75th Oregon Legislative Assembly – 2009 Juvenile Dependency Law Updates
Presented by: Rebecca Orf
Staff Measure Summaries and Enrolled Bills

MEASURE: **HB 2063 A**
CARRIER: **Sen. Prozanski**

REVENUE: No revenue impact
FISCAL: Minimal fiscal impact, no statement issued

Action:		Do Pass the A-Engrossed Measure
Vote:		4 - 0 - 1
	Yeas:	Bonamici, Boquist, Dingfelder, Prozanski
	Nays:	0
	Exc.:	Whitsett
Prepared By:		Lisa Nuss, Counsel
Meeting Dates:		5/12

WHAT THE MEASURE DOES: Adds employees of the Teacher Standards and Practices Commission directly involved in investigations or discipline by the commission to list of persons required to report child abuse. Declares emergency; effective on passage.

ISSUES DISCUSSED:

- Bill came out of an interim work group
- Employees not involved with investigations or discipline are separated from those issues

EFFECT OF COMMITTEE AMENDMENT: No amendment.

BACKGROUND: ORS 419B.010 provides that any public or private official having reasonable cause to believe that child abuse has occurred shall immediately report the matter to the local office of the Department of Human Services or a local law enforcement agency. This bill adds certain employees of the Teacher Standards and Practices Commission to the list of public and private officials required to report under ORS 419B.010.

Enrolled
House Bill 2063

Ordered printed by the Speaker pursuant to House Rule 12.00A (5). Presession filed (at the request of House Interim Committee on Education)

CHAPTER .....

AN ACT

Relating to mandatory reporting of child abuse; amending ORS 419B.005; and declaring an emergency.

Be It Enacted by the People of the State of Oregon:

SECTION 1. ORS 419B.005 is amended to read:

419B.005. As used in ORS 419B.005 to 419B.050, unless the context requires otherwise:

(1)(a) "Abuse" means:

(A) Any assault, as defined in ORS chapter 163, of a child and any physical injury to a child which has been caused by other than accidental means, including any injury which appears to be at variance with the explanation given of the injury.

(B) Any mental injury to a child, which shall include only observable and substantial impairment of the child's mental or psychological ability to function caused by cruelty to the child, with due regard to the culture of the child.

(C) Rape of a child, which includes but is not limited to rape, sodomy, unlawful sexual penetration and incest, as those acts are [*defined*] **described** in ORS chapter 163.

(D) Sexual abuse, as [*defined*] **described** in ORS chapter 163.

(E) Sexual exploitation, including but not limited to:

(i) Contributing to the sexual delinquency of a minor, as defined in ORS chapter 163, and any other conduct which allows, employs, authorizes, permits, induces or encourages a child to engage in the performing for people to observe or the photographing, filming, tape recording or other exhibition which, in whole or in part, depicts sexual conduct or contact, as defined in ORS 167.002 or described in ORS 163.665 and 163.670, sexual abuse involving a child or rape of a child, but not including any conduct which is part of any investigation conducted pursuant to ORS 419B.020 or which is designed to serve educational or other legitimate purposes; and

(ii) Allowing, permitting, encouraging or hiring a child to engage in prostitution, as defined in ORS chapter 167.

(F) Negligent treatment or maltreatment of a child, including but not limited to the failure to provide adequate food, clothing, shelter or medical care that is likely to endanger the health or welfare of the child.

(G) Threatened harm to a child, which means subjecting a child to a substantial risk of harm to the child's health or welfare.

(H) Buying or selling a person under 18 years of age as described in ORS 163.537.

(I) Permitting a person under 18 years of age to enter or remain in or upon premises where methamphetamines are being manufactured.

(J) Unlawful exposure to a controlled substance, as defined in ORS 475.005, that subjects a child to a substantial risk of harm to the child's health or safety.

(b) "Abuse" does not include reasonable discipline unless the discipline results in one of the conditions described in paragraph (a) of this subsection.

(2) "Child" means an unmarried person who is under 18 years of age.

