

FASD Foster Care Training Requirement



CENTER FOR FASD
JUSTICE & EQUITY

Summary

In 2016, Minnesota became the first state to require that foster parents be trained on Fetal Alcohol Spectrum Disorders.

Purpose

Among children in foster care researchers have found that rates of FASD are as much as 10 times higher than in the general population, because foster children often come from families with histories of alcohol use disorders. Requiring foster parents to be trained on FASD can provide foster parents with tools and strategies for effectively caring for children with an FASD. Preparing families can improve outcomes for youth and reduce the incidence rates of multiple out of home placements.

Model Legislation

Section 1. {Title.} CHILD FOSTER CARE TRAINING REQUIREMENT; MENTAL HEALTH TRAINING; FETAL ALCOHOL SPECTRUM DISORDERS TRAINING.

Prior to a nonemergency placement of a child in a foster care home, the child foster care license holder and caregivers in foster family and treatment foster care settings, and all staff providing care in foster residence settings must complete two hours of training that addresses the causes, symptoms, and key warning signs of mental health disorders; cultural considerations; and effective approaches for dealing with a child's behaviors. At least one hour of the annual training requirement for the foster family license holder and caregivers, and foster residence staff must be on children's mental health issues and treatment. The annual training must also include one hour of training on fetal alcohol spectrum disorders within the first 12 months of licensure. After the first 12 months of licensure, training on fetal alcohol spectrum disorders may count toward the 12 hours of required in-service training per year. Short-term substitute caregivers are exempt from these requirements. Training curriculum shall be approved by the commissioner of human services.