

A-Engrossed Senate Bill 1

Ordered by the Senate April 10
Including Senate Amendments dated April 10

Sponsored by Senator COURTNEY (at the request of Governor Kate Brown, Chief Justice Martha L. Walters)
(Presession filed.)

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 [*Statewide System of Care Task Force.*] **System of Care Advisory Council to provide forum for statewide system of care policy development and planning. Directs council to develop and maintain state system of care policy and comprehensive, long-range plan for coordinated system of care. Directs council to update plan biennially and submit plan to interim committee of Legislative Assembly and Governor.** Directs [*task force*] **council** to make [*series of*] **annual** reports and recommend legislation to **interim committee of Legislative Assembly and Governor.** Directs [*task force*] **council** to make recommendations to Director of Oregon Health Authority, Director of Oregon Youth Authority and Director of Human Services regarding systems of care. **Authorizes council to award grants to support local system of care governance and carry out recommendations in council's long-range plan for coordinated system of care.** Directs [*task force*] **council** to create **Children's System** Data Dashboard regarding youths being served by Oregon Youth Authority, Oregon Health Authority and Department of Human Services. Appropriates moneys from General Fund to [*Oregon Health Authority*] **council** for biennial expenses related to [*task force*] **council.**

[*Directs Oregon Health Authority, in consultation with Department of Human Services and Oregon Youth Authority, to prepare and publish requests for proposals for regional evaluation and care teams. Appropriates moneys from General Fund to Department of Human Services for biennial expenses related to regional evaluation and care teams.*]

Authorizes Department of Human Services, Oregon Health Authority and Oregon Youth Authority to contract with providers to establish interdisciplinary assessment teams to provide services to youth. Appropriates moneys from General Fund to Oregon Health Authority for biennial expenses related to interdisciplinary assessment teams.

Declares emergency, effective [*July 1, 2019*] **on passage.**

A BILL FOR AN ACT

1
2 Relating to youth with specialized needs; creating new provisions; repealing ORS 418.975, 418.977,
3 418.980, 418.982 and 418.985; and declaring an emergency.

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

SYSTEM OF CARE ADVISORY COUNCIL

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8 **SECTION 1. Definitions.** As used in sections 1 to 4 of this 2019 Act, unless the context
9 requires otherwise:

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

13 (2) "Cultural responsiveness" means the process by which people and systems respond
14 respectfully and effectively to individuals of all cultures, languages, classes, races, ethnic
15 backgrounds, disabilities, religions, genders, sexual orientations and other diversity factors

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 in a manner that recognizes, affirms and values the worth of individuals, families and com-
2 munities, and that protects and preserves the dignity of each.

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

4 (a) A biological or legal parent;

5 (b) A sibling;

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

7 (d) A foster parent;

8 (e) A legal guardian;

9 (f) A caregiver;

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

11 (h) Any person who provides support to the youth that the youth identifies as important;

12 and

13 (i) Any person identified by the youth as being family.

14 (4) "Services and supports" means public, private and community resources that assist
15 youth in the achievement of positive outcomes, including but not limited to education, child
16 welfare, public health, primary care, pediatric care, juvenile justice, mental health treat-
17 ment, substance use treatment and services for individuals with intellectual and develop-
18 mental disabilities.

19 (5) "System of care" means a coordinated network of services and supports to youth
20 that:

21 (a) Integrates care planning and management across multiple levels of care;

22 (b) Recognizes disability as a natural and healthy part of the human experience;

23 (c) Is culturally and linguistically competent;

24 (d) Is designed to build meaningful partnerships with families and youth in the delivery
25 and management of services and the development of policy; and

26 (e) Has a supportive policy and management infrastructure.

27 (6) "Youth" means an individual 25 years of age or younger who has, or is at increased
28 risk of developing, chronic behavioral, emotional, physical or developmental conditions and
29 is under the supervision of or engaged with two or more systems of care.

30 SECTION 2. System of Care Advisory Council; membership; meetings. (1) A commission
31 known as the System of Care Advisory Council is established.

32 (2) The council consists of 25 members appointed as follows:

33 (a) The Chief Justice of the Supreme Court shall appoint one representative from the
34 Judicial Department.

35 (b) The Governor shall appoint:

36 (A) Two members who are representatives of the Department of Human Services with
37 extensive knowledge of systems of care, one of whom must have direct experience with in-
38 tellectual and developmental disabilities programs.

39 (B) One member who is a representative of the Oregon Youth Authority with extensive
40 knowledge of systems of care.

41 (C) One member who is a representative of the Oregon Health Authority with extensive
42 knowledge of systems of care.

