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LEGISLATIVE ACTION

Senate

House

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Floor: 3/AD/2R

01/10/2012 03:30 PM

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Senator Rich moved the following:

**Senate Amendment (with title amendment)**

Between lines 589 and 590

insert:

(3)HEALTH CARE COORDINATION. -

(a) The department shall work with the Agency for Health  
Care Administration in consultation with pediatricians, other  
experts in health care, and experts in and recipients of child  
welfare services, to develop a plan for a coordinated approach  
to providing comprehensive health care for children in  
care.Comprehensive health care refers to strategies and services  
for meeting the physical, dental, mental, emotional, and  
developmental health needs of children. It includes all health



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14 care including primary, tertiary, and specialty care. The plan  
15 must include the following components:

16 1. A schedule for the initial and follow-up health  
17 screenings;

18 2. A strategy for providing access to health care services  
19 and treatment for health needs identified through screenings;

20 3. A strategy for the updating and appropriate sharing of  
21 health care data and information which may include establishing  
22 an electronic health record;

23 4. A system for ensuring continuity of health care services  
24 which may include establishing a medical home for each child in  
25 care;

26 5. A procedure for providing oversight of prescription  
27 medication;

28 6. A protocol to increase collaboration among health,  
29 mental health, child welfare, juvenile justice, courts,  
30 education, and other child-serving systems, as well as providers  
31 and community organizations, to meet the health care needs of  
32 children in care; and

33 7. A strategy for including families in health care  
34 decisions for children in care.

35 (b) The department shall submit a report to the Governor  
36 and the Legislature by March 1 and September 1 of each year  
37 until a system for providing comprehensive health care to  
38 children in care has been implemented statewide. The report must  
39 address progress that has been made toward achieving each of the  
40 components in paragraph (a).

41 (4) PERMANENT CONNECTIONS. -

42 (a)The department, in collaboration with the Independent



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43 Living Services Advisory Council shall establish a workgroup for  
44 the purpose of developing and implementing strategies to ensure  
45 that each child who leaves care has at least one positive,  
46 reliable caring adult who will continue to support him or her  
47 after leaving care, through his or her young adulthood and  
48 beyond. This adult may include:

49 1. People with whom the youth has some emotional  
50 attachment such as birth family, extended family, kin, adoptive  
51 family, foster family, teachers, mentors or coaches;

52 2. People with whom the youth would like to stay connected  
53 or re-establish contact; or

54 3. People who the youth defines as family or supports.

55 (b) The department shall submit a report by December 31 of  
56 each year to the Governor and the Legislature which includes a  
57 summary of the actions taken and practices implemented statewide  
58 to ensure that no child leaves care without a lifelong  
59 connection to a supportive adult.

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===== T I T L E A M E N D M E N T =====

And the title is amended as follows:

Delete line 64

and insert:

of school, community, and family life; requiring the  
department to work with the Agency for Health Care  
Administration and other stakeholders to develop a  
plan for providing comprehensive health care for a  
child; requiring a report; requiring the department to  
work with the Independent Living Services Advisory



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Council to develop strategies to ensure that no child  
leaves care without a permanent connection to a  
committed adult; requiring a report; requiring