1 State of Arkansas As Engrossed: H3/22/01 A Bill Act 1517 of 2001 2 83rd General Assembly HOUSE BILL 2446 Regular Session, 2001 3 4 By: Representative Goss 5 6 7 For An Act To Be Entitled 8 9 AN ACT TO AMEND THE CHILD AND ADOLESCENT SERVICE SYSTEM PROGRAM; AND FOR OTHER PURPOSES. 10 11 **Subtitle** 12 AN ACT TO AMEND THE CHILD AND ADOLESCENT 13 14 SERVICE SYSTEM PROGRAM. 15 16 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS: 17 18 19 SECTION 1. Arkansas Code 20-47-501 is amended to read as follows: 20 20-47-501. Purpose. 21 The General Assembly of the State of Arkansas finds that services to 22 children are provided by various departments and agencies at both the state 23 and local level, often without appropriate collaboration. The General 24 Assembly declares that the purpose of this subchapter is to establish a 25 structure for coordinated policy development, comprehensive planning, and collaborative budgeting, and resource allocation for services to children 26 with emotional disturbance and their families. It is further the intention 27 of this subchapter to build on existing resources and to design and implement 28 29 a coordinated service system for children with emotional disturbances which is child- and family-centered and community-based. 30 31 SECTION 2. Arkansas Code 20-47-502 is amended to read as follows: 32 33 20-47-502. Definitions. As used in this subchapter, unless the content otherwise requires: 34 (1) "Case management" means those efforts which assure that necessary 35 36 services for the child and family are obtained and monitored. Such efforts

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shall include coordination across agencies for evaluations, the provision of services based on integrated assessments and evaluations that result in the development of an interagency service plan, the review for adequacy of services through client progress, and maintaining cooperation among agencies;

- (2) "Case review" means a multiagency effort to design and provide a service delivery plan for difficult-to-serve children who may require unusual services or service configurations. When utilizing a group process for reaching service delivery decisions, the group shall be composed of those who carry sufficient authority to assure timely provision of services;
  - (3) "CASSP" means the Child and Adolescent Service System Program;
- (4) "Child with emotional disturbance" means an individual under the age of eighteen (18), or under the age of twenty-one (21) if CASSP services began prior to the age of eighteen (18), who is exhibiting inappropriate emotional, interpersonal, or behavioral problems within the home, preschool program, school, or community given his age, intellectual level, and cultural background, whose degree of dysfunction is at least disruptive and often disabling, and whose problems persist after efforts to deal with the problems have been made by significant others in the child's social environment and who meets specific criteria established by the CASSP Coordinating Council;
- (5) "Collaborative budget agreement" means a written agreement among the members of the Department of Education, Department of Health, and Department of Human Services to allocate resources for programs and services in the statewide plan. The collaborative budget agreement shall identify the proportion of each agency budget request that will be allocated to implement the system of care;
- (6) (5) "Collaborative evaluation" means an intensive appraisal of a child which provides more of an in-depth analysis than an integrated a screening and assessment. Such evaluation shall be designed, obtained, and utilized collaboratively by those agencies identifying a need for the information;
- (7)(6) "Flexible funds" means a specific fiscal allocation designated for atypical expenditures to meet extraordinary needs of a child and family identified in the service plan. Decisions for expenditure of flexible funds shall be made at the regional or local level and must be approved by all involved service providers;
  - (8)(7) "Integrated screening and assessment" means an initial