43 (D) One member who is a representative of the Department of Education.

44 (E) Two members who are representatives of coordinated care organizations meeting the
45 criteria adopted by the Oregon Health Authority under ORS 414.625, at least one of which

1 must provide services to rural communities.

2 (F) One psychiatrist, one psychologist and one pediatric physician, each of whom must
3 have clinical experience with youth.

4 (G) One member who is a representative of an entity that offers commercial insurance.

5 (H) Three members who are representatives of agencies that provide different services
6 and supports to youth and families of youth.

7 (I) One member who is a representative of organizations that advocate for youth.

8 (J) One member who is a representative of organizations that advocate for families of
9 youth.

10 (K) Two members of the public, each of whom are family members of:

11 (i) Persons with intellectual or developmental disabilities or mental illness; or

12 (ii) Persons who are currently or were previously in the foster care system or the youth
13 criminal justice system.

14 (L) Two members of the public who are no more than 25 years of age and who:

15 (i) Are persons with intellectual or developmental disabilities or mental illness; or

16 (ii) Are currently or were previously a ward, youth or youth offender, as those terms are
17 defined in ORS 419A.004.

18 (M) One member who is a county juvenile department director.

19 (N) One member who is a county mental health program director.

20 (O) One member who is a member of a federally recognized Indian tribe in this state or
21 a designee of the Indian tribe.

22 (P) One member who is a representative of Oregon's federally mandated disability pro-
23 tection and advocacy agency.

24 (3) The term of office of each member of the council is four years, but a member serves
25 at the pleasure of the appointing authority. Before the expiration of the term of a member,
26 a successor shall be appointed whose term begins on January 2 next following. A member is
27 eligible for reappointment to one additional term. If there is a vacancy for any cause, the
28 appointing authority shall make an appointment to become immediately effective for the
29 unexpired term.

30 (4)(a) Members of the council who are not state employees are not entitled to compen-
31 sation or reimbursement for expenses and serve as volunteers on the council.

32 (b) Notwithstanding paragraph (a) of this subsection, members of the council described
33 in subsection (2)(b)(K) and (L) of this section may be reimbursed for travel and other rea-
34 sonable expenses associated with serving on the council.

35 (5) Members of the council who are state employees carrying out their state employment
36 functions are entitled to compensation and reimbursement by their employing agencies for
37 actual and necessary travel and other expenses incurred by them in the performance of their
38 official duties as members of the council.

39 (6) The Governor shall appoint one of the members as chairperson, to serve at the
40 pleasure of the Governor. The members of the council shall elect from among themselves a
41 vice chairperson who shall preside over meetings and exercise the functions of the chair-
42 person during the absence or disability of the chairperson. The chairperson and the vice
43 chairperson shall execute the duties determined by the council to be necessary.

44 (7) The council shall meet at least four times per year at a place, day and hour deter-
45 mined by the council.

1 **(8) A majority of the members of the council constitutes a quorum for the transaction**
2 **of business.**

3 **(9) The Oregon Health Authority, in coordination with the Department of Human Ser-**
4 **vices, shall provide staff support to the council.**

5 **SECTION 3. Purpose and duties of council; rules. (1) The purpose of the System of Care**
6 **Advisory Council is to improve the effectiveness and efficacy of state and local systems of**
7 **care that provide services to youth by providing a centralized and impartial forum for**
8 **statewide policy development and planning.**

9 **(2) The primary duty of the council is to develop and maintain a state system of care**
10 **policy and a comprehensive, long-range plan for a coordinated state system of care that en-**
11 **compasses public health, health systems, child welfare, education, juvenile justice and ser-**
12 **vices and supports for mental and behavioral health and people with intellectual or**
13 **developmental disabilities. The plan must include, but need not be limited to, recommen-**
14 **dations regarding:**

15 **(a) Capacity, utilization and types of state and local systems of care and services and**
16 **supports;**

17 **(b) Implementation of in-home behavioral health services, crisis and transition services,**
18 **therapeutic foster care, in-home family support services and the integration of those services**
19 **with existing programs of residential services for individuals with behavioral health needs**
20 **and intellectual developmental disabilities;**

21 **(c) Appropriate use of existing systems of care and services and supports;**

22 **(d) Whether additional services and supports are necessary to address gaps in coverage;**

23 **(e) Methods for assessing the effectiveness of systems of care and services and supports**
24 **in reducing juvenile dependency or delinquency;**

25 **(f) Methods of reducing risk of future juvenile dependency or delinquency;**

26 **(g) The effective utilization of the local system of care governance structure;**

