

ENROLLED HOUSE  
BILL NO. 2149

By: Gilbert of the House

and

Rozell of the Senate

An Act relating to mental health; amending 43A O.S. 2001, Sections 5-501, 5-502, 5-503, 5-504, 5-505, 5-506, 5-507, 5-508, 5-509, 5-510, 5-511, 5-512 and 5-513, which relate to the Inpatient Mental Health Treatment of Children Act; renaming the act; amending legislative intent to include inpatient substance abuse treatment; modifying definitions; authorizing peace officer to take minor into protective custody under certain circumstances; stating how officer shall be reimbursed; specifying certain statements shall not be used against minor; deleting obsolete language; modifying terminology; adding required component of discharge plan; amending 10 O.S. 2001, Section 1101.1, which relates to placement of an adjudicated child in a mental health facility; updating language; deleting obsolete language; amending 10 O.S. 2001, Sections 7001-1.3, 7003-2.1, 7003-3.1, 7003-5.3, 7003-7.1 and 7004-3.2, which relate to the Oklahoma Children's Code; updating language; amending 10 O.S. 2001, Sections 7302-5.2, 7302-5.3, 7302-6.1, 7303-1.1, 7303-1.3, 7303-1.7, 7303-5.2, 7303-8.1, 7303-8.4, 7303-8.5 and 7304-1.1, which relate to the Oklahoma Juvenile Code; updating language; amending 28 O.S. 2001, Section 162, which relates to court costs of juvenile proceedings; updating language; amending 43A O.S. 2001, Section 12-104, which relates to the Youth Suicide Prevention Council; providing mechanism for filling vacant positions on the Council; providing an effective date; and declaring an emergency.

BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

SECTION 1. AMENDATORY 43A O.S. 2001, Section 5-501, is amended to read as follows:

Section 5-501. A. Sections ~~2 through 13~~ 5-501 through 5-513 of this ~~act~~ title shall be known and may be cited as the "Inpatient Mental Health and Substance Abuse Treatment of ~~Children~~ Minors Act".

B. The Oklahoma Legislature hereby declares that the public policy of this state is to assure adequate treatment of ~~children~~ minors needing mental health treatment or treatment for drug or alcohol abuse, to establish behavioral standards for determination of dangerousness of persons in need of such treatment, to require

the use of the least restrictive alternative in the determination of the method of treatment, to provide orderly and reliable procedures for admission or commitment of ~~children~~ minors alleged to be in need of inpatient mental health treatment or treatment for drug or alcohol abuse consistent with due process of law, and to protect the rights of patients hospitalized pursuant to law.

C. It is the intent of the Legislature that:

1. Mental health and substance abuse treatment services shall be provided in the manner most likely to preserve, support and strengthen the family of the ~~child~~ minor and to assist the ~~child~~ minor and ~~his~~ the family of the minor; and

2. ~~Children~~ Minors needing mental health services or substance abuse treatment shall, to the maximum extent possible, receive those services on an outpatient basis and that inpatient ~~mental health~~ evaluation and treatment services shall be utilized only as necessary to preserve the health or safety of the ~~child~~ minor or, in the case of a ~~child~~ minor who as a result of a demonstrable mental illness or drug or alcohol dependence can be expected to intentionally or unintentionally seriously and physically injure another person, for the protection of others.

SECTION 2. AMENDATORY 43A O.S. 2001, Section 5-502, is amended to read as follows:

Section 5-502. As used in the Inpatient Mental Health and Substance Abuse Treatment of ~~Children~~ Minors Act:

1. "~~Child~~ Minor" means any person under eighteen (18) years of age;

2. "~~Child~~ Minor in need of ~~mental health~~ treatment" means a ~~child~~ minor:

a. who has a demonstrable mental illness or who is drug or alcohol dependent and as a result of that mental illness or dependency can be expected within the near future to inflict or attempt to inflict serious bodily harm to himself or herself or another person ~~if mental health services are not provided~~ and has engaged in one or more recent overt acts or made significant recent threats which substantially support that expectation, or

b. who has a demonstrable mental illness or is drug or alcohol dependent of sufficient severity to cause substantial impairment or disability in at least two of the following major areas of functioning in the ~~child's~~ minor's life: family relations, school performance, social interactions or ability to perform independently the basic tasks of personal hygiene, hydration and nutrition, or self-protection. A determination regarding the ability of the ~~child~~ minor to perform independently said basic tasks shall be based upon the age of the ~~child~~ minor and reasonable and appropriate expectation of the abilities of a ~~child~~ minor of such age to perform said tasks.

