1 AN ACT relating to services for children and transition-age youth.

## 2 Be it enacted by the General Assembly of the Commonwealth of Kentucky:

3 → Section 1. KRS 200.501 is amended to read as follows:

- 4 The Kentucky General Assembly finds that services to children and transition-age youth 5 are provided by various departments and agencies at both the state and local level, often 6 without appropriate policy collaboration and service coordination. The General Assembly 7 declares that the purpose of KRS 200.501 to 200.509 is to establish a structure for 8 coordinated policy development, comprehensive planning, and collaborative budgeting 9 for services and supports to children and transition-age youth with or at risk of 10 developing behavioral health needs an emotional disability or severe emotional disability] and their families. It is further the intention of the General Assembly to build 11 12 on the existing resources and to design and implement a system of care for children and 13 transition-age youth with or at risk of developing behavioral health needs [coordinated 14 service system for children with an emotional disability or severe emotional disability 15 that is community based, family- and youth-driven, and culturally and linguistically 16 competent[ and centered on the needs of the individual child and family]. Children and 17 transition-age youth who meet criteria for a serious[ with a severe] emotional disability, including a co-occurring substance use disorder, and who are placed outside their 18 19 homes to address unmet behavioral health needs receiving institutional care or are at 20 risk of institutional placement] shall be given priority for services and supports pursuant 21 to KRS 200.501 to 200.509.
- Section 2. KRS 200.503 is amended to read as follows:
- As used in KRS 200.501 to 200.509, unless the context otherwise requires:
- 24 (1) "Child with a behavioral health need" means a child <u>or transition-age youth</u> with, 25 or at risk of developing, an emotional disability, substance <u>use[abuse]</u> disorder, or 26 mental, emotional, or behavioral needs;
- 27 (2) "Child with an emotional disability" means a child <u>or transition-age youth</u> with a

1	clinically significant disorder of thought, mood, perception, orientation, memory, or
2	behavior that is listed in the current edition of the American Psychiatric
3	Association's Diagnostic and Statistical Manual of Mental Disorders and seriously
4	limits a child's capacity to function in the home, school, or community;

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- "Child with a <u>serious[severe]</u> emotional disability" means a child <u>or transition-age</u> (3) **youth** with a clinically significant disorder of thought, mood, perception, orientation, memory, or behavior that is listed in the current edition of the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders and that:
  - Presents substantial limitations that have persisted for at least one (1) year or (a) are judged by a mental health professional to be at high risk of continuing for one (1) year without professional intervention in at least two (2) of the following five (5) areas: "Self-care," defined as the ability to provide, sustain, and protect his or herself at a level appropriate to his or her age; "Interpersonal relationships," defined as the ability to build and maintain satisfactory relationships with peers and adults; "Family life," defined as the capacity to live in a family or family type environment; "Self-direction," defined as the child's ability to control his or her behavior and to make decisions in a manner appropriate to his or her age; and "Education," defined as the ability to learn social and intellectual skills from teachers in available educational settings; <del>or]</del>
  - Is a Kentucky resident and is receiving residential treatment for emotional disability through the interstate compact; [or]
  - The Department for Community Based Services has removed the child from (c) the child's home and has been unable to maintain the child in a stable setting due to behavioral *health needs* [or emotional disturbance]; or
- 27 Is a person under twenty-one (21) years of age meeting the criteria of (d)