27 **(h) Guidelines for partner agency core values and guiding principles; and**

28 **(i) Guidelines that ensure cultural competence in the provision of services and supports**
29 **by:**

30 **(A) Implementing uniform standards to allow local system of care teams to describe the**
31 **culturally responsive services and supports available in a system of care.**

32 **(B) Providing youth and families with understandable and effective system of care ser-**
33 **vices in a manner compatible with their disabilities, cultural beliefs and practices, literacy**
34 **skills and language.**

35 **(C) Developing and implementing a process to review practices accepted by diverse com-**
36 **munities.**

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

39 **(3) Other duties of the council are to:**

40 **(a) Conduct joint studies by agreement with other state agencies, boards or commissions**
41 **on any matter within the jurisdiction of the council;**

42 **(b) Provide oversight of the implementation of the services described in subsection (2)(b)**
43 **of this section by the Oregon Health Authority, the Oregon Youth Authority and the De-**
44 **partment of Human Services and to provide periodic updates on the agencies' implementation**
45 **to the Legislative Assembly;**

1 (c) Provide recommendations to the Director of the Oregon Health Authority, the Di-
2 rector of the Oregon Youth Authority and the Director of Human Services as necessary for
3 the agencies to maintain and strengthen the systems of care;

4 (d) Make recommendations to the Director of the Oregon Health Authority, the Director
5 of the Oregon Youth Authority and the Director of Human Services to reduce barriers to
6 implementation of systems of care; and

7 (e) Continually monitor and update the Children's System Data Dashboard described in
8 section 4 of this 2019 Act, with a specific focus on the number of youth placed in hotels,
9 out-of-state placements, emergency department boarding, congregate care facilities, shelter
10 care or Oregon Youth Authority custody.

11 (4)(a) On or before January 2 of each even-numbered year, the council shall update its
12 plan under subsection (2) of this section and submit the plan to an interim committee of the
13 Legislative Assembly related to youth, and to the Governor.

14 (b) On or before September 15 of each year, the council shall submit a report in the
15 manner provided in ORS 192.245, including recommendations for legislation, to an interim
16 committee of the Legislative Assembly related to youth, and to the Governor, describing how
17 the council is meeting its goals, the remaining barriers to access to services and supports
18 and recommendations for legislation.

19 (5) The council may:

20 (a) Apply for and receive gifts and grants from any public or private source.

21 (b) Award grants from funds appropriated by the Legislative Assembly to the council or
22 from funds otherwise available from any other source, for the purpose of supporting local
23 system of care governance and for carrying out the recommendations in the council's plan
24 developed under subsection (2) of this section.

25 (c) Adopt rules to carry out the provisions of this section.

26 (6) All agencies of state government, as defined in ORS 174.111, are directed to assist the
27 council in the performance of the duties of the council and, to the extent permitted by laws
28 relating to confidentiality, to furnish information and advice the members of the council
29 consider necessary to perform the duties of the council.

30 **SECTION 4. Children's System Data Dashboard.** (1) The System of Care Advisory Council
31 shall maintain the Children's System Data Dashboard, which must include, at a minimum,
32 the following local and statewide data:

33 (a) The number of children under 21 years of age, wards, youth and youth offenders being
34 served by the Oregon Youth Authority, the Oregon Health Authority and the Department
35 of Human Services;

36 (b) The number of children, wards, youth and youth offenders identified in this section
37 who are currently living in each of the following situations:

38 (A) At home;

39 (B) In substitute care; or

40 (C) In specific placement;

41 (c) The number of children, wards, youth and youth offenders identified in this section
42 who were previously identified as being in danger of removal but who have been able to re-
43 main in their homes;

44 (d) The number of children, wards, youth and youth offenders identified in this section
45 who are living in hotels, out-of-state placements, congregate care facilities, shelter care or

1 emergency department boarding;

2 (e) The length of time the children, wards, youth and youth offenders identified in this
3 section have been waiting to access services or appropriate placements; and

4 (f) Outcomes of services that are provided to children, wards, youth and youth offenders
5 by the Oregon Youth Authority, the Oregon Health Authority and the Department of Human
6 Services.

7 (2) Notwithstanding section 1 of this 2019 Act, as used in this section, the terms
8 “wards,” “youth” and “youth offenders” have the meanings given those terms in ORS
9 419A.004.

10 (3) The System of Care Advisory Council may adopt rules to carry out the provisions of
11 this section.

12 **SECTION 5. System of Care Account.** The System of Care Account is established, sepa-
13 rate and distinct from the General Fund. All moneys deposited in the account are contin-
14 uously appropriated to the System of Care Advisory Council for the purposes of sections 1
15 to 4 of this 2019 Act.