(3) "Public or private official" means:

(a) Physician, including any intern or resident.

(b) Dentist.

(c) School employee.

(d) Licensed practical nurse or registered nurse.

(e) Employee of the Department of Human Services, State Commission on Children and Families, Child Care Division of the Employment Department, the Oregon Youth Authority, a county health department, a community mental health and developmental disabilities program, a county juvenile department, a licensed child-caring agency or an alcohol and drug treatment program.

(f) Peace officer.

(g) Psychologist.

(h) Member of the clergy.

(i) Licensed clinical social worker.

(j) Optometrist.

(k) Chiropractor.

(L) Certified provider of foster care, or an employee thereof.

(m) Attorney.

(n) Naturopathic physician.

(o) Licensed professional counselor.

(p) Licensed marriage and family therapist.

(q) Firefighter or emergency medical technician.

(r) A court appointed special advocate, as defined in ORS 419A.004.

(s) A child care provider registered or certified under ORS 657A.030 and 657A.250 to 657A.450.

(t) Member of the Legislative Assembly.

(u) Employee of the Teacher Standards and Practices Commission directly involved in investigations or discipline by the commission.

(4) "Law enforcement agency" means:

(a) Any city or municipal police department.

(b) Any county sheriff's office.

(c) The Oregon State Police.

(d) A county juvenile department.

SECTION 2. This 2009 Act being necessary for the immediate preservation of the public peace, health and safety, an emergency is declared to exist, and this 2009 Act takes effect on its passage.

MEASURE: **HB 2144 A**
CARRIER: **Sen. Morrisette**

REVENUE: No revenue impact
FISCAL: Minimal fiscal impact, no statement issued

Action:		Do Pass the A-Engrossed Measure
Vote:		5 - 0 - 0
	Yeas:	Kruse, Monnes Anderson, Telfer, Verger, Morrisette
	Nays:	0
	Exc.:	0
Prepared By:		Jennifer Kellar, Administrator
Meeting Dates:		5/6, 5/27

WHAT THE MEASURE DOES: Instructs Department of Education, Oregon Youth Authority, Department of Human Services and State Commission on Children and Families to take part in developing an integrated system of care to facilitate a planning process for youth at risk of developing emotional, behavioral or substance abuse related needs, utilizing their families and community and natural supports to provide a flexible group of services in a customized plan that reflects the youth and family's needs, values and preferences. Directs that plan goals and strategies be tied to observable or measurable indicators of success. Directs that agencies implement the wraparound initiative to the extent practical. Allows agencies to combine funding sources and seek federal approval or waiver. Establishes advisory committee to report progress to the Legislative Assembly. Defines in detail family, family run organization, identified population, partner agency, services and supports, system of care and wraparound as pertains to the goals of the measure. Establishes core values and principles of the wraparound initiative. Identifies implementation factors to be in place by 2015. Permits agencies to adopt rules in collaboration for implementation of wraparound services.

ISSUES DISCUSSED:

- Blending funding streams – regulatory prohibitions
- Maximization of individual agency's resources, practices, strategies and expertise for optimal effectiveness
- Necessity of measure in order for agencies to work together to treat individuals
- Early intervention programs
- Accuracy of fiscal impact statement
- Ensuring measure does not create another level of bureaucracy
- Multi-phase implementation of wraparound initiative
- Wraparound process eliminates fragmented services for individuals and families in care

EFFECT OF COMMITTEE AMENDMENT: No amendment.

BACKGROUND: House Bill 2144-A is a product of the Wraparound Initiative Steering Committee (WISC) vision for a statewide Wraparound Initiative and fulfills a steering committee recommendation for codification. WISC was charged with creating a plan to:

- Provide services and supports as early as possible so that children can be successful in their homes, schools and communities;
- Make services available based upon the specific needs of each child and family, rather on system requirements; and
- Maximize the resources available to serve children and families across systems, to most appropriately and effectively meet the physical and mental health needs of Oregon's children.