1		paragraph (a) of this subsection and who was receiving services prior to age
2		eighteen (18) that must be continued for therapeutic benefit;
3	(4)	["State Family Advisory Council" means the council composed of all parent
4		members or alternate parent members of the state, regional, and local interagency
5		councils for services to children with a behavioral health need pursuant to KRS
6		200.505 and 200.509 and all parent members of regional policy councils; and
7	(5)	-]"Least restrictive alternative mode of treatment" means treatment given in the least
8		confining setting which will provide a child or transition-age youth with an
9		emotional disability or <u>serious</u> [severe] emotional disability appropriate treatment or
10		care consistent with accepted professional practice. For purposes of this section,
11		least restrictive alternative mode of treatment may include an institutional
12		placement;
13	<u>(5)</u>	"System of care" means a spectrum of effective, community-based services and
14		supports for children and transition-age youth with or at risk of developing
15		behavioral health needs and their families, that is organized into a coordinated
16		network, builds meaningful partnerships with families and youth, and addresses
17		their cultural and linguistic needs, in order to help them to function better at
18		home, in school, in the community, and throughout life; and
19	<u>(6)</u>	"Transition-age youth" means individuals between the ages of sixteen (16) and
20		twenty-five (25).
21		→ Section 3. KRS 200.505 is amended to read as follows:
22	Ther	e is hereby created a State Interagency Council for Services and Supports to
23	Chile	dren and Transition-Age Youth. The chairperson of the council shall be designated
24	by th	e Governor and shall establish procedures for the council's internal procedures.
25	(1)	This council shall be composed of the following:
26		(a) Members who shall serve by virtue of their positions: the commissioner of the
27		Department of Education, the commissioner of the Department for Behavioral

Page 3 of 15 SB020110.100 - 1374 - XXXX

Health, Developmental and Intellectual Disabilities, the commissioner of the Department for Community Based Services, the commissioner of the Department for Public Health, the commissioner of the Department for Medicaid Services, the commissioner of the Department of Juvenile Justice, the director of the Division of Family Resource and Youth Services Centers, the executive director of the Commission for Children with Special Health Care Needs, the executive officer of the Department of Family and the general manager of the Division of Juvenile Services of the Administrative Office Offices of the Courts, the chair of the Subcommittee for Equity and Justice for all Youth of the Juvenile Justice Advisory Board, the executive director of the Kentucky Housing Corporation, the executive director of the Kentucky Office of Vocational Rehabilitation, and the president of the Council on Postsecondary Education, or their designees;

The <u>chairperson of the council</u>[Governor] shall appoint one (1) parent of a child <u>or transition-age youth</u> with a behavioral health need, who is a consumer of <u>state-funded</u>] services <u>and supports within the system of care</u>[for children with a behavioral health need] to serve as a member of the council, and one (1) parent who meets the same criteria to serve as the parent member's alternate to serve in the absence of the parent member. For each appointment to be made, the State <u>Interagency Council for Services and Supports to Children and Transition-Age Youth shall vote on nominations submitted by members. The nominee receiving the most votes shall be appointed [Family Advisory Council shall submit to the Governor a list of two (2) names of parents who are qualified for appointment from which list the Governor shall make the appointment]. Appointees shall serve a term of <u>two</u> (2) [four (4)] years <u>and may be reappointed to additional two (2) year terms</u>. If the child of the parent member or alternate parent member ceases to be a</u>

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care [for children with a behavioral health need] during the term of appointment, the member shall be eligible to serve out the remainder of the term of appointment. The alternate parent member may attend and participate in all council meetings but shall vote only in the absence of the parent member. The parent member and alternate parent member shall receive no compensation in addition to that which they may already receive as service providers or state employees who are required to attend as part of their duties, but the parent member and alternate parent member shall be reimbursed for expenses incurred through the performance of their duties as council members if it is outside the scope of their job duties;

The chairperson of the council shall appoint one (1) youth between the ages of (c) sixteen (16)[fourteen (14)] and twenty-five (25), behavioral[mental] health disorder[ or co-occurring disorder] and who is receiving or has received services to address mental health, substance use, or co-occurring mental health and substance use disorder been a consumer of state-funded services for children with a behavioral health need], to serve as a member of the council, and one (1) youth who meets the same criteria to serve as the youth member's alternate in the absence of the youth member. For each appointment to be made, the State Interagency Council for Services and Supports to Children and Transition-Age Youth shall vote on nominations submitted by members. The nominee receiving the most votes shall be appointed[Statewide Youth Council of the Kentucky Partnership for Families and Children shall submit to the chairperson a list of four (4) names of youth who are qualified for appointment, from which list the chairperson shall make the appointment]. Appointees shall serve a term of two (2) years and may be reappointed to additional two (2) year terms, and the youth member and the