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- 1 appraisal of a child identified or suspected of having emotional disturbance
- 2 which provides sufficient information to make decisions about service needs.
- 3 The assessment shall be conducted in collaboration with all agencies
- 4 providing services, and shall result in a common data base which meets the
- 5 generic data needs of each agency; "Interagency Service Plan" means the
- 6 <u>integrated plan of care which is individualized for each child or adolescent</u>
- 7 <u>receiving CASSP services</u>, and is developed through the collaboration of all
- 8 <u>agencies providing services for that child;</u>
  - (9)(8) "Regional plan" means a written strategy developed by regional CASSP teams which specifies the kind, mix, and priority of services to be provided in each community mental health center catchment area. The regional plan shall address all components of the system of care, shall be based on the principles for the system of care provided herein and on the service needs of the children with emotional disturbance in the region, shall include procedures for evaluating services provided to children with emotional disturbance and their families, and shall be reviewed annually by the CASSP Coordinating Council and, upon approval, shall be incorporated into the statewide plan;
  - (9) "Screening and assessment" means an initial appraisal of a child identified or suspected of having emotional disturbance which provides sufficient information to make decisions about service needs;
  - (10) "Service array" means those services in the system of care that address the varying areas of needs of children with emotional disturbance and their families, and shall include, but not be limited to: mental health services; substance abuse services; social services; education services; health services; vocational services; recreational services; operational services; case management, advocacy and other necessary services;
  - (11) "Single point of entry" means a unit, agency, or group designated as the gatekeeper for the service system for children with emotional disturbance and their families;
- 31 (12) "Statewide plan" means a comprehensive strategy that identifies 32 the procedures for developing and implementing the system of care which is 33 prepared by the CASSP Coordinating Council incorporating all regional plans; 34 and
  - (13) "System of care" means a comprehensive spectrum of mental health and other necessary services organized into a coordinated network to meet the

1 multiple and changing needs of children with emotional disturbance, based on 2 principles set forth in this subchapter. 3 4 SECTION 3. Arkansas Code 20-47-504 is amended to read as follows: 5 20-47-504. Components of the system. 6 The components of the system of care shall include, but not be limited 7 to: 8 (1) Single point of entry; 9 (2)Integrated screening Screening and assessment; 10 (3) Case management; 11 (4) Case review; (5) Collaborative evaluation; and 12 13 (6) Servi ce array. 14 15 SECTION 4. Arkansas Code 20-47-505 is amended to read as follows: 20-47-505. CASSP Coordinating Council. 16 (a)(1) There is hereby created a Child and Adolescent Service System 17 18 Program Coordinating Council which shall meet on a quarterly basis and at 19 other times deemed necessary to perform its functions. 20 The council coordinating council shall include the following 21 persons to be selected and appointed by the directors of the Department of Education, Department of Health, and Department of Human Services: 22 23 (A) At least three (3) parents, parent surrogates, or 24 family members of a child or children with emotional disturbance; 25 (B) A member of an ethnic minority; 26 (C) A child advocate; 27 (D) A representative CASSP Coordinators from each of the 28 certified community mental health center centers; 29 (E)(i) Representatives One or more representatives from 30 each of the following, specific divisions or agencies in to be appointed by 31 the Director of the Department of Human Services, by the Director of the 32 Department of Health, or by the Director of and the Department of Workforce 33 Education, whichever is appropriate: 34 (ii) Each representative shall have official duties 35 related to the delivery of mental health services for children and 36 adolescents with emotional disturbances.

1	(iii) Specific designations of membership of the
2	coordinating council shall be determined through interdepartmental and
3	intradepartmental agreements which will be renewed on an annual basis; and
4	(i) The Bureau of Al cohol and Drug Abuse Prevention;
5	(ii) The Division of Youth Services;
6	(iii) The Division of Developmental Disabilities
7	<del>Servi ces;</del>
8	(iv) The Division of Medical Services;
9	(v) The Division of Mental Health Services;
10	(vi) The Division of County Operations; and
11	(vii) The Arkansas Rehabilitation Services;
12	(F) A representative from the Department of Education;
13	(G) A representative from a local school district;
14	(H) A representative from the juvenile justice system;
15	(I) A representative from a local or regional
16	rehabilitation services office;
17	(J) A representative from the Department of Health
18	appointed by the director;
19	(K) A representative from a local or regional health
20	<del>department;</del>
21	(L) A representative from a local or regional provider of
22	developmental disabilities services;
23	(M) A representative of a local substance abuse treatment
24	program for adol escents;
25	(N) A member of the Senate who serves on the Senate
26	Interim Committee on Children and Youth; and
27	(0) A representative from a local or regional community
28	action agency.
29	(F)(i) At least two (2) representatives from agencies or
30	organizations either private or public that are stakeholders in mental health
31	services for children and adolescents with emotional disturbances.
32	<u>(ii) The Directors of the Department of Human</u>
33	Services, the Department of Health, and the Department of Education will
34	jointly appoint an appropriate number of stakeholders.
35	(b) The council shall:
36	(1) Advise and report to the directors of the Department of

