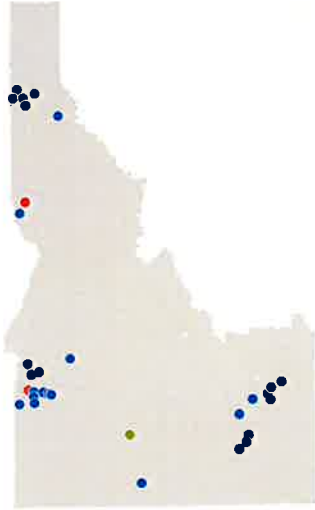


# State Oversight of Children's Residential Care

June 2025

## Report highlights

**The entities responsible for keeping children safe in residential care face coordination and process challenges that impede safety.**



Idaho had **30** residential care facilities, **2** of which provide psychiatric care. There is **1** therapeutic outdoor program.

Only **10 of 271** Licensing surveys from 2016 to 2024 led to enforcement actions.

The state spent **\$30 million** on residential care placements for children in foster care in fiscal year 2024.

**216** children in foster care lived in facilities in December 2024.

The proportion of youth in foster care with facility placements increased from **8 to 17%** from fiscal years 2017 to 2024.



View the report at  
[www.legislature.idaho.gov/ope](http://www.legislature.idaho.gov/ope)

**The department does not investigate abuse in facilities the same way it does in homes.**

The department does not have processes for investigating abuse in facilities or including facility staff on Idaho's Child Protection Central Registry. Case workers are not required to respond to safety issues for children in facilities as quickly as for other children in foster care.

**Children do not have their rights enumerated and communicated.**

Idaho lacks a set of rights for children in facilities. A set of rights would let children and families understand when their rights are being violated and who to contact if their rights are violated.

**Children placed out of state have less oversight.**

Department staff visit out-of-state facilities and children less frequently and less in person. The department has no formal process to discover licensing violations for out-of state facilities.

**The new state-run facility faces oversight concerns.**

From May to December 2024, 53 youth in foster care were placed at the Payette Assessment and Care Center. The facility is not overseen by contract monitors the same way other facilities are. After licensing violations, it was issued a provisional license in November 2024.



## Key considerations for the Legislature

- 1) Assign an entity responsible for investigating abuse in facilities
- 2) Amend statute to require that facilities follow, post, distribute, and interpret a bill of rights for children



## Key recommendations for the department

- 1) Require at least one annual unannounced Licensing site visit
- 2) Develop a department-wide protocol to define communication and issue escalation across divisions



# CHILDREN'S RESIDENTIAL CARE PATHWAY

## THERE ARE THREE PATHS INTO CHILDREN'S RESIDENTIAL CARE:

**PARENTAL PLACEMENT**

**DHW PLACEMENT OF FOSTER CHILDREN**

**DHW REFERRAL QUALIFYING FOR SPECIAL SERVICES\***

\*such as a behavioral or developmental need



Contracts and licensing and payers (i.e., Medicaid or private insurance) have oversight.

## ESCALATION PATH IN CHILDREN'S RESIDENTIAL CARE FACILITIES

Anyone can report a concern to the department via **Central Intake** or **Licensing and Certification (L&C) concern line**.

Complaint is screened and assigned priority response for investigation.

L&C is primary contact for updating and communicating investigation progress.

L&C coordinates with law enforcement, if applicable, and notifies Child, Youth, and Family Services (CYFS) contracts.

L&C and CYFS Contracts leadership meet within two business days for Priority 1 or 2 investigations.

### L&C

- Ensure safety interventions and perpetrator removal. Coordinate with law enforcement.
- Investigate facility role in timely and quality preventing, reporting, investigating, and mitigating the abuse or concerns.
- Investigate facility non-compliance contributing to concerns such as inadequate training, or inappropriate discipline or restraint use.

### CONTRACT MONITOR

- Ensure all children placed are safe and facility is responding immediately to concerns. Monitor for reporting retaliation and ensure children receive services.
- Make decisions about future placements while investigations are pending.
- Investigate quality of care concerns and access to treatment. Update Medicaid as needed.

### CASE WORKER

- Ensure child's needs are met and that placement in the facility is still appropriate.
- Monitor for child's ongoing safety or treatment needs while investigation ongoing.
- Coordinate with congregate care team for decisions about alternate placements if indicated.

**Communicate Findings**  
L&C and CYFS contract monitor share their investigative findings and any corrective actions.

### Ongoing Monitoring

Ad hoc meetings between CYFS and L&C to track facility progress and monitor plans of correction.

Track for trends or concerns based on reported events or incident reports.