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youth member's alternate shall be eligible to serve out the remainder of their term of appointment regardless of age. The alternate youth member may attend and participate in all council meetings but shall vote only in the absence of the youth member. The youth member and alternate youth member shall receive no compensation in addition to that which they may already receive as service providers or state employees who are required to attend as part of their duties, but the youth member and alternate youth member shall be reimbursed for expenses incurred through the performance of their duties as council members if it is outside the scope of their job duties; [and]

The chairperson of the council shall appoint one (1) member of a nonprofit family organization representing consumers of services and supports within the system of care whose membership, leadership, and governance include parents, primary caregivers, or children or transition-age youth with serious emotional, behavioral, or mental health needs, to serve as a member of the council. For each appointment to be made, the chair shall publicly post on the State Interagency Council for Services and Supports to Children and Transition-Age Youth Web site a solicitation for letters of interest from qualified organizations and submit all qualified responses to a vote of the full membership. The organization which receives the most votes shall designate a representative to serve a term of two (2) years, and may be reappointed to additional two (2) year terms. The family organization member shall receive no compensation in addition to that which the member may already receive as an employee who is required to attend as part of his or her duties, but shall be reimbursed for expenses incurred through the performance of duties as a council member if it is outside the scope of his or her job duties; and

(e) At the end of a term, a member shall continue to serve until a successor is

1			appointed.				
2	(2)	The	State Interagency Council for Services and Supports to Children and				
3		<u>Transition-Age Youth</u> shall:					
4		(a)	[Consider issues and ]Make recommendations annually to the Governor and				
5			the Legislative Research Commission regarding the <u>system of care</u> [provision				
6			of services] for children and transition-age youth with or at risk of				
7			<u>behavioral health needs</u> [an emotional disability];				
8		(b)	Direct each regional interagency council to:				
9			1. Operate as the regional locus of accountability for the system of				
10			care[Coordinate services to children with an emotional disability and				
11			identify factors contributing to a lack of coordination]; and				
12			2. Participate in family accountability, intervention, and response teams				
13			established pursuant to KRS 605.035;				
14		(c) <del>[</del>	Develop a form to be signed by the parent or other legal guardian of a child				
15			referred for services to any interagency council for children with a behavioral				
16			health need. The form shall enable the agencies involved with the child to				
17			share information about the child as necessary to identify and provide services				
18			for the child;				
19		<del>(d)</del>	Review service and treatment plans for children for whom reviews are				
20			requested, and provide any advice and assistance that the state council				
21			determines to be necessary to meet the needs of children with a behavioral				
22			health need referred by regional councils;				
23		<del>(e)]</del>	Assess the effectiveness of regional councils in serving as the locus of				
24			accountability for the system of care for children and transition-age youth				
25			with or at risk of behavioral health needs [meeting the service needs of				
26			children with a behavioral health need;				
27		<del>(f)</del>	Establish a uniform grievance procedure for the state, to be implemented by				

Page 7 of 15
SB020110.100 - 1374 - XXXX GA

1		each regional interagency council. Appeals may be initiated by the child,
2		parent, guardian, person exercising custodial control or supervision, or other
3		authorized representative about matters relating to the interagency service plan
4		for the child or the denial of services by the regional interagency council.
5		Upon appeal, an administrative hearing shall be conducted in accordance with
6		KRS Chapter 13B];
7		$(\underline{d})$ [(g)] Meet at least monthly and maintain records of meetings[, except that
8		records that identify individual children shall only be disclosed as provided by
9		<del>law]</del> ; <u>and</u>
10		(e)[(h) Adopt interagency agreements as necessary for coordinating services to
11		children with a behavioral health need by the agencies represented in the state
12		council;
13		(i)] Develop <u>a comprehensive array of</u> services <u>and supports</u> to meet the needs of
14		children and transition-age youth with or at risk of developing [with a]
15		behavioral health <u>needs</u> {need; and
16		(j) Promote services to prevent the behavioral health need of a child].
17	(3)	Agencies represented on the state council shall adopt interagency agreements as
18		necessary to advance the system of care.
19	<u>(4)</u>	The State Interagency Council for Services <u>and Supports</u> to Children <u>and</u>
20		<u>Transition-Age Youth</u> may promulgate administrative regulations necessary to
21		comply with the requirements of KRS 200.501 to 200.509.
22		→ Section 4. KRS 200.507 is amended to read as follows:
23	[The	secretary for health and family services, the designee of the State Department of
24	Educ	cation, and the executive director of the Administrative Offices of the Courts shall
25	ensu	re that the State Interagency Council for Services to Children with an Emotional
26	Disa	bility is formed by August 1, 1990. ]No member of the State Interagency Council
27	shall	receive compensation other than that received as a state employee, except that the

