+ Placement Option
	Shelter Care (Certified Program or Licensed Family)	Unlicensed Relative	Family Foster Care	Treatment Foster Care (Nexus-PATH)	Qualified Residential Treatment Program (QRTP)	Supervised Independent Living (SIL)
Parameter	Present danger exists and a child is in need of temporary safe care, referred by: ✓ Zone CPS, In-Home and Foster Care (family setting or certified program) ✓ Tribal Nations and Division of Juvenile Services (certified program)	Unlicensed relative providing care to children. ✓ In relative care who never enter foster care ✓ In foster care under the custody of a Zone, Division of Juvenile Services, or a Tribal Nation	Licensed foster home providing care to children. ✓ In foster care under the custody of a Zone, Division of Juvenile Services, or a Tribal Nation. ✓ In 18+ Continued Care (ages 18 thru 20) under placement and care of a Zone or a Tribal Nation.	Licensed treatment foster home providing least restrictive treatment to children. ✓ In foster care under the custody of a Zone, Division of Juvenile Services, or a Tribal Nation.	Licensed foster care facility providing 24- hour treatment for children. ✓ In foster care under the custody of a Zone, Division of Juvenile Services, or a Tribal Nation. ✓ Pre-approved for the Behavioral Health Voluntary Treatment Program.	In addition to a licensed family home or a college dorm, an SIL is a licensed setting managed by an agency specifically intended for 18+ Continued Care youth under placement and care of a Zone or a Tribal Nation.
Child Age	0 thru 17 Licensed Family 10 thru 17 Certified Program	0 thru 20	0 thru 20	6 thru 17	10 thru 17	18 thru 20
Presenting Child Need	<ul style="list-style-type: none">• Behavior is typical for age and can be easily redirected• Acting out in response to traumatic stress, but episodes are brief and/or temporary.	<ul style="list-style-type: none">• Behavior is typical for age and can be easily redirected• Medically fragile infants (ex. substance exposed)• May present occasional grief, loss, anger, depression, anxiety, defiance, substance use, intentional misbehavior, running away or school difficulties.• Acting out in response to traumatic stress, but episodes are brief and/or temporary.	<ul style="list-style-type: none">• Behavior is typical for age and can be easily redirected• Medically fragile infants (drug exposed newborns)• May present occasional grief, loss, anger, depression, anxiety, defiance, substance use, intentional misbehavior, running away or school difficulties.• Acting out in response to traumatic stress, but episodes are brief and/or temporary.	<ul style="list-style-type: none">• Behavior requires additional services, supports, planning and provider training to meet the child’s needs.• Co-occurring mental and behavioral health needs, which may present a danger to self or others, including self-harm or suicide risk that can be managed with a safety plan, emotional or impulsive aggression, traumatic stress, anxiety, defiance, impulsivity, hyperactivity, running away, sexualized behavior, self-care/hygiene, animal cruelty substance use or running away where the likelihood to be victimized is high.• May also have Intellectual or Developmental Disabilities	<ul style="list-style-type: none">• Behavior requires additional services, supports, planning and specialized training provided by clinical staff to meet the child’s needs.• Frequent co-occurring mental and behavioral health needs which may present a danger to self or others.• Frequent emotional or impulsive aggression, psychosis, anxiety, depression, defiance, impulsivity, hyperactivity, running away, anger control, self-harm, sexual exploitation, suicide risk, self-injurious behavior, substance use and/or sexual aggression.• Not acutely suicidal or homicidal.	<ul style="list-style-type: none">• Aged out of North Dakota foster care• Behavior may be typical for age and can be redirected• Experienced or currently experiencing behavioral health needs including substance use.• Acting out in response to life stressors, but episodes are brief/ temporary and easily redirected.• Currently working or in school.
Level of Care details	<ul style="list-style-type: none">• Served by outpatient community resources• Public School• In-home supports	<ul style="list-style-type: none">• Served by outpatient community resources• Public School• In-home supports• Respite	<ul style="list-style-type: none">• Served by outpatient community resources• Public School• In-home supports• Respite	<ul style="list-style-type: none">• Formal assessment completed by 3rd party, approving/denying placement.• Eligibility is reviewed every 180 days• Served by outpatient community resources (therapy, med management, etc.)• Additional in-home supports• Ongoing Respite	<ul style="list-style-type: none">• Formal assessment completed by 3rd party, approving/denying placement.• Eligibility is reviewed every 90 days.• Trauma informed treatment offered by a clinical team.• 6 months aftercare support.	<ul style="list-style-type: none">• Served by outpatient community services• Additional case management• Supportive services to transition to adulthood
Length of Stay	7 -14 days max	Unlimited	Unlimited, with goal of 12 months	12 months	3 to 6 months	Unlimited for ages 18 thru 20