Proponents of the measure assert that it will result in the treatment of children, families and community resources as a whole and use blended funding sources to eliminate fragmented treatment that can occur when system clients encounter numerous levels of bureaucracy.

Enrolled
House Bill 2144

Ordered printed by the Speaker pursuant to House Rule 12.00A (5). Presession filed (at the request of Governor Theodore R. Kulongoski for Department of Human Services)

CHAPTER .....

AN ACT

Relating to systems of care for youth.

Be It Enacted by the People of the State of Oregon:

SECTION 1. As used in sections 1 to 5 of this 2009 Act:

(1) "Cultural competence" means accepting and respecting diversity and differences in a continuous process of self-assessment and reflection on one's personal and organizational perceptions of the dynamics of culture.

(2) "Family" includes, with respect to a youth:

(a) A biological or legal parent;

(b) A sibling;

(c) An individual related by blood, marriage or adoption;

(d) A foster parent;

(e) A legal guardian;

(f) A caregiver;

(g) An individual with a significant social relationship with the youth; and

(h) Any person who provides natural, formal or informal support to the youth that the youth identifies as important.

(3) "Family-run organization" means a private nonprofit entity organized for the purpose of serving families with a youth who has a serious emotional disorder that:

(a) Has a governing board in which a majority of the members are family members of a youth with a serious emotional disorder; and

(b) Gives a preference to family members in hiring decisions for the entity.

(4) "Identified population" means youth who have or are at risk of developing emotional, behavioral or substance use related needs, and who are involved with two or more systems of care.

(5) "Partner agency" includes the Department of Education, Oregon Youth Authority, Department of Human Services, State Commission on Children and Families and other appropriate agencies involved in the system of care.

(6) "Services and supports" means public, private and community resources that assist youth in the achievement of positive outcomes.

(7) "System of care" means a coordinated network of services including education, child welfare, public health, primary care, pediatric care, juvenile justice, mental health treatment, substance use treatment, developmental disability services and any other services and supports to the identified population that integrates care planning and management across

multiple levels, that is culturally and linguistically competent, that is designed to build meaningful partnerships with families and youth in the delivery and management of services and the development of policy and that has a supportive policy and management infrastructure.

(8) "Wraparound" means a definable, team-based planning process involving a youth and the youth's family that results in a unique set of community services and services and supports individualized for that youth and family to achieve a set of positive outcomes.

(9) "Youth" means an individual 18 years of age or younger.

SECTION 2. Partner agencies shall participate in a wraparound initiative based upon all of the following core values and principles:

(1) Family and youth perspectives must be intentionally elicited and prioritized during all system of care and wraparound initiative activities.

(2) The system of care must:

(a) Include prevention and early intervention services as well as address the complex needs of the identified population;

(b) Value youth as experts, respect their voice and treat youth as equal partners in creating system change at the individual, community and state levels;

(c) Give families the primary decision-making role in the mental health care of their youth as well as in developing policies and procedures governing the care of all youth in their community and in this state including:

(A) Choosing services and supports and service providers;

(B) Setting goals for youth;

(C) Designing and implementing programs for youth;

(D) Monitoring outcomes for youth; and

(E) Evaluating the effectiveness of all efforts to promote the mental health and well-being of youth;

(d) Offer peer-delivered services within the array of services and supports available to meet the needs of youth and families;

(e) Be community based and include community partners, one of which must be a family-run organization with the ability to provide peer-delivered services and supports and participate in the system of care coordination and decision-making;

(f) Create a community of support for each youth and family that honors the youth and family's sense of its own culture;

(g) Ensure that individuals are treated respectfully, compassionately and effectively in a manner that recognizes, affirms and values the worth of youth, families and communities;

(h) Protect and preserve the dignity of youth, families and communities; and

(i) Provide a means for eliciting feedback from individuals affected by the system of care regarding whether the individuals perceive that they are being treated respectfully, compassionately, effectively and with dignity.

