

A-Engrossed
House Bill 2297

Ordered by the House February 20
Including House Amendments dated February 20

Introduced and printed pursuant to House Rule 12.00. Pre-session filed (at the request of House Interim Committee on Health Care)

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure.

Establishes Task Force to Build a More Effective System for Preventing Children's Behavioral, Psychological and Health Problems.

Sunsets task force on December 31, 2016.

Declares emergency, effective on passage.

A BILL FOR AN ACT

1
2 Relating to the establishment of a prevention system that addresses specified problems of children;
3 and declaring an emergency.

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

5 **SECTION 1. (1) The Task Force to Build a More Effective System for Preventing**
6 **Children's Behavioral, Psychological and Health Problems is established. The purpose of the**
7 **task force is to identify methods for providing evidence-based interventions that can prevent**
8 **the development of multiple behavioral, psychological and health problems in a child that can**
9 **undermine the child's social and academic development.**

10 **(2) The task force established by this section consists of 15 members appointed as follows:**

11 **(a) The President of the Senate shall appoint two members from among members of the**
12 **Senate.**

13 **(b) The Speaker of the House of Representatives shall appoint two members from among**
14 **members of the House of Representatives.**

15 **(c) The Governor shall appoint 11 members who represent:**

16 **(A) The behavioral, psychological and health sciences communities;**

17 **(B) A community program that addresses behavioral, psychological or health problems**
18 **of children;**

19 **(C) A coordinated care organization; and**

20 **(D) State agencies that have an impact on family, school and preschool well-being, in-**
21 **cluding the Department of Education, the Oregon Education Investment Board, the Early**
22 **Learning Council, the Youth Development Council, the Oregon Youth Authority, the De-**
23 **partment of Human Services and the Oregon Health Authority.**

24 **(3) The task force shall recommend to the Legislative Assembly and the Governor legis-**
25 **lation that will increase the availability and successful implementation of evidence-based**
26 **family, school and preschool interventions. Legislative recommendations shall be based on:**

NOTE: Matter in **boldfaced** type in an amended section is new; matter *[italic and bracketed]* is existing law to be omitted. New sections are in **boldfaced** type.

1 (a) The following evaluations related to evidence-based family, school and preschool
2 interventions that address behavioral, psychological and health problems of children:

3 (A) A review of existing law that establishes the interventions and specifies how those
4 interventions will be implemented.

5 (B) An assessment of the degree to which existing law regarding interventions is being
6 implemented.

7 (C) A review of whether different criteria are needed to identify and implement inter-
8 ventions.

9 (D) A budget analysis of all state expenditures related to interventions.

10 (E) An evaluation of the budget implications of successful interventions, including any
11 possible reductions in costs related to:

12 (i) Providing special education and related services to severely emotionally disturbed
13 children;

14 (ii) Treating adolescents and adults for behavioral, psychological and health problems;
15 and

16 (iii) Incarcerating adolescents and adults who may have behavioral or psychological
17 problems.

18 (F) An analysis of how the governance and budgets of interventions might be reconfig-
19 ured to better support the selection and implementation of interventions and to determine
20 the effectiveness of those interventions.

21 (G) A review of the accountability procedures for state-funded interventions.

22 (H) A determination of whether reports provided by counties and school districts related
23 to existing interventions provide sufficient and standardized information to allow officials at
24 school districts, counties and the state to evaluate interventions to determine:

25 (i) If the interventions are reducing behavioral, psychological and health problems; and

26 (ii) How the interventions may need to be adjusted to improve effectiveness.

27 (I) An analysis of how data related to existing interventions are being used for account-
28 ability and for improving professional practice and how use of those data may be improved.

29 (b) Evaluations to identify the best methods to improve the success of local, evidence-
30 based family, school and preschool interventions that address behavioral, psychological and
31 health problems of children, including considering whether to:

32 (A) Publish statewide priorities and strategic frameworks to assist counties in estab-
33 lishing priorities related to the behavioral, psychological and health problems of children.

34 (B) Publish a manual for distribution to county prevention and treatment agencies to
35 communicate state agency expectations and provide explanatory materials to help foster the
36 success of local interventions.

37 (C) Establish and maintain a list of approved interventions and require each county to
38 use at least 75 percent of its state prevention funds for approved interventions chosen from
39 the list.

40 (D) Streamline and standardize intervention reporting forms so that local intervention
41 plans and reports clearly:

42 (i) Reflect the requirement that 75 percent of funds be expended for approved inter-
43 ventions.

44 (ii) Specify the purpose of each intervention, the number of children served with each
45 intervention, the duration and frequency of each intervention and the cost of each inter-

1 **vention.**

2 **(E) Require each county to establish and maintain a list of interventions that are being**
3 **implemented and to determine if the interventions are producing the intended results.**

4 **(4) A majority of the members of the task force constitutes a quorum for the transaction**
5 **of business.**

6 **(5) Official action by the task force requires the approval of a majority of the members**
7 **of the task force.**

8 **(6) The task force shall elect one of its members to serve as chairperson.**

9 **(7) If there is a vacancy for any cause, the appointing authority shall make an appoint-**
10 **ment to become immediately effective.**

11 **(8) The task force shall meet at times and places specified by the call of the chairperson**
12 **or of a majority of the members of the task force.**

13 **(9) The task force may adopt rules necessary for the operation of the task force.**

14 **(10) The task force shall report its findings and recommendations, as described in sub-**
15 **section (3) of this section, to the interim legislative committees related to health care and**
16 **to the Governor no later than September 15, 2016.**

17 **(11) The Legislative Administration Committee shall provide staff support to the task**
18 **force.**

19 **(12) Members of the task force who are not members of the Legislative Assembly are not**
20 **entitled to compensation, but may be reimbursed for actual and necessary travel and other**
21 **expenses incurred by them in the performance of their official duties in the manner and**
22 **amounts provided for in ORS 292.495. Claims for expenses incurred in performing functions**
23 **of the task force shall be paid out of funds appropriated to the Legislative Administration**
24 **Committee for purposes of the task force.**

25 **(13) All agencies of state government, as defined in ORS 174.111, are directed to assist**
26 **the task force in the performance of its duties and, to the extent permitted by laws relating**
27 **to confidentiality, to furnish such information and advice as the members of the task force**
28 **consider necessary to perform their duties.**

29 **SECTION 2. Section 1 of this 2015 Act is repealed on December 31, 2016.**

30 **SECTION 3. This 2015 Act being necessary for the immediate preservation of the public**
31 **peace, health and safety, an emergency is declared to exist, and this 2015 Act takes effect**
32 **on its passage.**

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