Page 8 of 15 SB020110.100 - 1374 - XXXX

1	parent	and	youth	members,	alternate	parent	and	youth	members,	and fa	mily
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- 3 performance of their duties as council members.
- 4 → Section 5. KRS 200.508 is amended to read as follows:
- 5 A child <u>or transition-age youth</u> with <u>a serious[an]</u> emotional disability and the parent,
- 6 person exercising custodial control or supervision, or guardian of that <u>individual</u>[child]
- 7 shall have the same rights as anyone receiving behavioral health services through a
- 8 *provider*, and [right to]:
- 9 (1) Be adequately informed as to priorities, philosophy, and policies of the regional interagency council;
- 12 (2) Be informed in advance of scheduled regional or local interagency council<del>[ and interagency service planning] meetings[ relevant to services to the child];</del>
- 13 (3) <u>Be informed of behavioral health services and supports available to children and</u>
  14 transition-age youth within their community [Participate in the development of the
- interagency service plan and revisions thereto]; and
- (4) Be adequately informed as to the interagency service plan and any revisions thereto
   and receive a written copy of the plan;
- 18 (5) Refuse the interagency service plan;
- 19 (6) Access and utilize established grievance procedures without discontinuation or delay of needed services while the grievance is pending;
- 21 (7) Access all child-specific pertinent records and information accumulated by the
- 22 regional interagency council, provided that the release of the information is not
- 23 prohibited by existing state and federal laws or regulations governing
- 24 confidentiality;
- 25 (8) Consult with existing advocacy groups for consultation and representation [; and
- 26 (9) Receive an orderly transition to other available services if eligibility for regional

27 <u>interagency council services is ending</u>].

Page 9 of 15 SB020110.100 - 1374 - XXXX

→ Section 6. KRS 200.509 is amended to read as follows:

There are hereby created regional interagency councils for <u>the system of care</u>[services to children with a behavioral health need]. These councils shall be formed in each area development district within the Commonwealth of Kentucky, except that those area development districts that contain a county with a population greater than one hundred thousand (100,000) may form up to three (3) such councils. The regional interagency councils[ for services to children with a behavioral health need] shall be chaired by <u>one (1) member, chosen by a majority vote of the members</u>[the service region administrator of the Department for Community Based Services or a program specialist with expertise in this service area as the district supervisor's designee]. Each council shall be composed of the following members:

- (a) The children's services <u>director</u>[coordinator] from each regional community mental health center or their designee[ in the case of a multicouncil district];
- (b) One (1) court-designated <u>specialist or court-designated</u> worker chosen by the <u>executive officer of the Department of Family and Juvenile Services of the Administrative Office of the Courts</u>[Chief Regional District Judge within the region];
- (c) One (1) [ specialist in] special education <u>cooperative representative with</u>

  <u>behavioral health experience</u> chosen by the <u>directors of cooperatives</u> [school district superintendents] in the area served by the regional council;
- (d) One (1) parent of a child with a behavioral health need, who is <u>or has been</u> a consumer of <u>system of care</u>[state-funded] services <u>and supports</u>[for children with a behavioral health need], and one (1) parent who meets the same criteria to serve as the parent member's alternate, who may attend and participate in all council meetings, but shall vote only in the absence of the parent member. For each appointment to be made, the regional interagency council for which