SECTION 3. To the extent practicable within available resources, by the year 2015 partner agencies, individually and collectively, shall:

(1) Implement and sustain the wraparound initiative by:

(a) Connecting services and supports, including peer-delivered services and supports, across the lifespan and all social, emotional, cognitive and physical developmental stages.

(b) Building local governance structures to implement systems of care at the local level that conform to the core values and principles described in section 2 of this 2009 Act.

(c) Managing care through system coordination at the local level.

(d) Storing coordinated service-related information in an electronic record.

(e) Establishing an array of services and supports that is readily accessible by the identified population and their families.

(f) Authorizing services and supports that are based on the strengths and needs of the individual youth.

(g) Supporting communities in the expansion of creative services and supports to suit local needs.

(h) Establishing a workforce development process to translate policy into practice efficiently and effectively for improved accessibility and delivery of services and supports.

(i) Establishing key roles and responsibilities among multiple partner agencies, community partners and family-run organizations involved in the system of care.

(j) Establishing at least three local system of care sites.

(2) Ensure cultural competence in the provision of services by:

(a) Implementing uniform standards to allow state and local agencies to describe the culturally appropriate services and supports available in a system of care.

(b) Providing youth and families with understandable and effective system of care services in a manner compatible with their cultural beliefs, practices, literacy skills and language.

(c) Developing and implementing a process to review practices accepted by diverse communities.

(d) Identifying ways to continually improve culturally competent system of care services and implementing a statewide system of care that reflects culturally competent practices.

(3) Collect and evaluate data by:

(a) Creating one or more committees to review and select outcome or performance measures and benchmarks for the wraparound initiative.

(b) Creating standard agreements for sharing data without compromising confidentiality.

(c) Supporting the acquisition of information technology that allows local entities to share real-time data and that allows the state to evaluate the quality, accountability and success of local implementation and the wraparound initiative as a whole.

(d) Implementing workforce development strategies designed to maximize efficiencies and the sharing of knowledge across systems, and achieve identified outcomes and performance measures.

SECTION 4. Agencies participating in the wraparound initiative described in section 2 of this 2009 Act shall have the authority to:

(1) Combine state, federal and private resources into a single funding pool to support implementation of a system of care and integrated service delivery at the local level.

(2) Seek federal approval or waiver of federal requirements as necessary to facilitate the pooling of resources under this section.

(3) In collaboration, adopt rules to implement the wraparound initiative.

SECTION 5. (1) There is established the Children's Wraparound Initiative Advisory Committee consisting of members representing:

(a) Partner agencies;

(b) Local service providers;

(c) Youth and the family of youth who have current or past involvement with at least two partner agencies; and

(d) Organizations that advocate for youth.

(2) The majority of members of the committee shall be representatives of youth or the family of youth and advocacy organizations.

(3) The committee shall advise and assist in the implementation of the wraparound initiative described in section 2 of this 2009 Act.

(4) The Department of Human Services, in consultation with the committee, shall report biennially to the Governor and the Legislative Assembly on the progress toward and projected costs of full implementation of the wraparound initiative.

MEASURE: **HB 2686**
CARRIER: **Sen. Whitsett**

REVENUE: No revenue impact
FISCAL: No fiscal impact

Action:		Do Pass
Vote:		5 - 0 - 0
	Yeas:	Bonamici, Boquist, Dingfelder, Whitsett, Prozanski
	Nays:	0
	Exc.:	0
Prepared By:		Bill Taylor, Counsel
Meeting Dates:		5/20

WHAT THE MEASURE DOES: Expands definition of public and private officials subject to child abuse reporting requirements to include pharmacists.

ISSUES DISCUSSED:

- Provisions of the measure

EFFECT OF COMMITTEE AMENDMENT: No amendment.

BACKGROUND: The 2007 legislature included pharmacists within the definition of health care provider. However, pharmacists were not added to the list of professionals required to report child abuse. HB 2686 adds pharmacists to the list of those required to report child abuse and in doing so extends to them the protection against civil and criminal liability for reporting abuse when the report is made in good faith.

