To amend the Child Abuse Prevention and Treatment Act to improve plans of safe care for infants affected by illegal substance abuse or withdrawal symptoms, or a Fetal Alcohol Spectrum Disorder, and for other purposes.

IN THE SENATE OF THE UNITED STATES

introduced the following bill; which was read twice and referred to the Committee on

A BILL

To amend the Child Abuse Prevention and Treatment Act to improve plans of safe care for infants affected by illegal substance abuse or withdrawal symptoms, or a Fetal Alcohol Spectrum Disorder, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the “Plan of Safe Care Improvement Act”.

SEC. 2. STATE PLANS.

Section 106(b)(2)(B)(iii) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)) is
amended by striking clause (iii) and inserting the following:

“(iii) policies and procedures that require—

“(I) the development of a plan of safe care for an infant born and identified as being affected by illegal substance abuse or withdrawal symptoms or a Fetal Alcohol Spectrum Disorder; and

“(II) the development and implementation by the State of monitoring systems regarding the plan of safe care to—

“(aa) ensure the safety and well-being of children;

“(bb) address the health, including mental health, needs of the child and family involved; and

“(cc) determine whether local entities are capable of providing referrals to and delivery of appropriate services for the child and family;”.
SEC. 3. DATA REPORTS.

(a) In General.—Section 106(d) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(d)) is amended by adding at the end the following:

“(18) The number of infants for whom a plan of safe care, as referred to in subsection (b)(2)(B)(iii), was developed.”.

(b) Rule of Construction.—In section 802(b)(2) of the Justice for Victims of Trafficking Act of 2015 (Public Law 114–22; 129 Stat 264), the reference to “adding at the end” shall be considered to refer to “inserting after paragraph (16)”.

SEC. 4. MONITORING.

Section 106 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a) is amended by adding at the end the following:

“(g) Monitoring.—The Secretary shall conduct monitoring of States to ensure that each State is meeting the requirements of subsection (b)(2)(B)(iii) to improve outcomes among children who are most at risk for child abuse and neglect.”.

SEC. 5. BEST PRACTICES FOR PLANS OF SAFE CARE.

Not later than 90 days after the date of enactment of this Act, the Secretary of Health and Human Services shall issue guidance to States regarding the requirements and best practices for the development and implementa-
tion of plans of safe care, as referred to in section 106(b)(2)(B)(iii) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(iii)). In developing the guidance, the Secretary shall seek and take into consideration input from all appropriate offices within the Department of Health and Human Services, including the Administration for Children and Families, the Centers for Medicare & Medicaid Services, the Centers for Disease Control and Prevention, the Substance Abuse and Mental Health Services Administration, and the National Institutes of Health, and from the Department of Education.