Education, Department of Health, and Department of Human Services on matters of policy and programs related to children with emotional disturbance and their families:

- (2) Identify and recommend fiscal, policy, training, and program initiatives and revisions based on needs identified in the planning process;
- (3) Provide specific guidelines for the development of regional services and plans based on the guiding principles of the system of care;
- (4) Review and approve regional plans developed by regional program teams and incorporate the regional plans into the statewide plan;
- (5) Assure that mechanisms for accountability are developed and incorporated into the regional plans implemented;
- (6) Submit a statewide plan and budget recommendations to the directors of the Department of Education, Department of Health, and Department of Human Services on or before March 15 of each even-numbered year thereafter preceding the legislative session;
  - (7) Develop and recommend special projects to the directors; and
- (8) Provide a written report on a quarterly basis to the Senate Interim Committee on Children and Youth that summarizes progress implementing this subchapter—:
- (9) Establish guidelines and procedures for the voting membership, officers, and annual planning of both the coordinating council and the regional CASSP planning teams which the coordinating council will review and update on an annual basis; and
- (10) Make recommendations for corrective action plans to the Directors of the Department of Human Services, the Department of Education, and the Department of Health in the event that a regional CASSP planning team does not produce a timely regional plan that meets a plan of care or fails to implement the approved regional plan.

30 SECTION 5. Arkansas Code 20-47-506 is amended to read as follows: 31 20-47-506. Regional CASSP planning teams.

- (a) A regional CASSP <u>planning</u> team shall be established in each community mental health center catchment area.
- (b)(1) At least fifty-one percent (51%) of each Each team membership shall consist of include individuals who are not state employees or and who are not providers of services to children with emotional disturbance or their

1 families but who are parents, parent surrogates, family members, or

- 2 consumers.
- 3 (2) Every effort shall be made to encourage and assist parents,
- 4 parent surrogates, family members, consumers, and advocates to participate in
- 5 CAASP planning teams.
- 6 (c) The regional CASSP <u>planning</u> teams shall have at a minimum regional
- 7 <u>include</u> agency representatives from the community mental health centers, the
- 8 Division of Developmental Disabilities Services, the Division of Children and
- 9 Family Services, and the Division of Alcohol and Drug Abuse Prevention
- 10 Services; the Department of Health; and the Department of Education Special
- 11 Education I ocal school districts or educational cooperatives.
- 12 (d) Additional representatives of other local services and programs
- 13 shall be added by the regional team and will include representatives from the
- 14 <u>juvenile justice system or youth services providers and local preschool</u>
- 15 programs, if possible.
- 16 (e) Each regional team member may appoint a single person to serve as 17 his or her proxy.
  - (f) The regional CASSP planning team shall:
- 19 (1) Advise and report to the CASSP Coordinating Council on
- 20 matters of policies, resources, programs, and services relating to children
- 21 with emotional disturbance and their families;
- 22 (2) Identify and recommend program initiatives and revisions
- 23 based on area and community-based needs;
- 24 (3) Submit a regional plan and recommend a program guidelines
- 25 for interagency service delivery teams to the CASSP Coordinating Council on
- 26 or before <del>February 15, 1992, and by</del> February 15 of each even-numbered year
- 27 thereafter preceding the legislative session; and
- 28 (4) Develop and implement special projects for community-based
- 29 services...; and
- 30 (5)(A) Ensure that interagency service teams are established and
- 31 <u>utilized in coordinating services for children and adolescents referred to</u>
- 32 CASSP.