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Interagency Council for Services and Supports to Children and Transition
Age Youth [Governor] a list of two (2) names of parents who are qualified for appointment from which list the chair of the State Interagency Council for Services and Supports to Children and Transition-Age Youth [Governor] shall make the appointment. Appointees shall serve a term of two (2) [four (4)] years, and may be reappointed to additional two (2) year terms. If the child of the parent member or alternate parent member ceases to be a consumer of system of care [state funded] services and supports [for children with an emotional disability] during the term of appointment, the member shall be eligible to serve out the remainder of the term of appointment;

One (1) transition-age youth who has a behavioral health disorder and who (e) is receiving or has received a service to address mental health, substance use, or co-occurring mental health and substance use disorder, and one (1) transition-age youth who meets the same criteria to serve as the youth member's alternate in the absence of the youth member. For each appointment to be made, the regional interagency council for which the appointment is to be made shall submit to the chair of the State Interagency Council for Services and Supports to Children and Transition-Age Youth a list of two (2) names of transition-age youth who are qualified for appointment from which list the chair of the State Interagency Council for Services and Supports to Children and Transition-Age Youth shall make the appointment. Appointees shall serve a term of two (2) years, and may be reappointed to additional two (2) year terms. If the youth member or alternate youth member ceases to be a consumer of system of care services and supports during the term of appointment, the member shall be eligible to serve out the remainder of the term of appointment;

1		<u>(f)</u>	Any other local public or private agency that provides services and supports					
2			to children and transition-age youth with a behavioral health needs need					
3			which the regional interagency council may invite to have a representative					
4			become a permanent or temporary member of the council; and					
5		<u>(g)</u> [(	(f)] One (1) representative [Representatives] from each of the Department of					
6			Juvenile Justice, family resource and youth services centers, the Kentucky					
7			Office of Vocational Rehabilitation, the Department for Community Based					
8			Services, and local health departments.					
9	(2)	No	member of a regional interagency council for services to children with a					
10		beha	avioral health need shall be given compensation in addition to that which they					
11		alrea	ady receive as service providers or state employees, except that the parent and					
12		yout	<u>th</u> members and alternate parent <u>and youth</u> members of regional interagency					
13		cour	ncils shall be reimbursed by the regional interagency council's contracted					
14		fisco	<u>fiscal agent</u> for all expenses incurred through the performance of their duties as					
15		cour	ncil members if it is outside the scope of their job duties.					
16	(3)	Eacl	n regional interagency council for services to children with a behavioral health					
17		need	I shall perform the following functions:					
18		(a)	Conduct regional system of care planning and operations [Review case					
19			histories of children referred to it by its members or any other entity within its					
20			geographical area to coordinate service provision];					
21		(b)	Coordinate system-level continuous quality improvement [the development of					
22			interagency service plans for children with a behavioral health need in the					
23			least restrictive alternative mode of treatment];					
24		(c)	Identify and develop system of care expansion opportunities [the time frames					
25			necessary and the parties responsible for the timely development of the					
26			interagency service plans for children with a behavioral health need];					
27		(d)	Promote awareness of the system of care[Verify that services identified in					