Enrolled
House Bill 2686

Sponsored by Representative THOMPSON; Representatives BENTZ, CAMERON, COWAN, D EDWARDS, ESQUIVEL, FREEMAN, GARRETT, GELSER, HANNA, JENSON, KOMP, KRIEGER, MAURER, SCHAUFLER, J SMITH, STIEGLER, THATCHER, TOMEI, WEIDNER, WINGARD

CHAPTER .....

AN ACT

Relating to child abuse reporting; amending ORS 419B.005.

Be It Enacted by the People of the State of Oregon:

SECTION 1. ORS 419B.005 is amended to read:

419B.005. As used in ORS 419B.005 to 419B.050, unless the context requires otherwise:

(1)(a) "Abuse" means:

(A) Any assault, as defined in ORS chapter 163, of a child and any physical injury to a child which has been caused by other than accidental means, including any injury which appears to be at variance with the explanation given of the injury.

(B) Any mental injury to a child, which shall include only observable and substantial impairment of the child's mental or psychological ability to function caused by cruelty to the child, with due regard to the culture of the child.

(C) Rape of a child, which includes but is not limited to rape, sodomy, unlawful sexual penetration and incest, as those acts are defined in ORS chapter 163.

(D) Sexual abuse, as defined in ORS chapter 163.

(E) Sexual exploitation, including but not limited to:

(i) Contributing to the sexual delinquency of a minor, as defined in ORS chapter 163, and any other conduct which allows, employs, authorizes, permits, induces or encourages a child to engage in the performing for people to observe or the photographing, filming, tape recording or other exhibition which, in whole or in part, depicts sexual conduct or contact, as defined in ORS 167.002 or described in ORS 163.665 and 163.670, sexual abuse involving a child or rape of a child, but not including any conduct which is part of any investigation conducted pursuant to ORS 419B.020 or which is designed to serve educational or other legitimate purposes; and

(ii) Allowing, permitting, encouraging or hiring a child to engage in prostitution, as defined in ORS chapter 167.

(F) Negligent treatment or maltreatment of a child, including but not limited to the failure to provide adequate food, clothing, shelter or medical care that is likely to endanger the health or welfare of the child.

(G) Threatened harm to a child, which means subjecting a child to a substantial risk of harm to the child's health or welfare.

(H) Buying or selling a person under 18 years of age as described in ORS 163.537.

(I) Permitting a person under 18 years of age to enter or remain in or upon premises where methamphetamines are being manufactured.

(J) Unlawful exposure to a controlled substance, as defined in ORS 475.005, that subjects a child to a substantial risk of harm to the child's health or safety.

(b) "Abuse" does not include reasonable discipline unless the discipline results in one of the conditions described in paragraph (a) of this subsection.

(2) "Child" means an unmarried person who is under 18 years of age.

(3) "Public or private official" means:

(a) Physician, including any intern or resident.

(b) Dentist.

(c) School employee.

(d) Licensed practical nurse or registered nurse.

(e) Employee of the Department of Human Services, State Commission on Children and Families, Child Care Division of the Employment Department, the Oregon Youth Authority, a county health department, a community mental health and developmental disabilities program, a county juvenile department, a licensed child-caring agency or an alcohol and drug treatment program.

(f) Peace officer.

(g) Psychologist.

(h) Member of the clergy.

(i) Licensed clinical social worker.

(j) Optometrist.

(k) Chiropractor.

(L) Certified provider of foster care, or an employee thereof.

(m) Attorney.

(n) Naturopathic physician.

(o) Licensed professional counselor.

(p) Licensed marriage and family therapist.

(q) Firefighter or emergency medical technician.

(r) A court appointed special advocate, as defined in ORS 419A.004.

(s) A child care provider registered or certified under ORS 657A.030 and 657A.250 to 657A.450.

(t) Member of the Legislative Assembly.

(u) Pharmacist.

(4) "Law enforcement agency" means:

(a) Any city or municipal police department.

(b) Any county sheriff's office.

(c) The Oregon State Police.

(d) A county juvenile department.