- 33 (B) Each service delivery team shall have sufficient and
- 34 appropriate representation from identified service providers and will
- 35 <u>complete an interagency service plan for each child or adolescent receiving</u>
- 36 <u>CASSP services.</u>

1	(C) Every effort shall be made to assist parents, parent
2	surrogates, family members, and consumers to participate as members of the
3	interagency service delivery team.
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5	SECTION 6. Arkansas Code 20-47-507 is amended to read as follows:
6	20-47-507. Coordinating Council staff.
7	(a) The staff for the CASSP Coordinating Council shall be provided by
8	the CASSP project for the first two (2) years, and subsequently by the
9	Department of Human Services, Division of Mental Health Services.
10	(b) Staff The Division of Mental Health Services will serve as the
11	coordinating agency and shall develop and support the regional CASSP team
12	network, the CASSP Coordinating Council, and provide training and technical
13	assistance relevant to the system of care.
14	(c) Annual site reviews and program evaluations of regional CASSP
15	teams will be coordinated by the Division of Mental Health Services and will
16	involve a multi-agency team of professionals, family members, consumers, and
17	advocates.
18	(d) The Division of Mental Health Services' CASSP staff shall provide
19	an annual report summarizing CASSP regional and coordinating council
20	activities, strategic plans, and outcomes to the Directors of the Department
21	of Human Services, the Department of Education, and the Department of Health
22	each year on or before October 15 each year.
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24	SECTION 7. Arkansas Code 20-47-508 is amended to read as follows:
25	20-47-508. Evaluation and treatment.
26	(a) Children suspected of having emotional disturbance who are
27	referred for CASSP services shall be given <del>an integrated</del> <u>a</u> screening and
28	assessment through the single point of entry, after which an initial
29	interagency service plan shall be defined and developed.
30	(b) The community mental health centers are hereby designated as the
31	single point of entry.
32	(c) The assessment shall be conducted by the community mental health
33	center serving the area in which the child or adolescent lives.
34	(c)(d) The unit community mental health center shall be accessible on
35	a twenty-four hour basis, shall accept referrals from multiple sources, have

HB2446

interagency linkages, involve parents, ensure immediate access to crisis

1	intervention services, and have authority to seek needed services.
2	(d)(e) Upon entry into the system of care, If, after screening and
3	assessment or collaborative evaluations, it is determined that a child with
4	emotional disturbance needs multi-agency services, then initial and
5	subsequent individualized <u>multi-agency</u> service plans for <del>children with</del>
6	emotional disturbance and their families the child and the child's family
7	shall be jointly developed by the appropriate local or regional
8	representatives of the community mental health centers, representatives of
9	the Department of Human Services county office, representatives of the
10	Department of Health, representatives of the Department of Education, Special
11	Education Division, representatives of the Local school district and
12	representatives of any other service provider identified to meet the needs of
13	the child and his family. The individualized service plan shall reflect an
14	integrated service delivery which specifies services or programs with funding
15	to be provided by each agency. The service plan shall also designate
16	responsibility for case management.
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18	SECTION 8. Arkansas Code 20-47-509 is repealed.
19	20-47-509. Budget requests.
20	(a) After July 1, 1991, all budget requests which affect children with
21	emotional disturbance submitted from the Department of Human Services, the
22	Department of Education, and the Department of Health shall include a written
23	statement by the CASSP Coordinating Council of whether the request is based
24	on a system of care which is child- and family-centered and community-based.
25	(b) Budget requests shall include provisions for:
26	(1) The components of the system;
27	(2) Flexible funds to meet extraordinary child and family needs;
28	<del>and</del>
29	(3) Incentives for keeping children with their families and
30	developing community-based services as close to home as appropriate.
31	(c) In the event that a regional CASSP team does not produce a timely
32	regional plan that meets the guiding principles for the system of care,
33	recommendations about allocation of funds in that region shall be made by the
34	CASSP Coordinating Council.
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/s/ Goss

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