Page 12 of 15 SB020110.100 - 1374 - XXXX

1			interagency service plans are developed, accessed, and delivered in a
2			coordinated and timely manner];
3		(e)	Initiate and adopt interagency agreements as necessary for providing services
4			and supports to children and transition-age youth with or at risk of [a]
5			behavioral health <u>needs[need]</u> by the agencies represented in the regional
6			council;
7		(f)	Advise the state interagency council regarding the system of care[service
8			delivery to children with a behavioral health need] within the region; <u>and</u>
9		(g) <del>[</del>	Refer those children for whom the regional councils cannot provide adequate
10			services to the state interagency council;
11		<del>(h)</del>	Implement the uniform grievance procedure established by the state
12			interagency council;
13		<del>(i)</del>	Make periodic reports to the state interagency council regarding the number of
14			children referred to the regional council and the progress made in meeting the
15			needs of each child;
16		<del>(j)</del>	Recognize local interagency councils for services to children with a behavioral
17			health need when it determines the council would be beneficial to service
18			<del>delivery;</del>
19		<del>(k)]</del>	Participate in family accountability, intervention, and response teams
20			established pursuant to KRS 605.035[; and
21		<del>(1)</del>	Promote services to meet the behavioral health need of a child].
22	(4)	The	secretary for health and family services and the designee of the State
23		Depa	artment of Education shall ensure that regional councils for services to children
24		with	a behavioral health need are formed.
25	(5)	Loca	l interagency councils for the system of care[services to children with a
26		beha	vioral health need] may be formed at the discretion of a regional interagency
27		coun	cil to advance the functions of the regional interagency council at the city,

Page 13 of 15 SB020110.100 - 1374 - XXXX

1		<u>cour</u>	nty, or other local community level[as necessary to enhance service provision,						
2		bette	better coordinate services, or initiate special projects and fundraising activities for						
3		chile	children with a behavioral health need within a city, county, or other local						
4		com	community].						
5		<b>→</b> S	ection 7. KRS 605.035 is amended to read as follows:						
6	(1)	The	re is hereby created in each judicial district a family accountability, intervention,						
7		and	response team that shall develop enhanced case management plans and						
8		oppo	ortunities for services for children referred to the team. The family						
9		acco	ountability, intervention, and response team shall consist of not more than						
10		fifte	en (15) persons.						
11	(2)	The	membership of the team shall include the following representatives as						
12		appo	pinted by their agencies or organizations:						
13		(a)	A court-designated worker in that judicial circuit or district;						
14		(b)	One (1) or more [The] members, one (1) of whom shall be a representative of						
15			the community mental health center, of the regional interagency council						
16			specified in KRS 200.509(1)(a) to (d) and (g)[(f)], or corresponding members						
17			of the local interagency council if one exists;						
18		(c)	A representative from the cabinet knowledgeable about services available						
19			through the cabinet and authorized to facilitate access to services;						
20		(d)	A representative from the office of a county attorney within the judicial						
21			district;						
22		(e)	A representative from the Department of Public Advocacy;						
23		(f)	A representative from a local public school within the judicial district;						
24		(g)	A representative of law enforcement; and						
25		(h)	Other persons interested in juvenile justice issues, as identified by the family						
26			accountability, intervention, and response team, who are necessary for a						
27			complete representation of resources within each judicial circuit or district.						

Page 14 of 15
SB020110.100 - 1374 - XXXX
GA

1 (3) A court-designated worker from within the judicial circuit or district shall lead the 2 team and be responsible for convening and staffing the team.

- 3 (4) The team shall adopt a case management approach and process for reviewing:
- 4 (a) Referrals from the court-designated worker involving cases in which a child has failed to appear for a preliminary intake inquiry, declined to enter into a diversion agreement, or failed to complete the terms of the agreement; and
- 7 (b) Status offense cases if the court-designated worker, after reviewing the complaint, has determined that no further action is necessary.
  - (5) After reviewing the actions taken by the court-designated worker, including referrals made for the child and his or her family, efforts to address barriers to successful completion, and whether other appropriate services are available to address the needs of the child and his or her family, the team may:
    - (a) Refer the case back to the court-designated worker to take further action as recommended by the team; or
    - (b) Advise the court-designated worker to refer the case to the county attorney if the team has no further recommendations to offer.
- → Section 8. KRS 194A.120 is amended to read as follows:

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only in an advisory capacity.

The Commission for Children with Special Health Care Needs and the State Interagency
Council for Services *and Support* to Children *and Transition-age Youth* shall be the
only statutory bodies attached to the cabinet that shall have the authority to issue
administrative regulations. No other corporate body or instrumentality of the
Commonwealth, advisory committee, interstate compact, or other statutory body,
presently attached to the cabinet, shall issue administrative regulations but shall operate