16 **SECTION 6. Reports to Legislative Assembly.** The System of Care Advisory Council shall
17 submit the following reports in the manner provided in ORS 192.245, including recommen-
18 dations for legislation, to an interim committee of the Legislative Assembly related to youth,
19 and to the Governor:

20 (1) No later than May 1, 2020, a description of all gains agencies have made in strength-
21 ening the service continuum, including the work done by agencies participating in systems
22 of care, and a description of the data the council are tracking to demonstrate outcomes of
23 enhanced services and supports.

24 (2) No later than June 1, 2020, a description of the Children’s System Data Dashboard
25 described in section 4 of this 2019 Act, with instructions for how to access the data.

26 (3) No later than June 1, 2020, a status report regarding the council’s development of the
27 plan described in section 3 (2) of this 2019 Act.

28 (4) No later than September 15, 2020, a description of the council’s recommendations to
29 resolve the barriers and challenges to implementation of systems of care.

30 (5) No later than February 1, 2021, recommendations regarding opportunities for braided
31 and blended funding, including consideration of grants to agencies participating in systems
32 of care to support innovation and the shift to more community-based and in-home services
33 and supports.

34 (6) No later than September 15, 2021, the details of the council’s plan described in section
35 3 (2) of this 2019 Act.

36 **SECTION 7.** ORS 418.975, 418.977, 418.980, 418.982 and 418.985 are repealed.

37
38 **INTERDISCIPLINARY ASSESSMENT TEAMS**
39

40 **SECTION 8. Interdisciplinary assessment teams.** (1) The Department of Human Services,
41 the Oregon Health Authority and the Oregon Youth Authority may contract with public or
42 private providers to establish interdisciplinary assessment teams to provide services to
43 youth.

44 (2) An interdisciplinary assessment team shall:

45 (a) Provide evaluation of youth.

1 (b) Increase statewide education, consultation and telemedicine evaluation, assessment
2 and treatment capacity, with specific emphasis on increasing access to psychiatric and de-
3 velopmental assessments in communities that lack sufficient access to providers.

4 (c) Prioritize evaluation, assessment and stabilization services provided to youth who are
5 placed in hotels, in out-of-state facilities, in emergency department boarding, in shelter care,
6 in institutional care, in county detention facilities or in the custody of the Oregon Youth
7 Authority.

8 (3) The Oregon Health Authority, in consultation with the Department of Human Ser-
9 vices and the Oregon Youth Authority, shall establish criteria for proposals for contracts
10 under this section, prepare and publish requests for proposals, receive proposals and award
11 contracts to eligible providers.

12 (4) As used in this section “system of care” and “youth” have the meanings given those
13 terms in section 1 of this 2019 Act.

14
15 **APPROPRIATIONS**

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17 **SECTION 9. System of Care Advisory Council.** In addition to and not in lieu of any other
18 appropriation, there is appropriated to the System of Care Advisory Council, for the
19 biennium beginning July 1, 2019, out of the General Fund, the amount of \$2,000,000 for the
20 purpose of carrying out the provisions of sections 1 to 6 of this 2019 Act.

21 **SECTION 10. Interdisciplinary assessment teams.** In addition to and not in lieu of any
22 other appropriation, there is appropriated to the Oregon Health Authority, for the biennium
23 beginning July 1, 2019, out of the General Fund, the amount of \$10,400,000 for the purpose
24 of carrying out the provisions of section 8 of this 2019 Act.

25
26 **MISCELLANEOUS**

27
28 **SECTION 11.** Notwithstanding the term of office specified by section 2 of this 2019 Act,
29 of the members first appointed to the System of Care Advisory Council:

30 (1) Nine shall serve for a term ending January 1, 2021.

31 (2) Eight shall serve for a term ending January 1, 2022.

32 (3) Eight shall serve for a term ending January 1, 2023.

33 **SECTION 12.** No later than June 1, 2020, the System of Care Advisory Council shall de-
34 velop and deploy the Children’s System Data Dashboard described in section 4 of this 2019
35 Act.

36 **SECTION 13.** (1) Section 12 of this 2019 Act is repealed on January 2, 2021.

37 (2) Section 6 of this 2019 Act is repealed on January 2, 2022.

38 **SECTION 14.** The unit and section captions used in this 2019 Act are provided only for
39 the convenience of the reader and do not become part of the statutory law of this state or
40 express any legislative intent in the enactment of this 2019 Act.

41 **SECTION 15.** This 2019 Act being necessary for the immediate preservation of the public
42 peace, health and safety, an emergency is declared to exist, and this 2019 Act takes effect
43 on its passage.