The term "~~child minor~~ in need of ~~mental health~~ treatment" shall not mean a ~~child minor~~ afflicted with epilepsy, developmental disability, organic brain syndrome, physical handicaps, brief periods of intoxication caused by such substances as alcohol or drugs or who is truant or sexually active unless the ~~child minor~~ also meets the criteria for a ~~child minor~~ in need of treatment pursuant to ~~subparagraphs~~ subparagraph a and or b of this paragraph;

3. "Consent" means the voluntary, express, and informed agreement to treatment in a mental health facility by a ~~child minor~~ sixteen (16) years of age or older and by a parent having custody of the ~~child or a legally authorized custodian~~ minor;

4. "~~Independent~~" means a ~~licensed mental health professional~~ conducting an outpatient or inpatient mental health evaluation and submitting a report to the district attorney or court pursuant to the provisions of the Inpatient Mental Health Treatment of Children Act who is not and will not be treating the child and has no financial interest in a facility in which the child will be placed or any significant interest in the hospitalization of the child that would constitute a conflict of interest, and has signed an affidavit to that effect, provided, a ~~licensed mental health professional~~ employed by a community mental health center shall be exempt from the requirement that he or she is not and will not be treating the ~~child~~;

5. "Individualized treatment plan" means a specific plan for the care and treatment of an individual ~~child minor~~ who requires inpatient mental health treatment. The plan shall be developed with maximum involvement of the ~~child's~~ family of the minor, consistent with the ~~child's~~ desire of the minor for confidentiality and with the treatment needs of the ~~child minor~~, and shall clearly include the following:

- a. a statement of the presenting problems of the ~~child~~ minor, short- and long-term treatment goals and the estimated date of discharge. The short- and long-term goals shall be based upon a clinical evaluation and shall include specific behavioral and emotional goals against which the success of treatment can be measured,
- b. treatment methods and procedures to be used to achieve these goals, which methods and procedures are related to each of these goals and which include, but are not limited to, specific prognosis for achieving each of these goals,
- c. identification of the types of professional personnel who will carry out the treatment procedures including, but not limited to, appropriate licensed mental health professionals, education professionals, and other health or social service professionals,
- d. documentation of the involvement of the ~~child~~ minor in the development of the treatment plan and:
  - (1) the involvement of a parent in the development of the treatment plan and the consent of the ~~child~~ minor to the plan, or

- (2) when the ~~child~~ minor is in the legal custody of a public or private child care agency, the involvement of a designated representative of the agency in the development of the treatment plan and documentation of the consent of the agency to the treatment plan;

~~6.~~ 5. "Inpatient treatment" means ~~mental health~~ treatment services offered or provided for a continuous period of more than twenty-four (24) hours in residence after admission to a mental health or substance abuse treatment facility for the purpose of observation, evaluation or treatment;

~~7.~~ 6. "Least restrictive alternative" means the treatment and conditions of treatment which, separately and in combination, are no more intrusive or restrictive of freedom than reasonably necessary to achieve a substantial therapeutic benefit to the ~~child~~ minor or to protect the ~~child~~ minor or others from physical injury;

~~8.~~ 7. "Less restrictive alternative to inpatient treatment" means and includes but is not limited to outpatient counseling services, including services provided in the home of the ~~child~~ minor and which may be referred to as "home-based services", day treatment or day hospitalization services, respite care, or foster care or group home care, as defined by Title 10 of the Oklahoma Statutes, through a program established and specifically designed to meet the needs of ~~children~~ minors in need of mental health treatment, or a combination thereof;

~~9.~~ 8. "Licensed mental health professional" means a person who has received specific training for and is experienced in performing mental health therapeutic, diagnostic or counseling functions and is not related by blood or marriage to the person being examined or does not have any interest in the estate of the person being examined, and who is:

- a. a psychiatrist who is a diplomate of the American Board of Psychiatry and Neurology,
- b. clinical psychologist who is duly licensed to practice by the State Board of Examiners of Psychologists,
- c. a licensed professional counselor as defined in Section 1902 of Title 59 of the Oklahoma Statutes,
- d. a person licensed as a licensed social worker pursuant to the provisions of the Licensed Social Workers Act, Section 1250 et seq. of Title 59 of the Oklahoma Statutes,
- e. a licensed marital and family therapist as defined in Section 1925.2 of Title 59 of the Oklahoma Statutes, or
- f. a Doctor of Medicine who is duly licensed to practice by the State Board of Medical Licensure and Supervision, or a Doctor of Osteopathy who is duly licensed to practice by the Oklahoma Board of Osteopathic Examiners, or a qualified examiner as defined in Section 1-103 of this title.

For the purposes of this paragraph, "licensed" means that the person holds a current, valid license issued in accordance with the laws of this state;

~~10.~~ 9. "Mental health evaluation" means an examination or evaluation of a ~~child~~ minor for the purpose of making a determination whether, in the opinion of the licensed mental health professional making the evaluation, the ~~child~~ minor is a ~~child~~ minor in need of ~~mental health~~ treatment and, if so, is in need of inpatient ~~mental health~~ treatment and for the purpose of preparing reports or making recommendations for the most appropriate and least restrictive treatment for the ~~child~~ minor;

~~11.~~ 10. "Mental health facility" means a public or private hospital or related institution as defined by Section 1-701 of Title 63 of the Oklahoma Statutes offering or providing inpatient mental health services, a public or private facility accredited as an inpatient or residential psychiatric facility by the Joint Commission on Accreditation of Healthcare Organizations, or a facility operated by the Department of Mental Health and Substance Abuse Services and designated by the Commissioner of the Department of Mental Health and Substance Abuse Services as appropriate for the inpatient evaluation or treatment of ~~children~~ minors;

~~12.~~ 11. "Mental illness" means a substantial disorder of the child's cognitive, volitional, or emotional processes that demonstrably and significantly impairs judgment or capacity to recognize reality or to control behavior. "Mental illness" may include substance abuse, which is the use, without compelling medical reason, of any substance which results in psychological or physiological dependency as a function of continued use in such a manner as to induce mental, emotional, or physical impairment and cause socially dysfunctional or socially disordering behavior;

~~13.~~ 12. "Parent" means:

- a. a biological or adoptive parent who has legal custody of the ~~child~~ minor, including either parent if custody is shared under a joint decree or agreement, or
- b. a person judicially appointed as a legal guardian of the ~~child~~ minor, or
- c. a relative within the third degree of consanguinity who exercises the rights and responsibilities of legal custody by delegation from a parent, as provided by law;

~~14.~~ 13. "Person responsible for the supervision of the case" means:

- a. when the ~~child~~ minor is a ward of the court and in the legal custody of a public or private child care agency, the caseworker or other person designated by the agency to supervise the case, or
- b. when the ~~child~~ minor is a ward of the court and under the court-ordered supervision of the Department of Human Services or a statutorily constituted juvenile bureau, the person designated by the Department of

Human Services or juvenile bureau to supervise the case;

~~15.~~ 14. "Prescreening" means a ~~face-to-face~~ mental health evaluation conducted by a licensed mental health professional to determine whether a ~~child~~ minor requires an inpatient evaluation or an emergency mental health admission and may include consultation with other mental health professionals and a review of all available records on the ~~child~~ minor;

~~16.~~ 15. "Ward of the court" means a ~~child~~ minor adjudicated to be a deprived child, a child in need of supervision, or a delinquent child; and

~~17.~~ 16. "Treatment" means any planned intervention intended to improve ~~a child's~~ the functioning of a minor in those areas which show impairment as a result of mental illness or drug or alcohol dependence.

SECTION 3. AMENDATORY 43A O.S. 2001, Section 5-503, is amended to read as follows:

Section 5-503. A. A ~~child~~ minor may be admitted for inpatient mental health or substance abuse treatment only pursuant to the provisions of the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act.

B. A parent of a ~~child~~ minor may consent to the voluntary admission of the ~~child~~ minor for inpatient mental health or substance abuse treatment or, when the ~~child~~ minor is age sixteen (16) or older and refuses to consent or revokes his or her consent to inpatient mental health or substance abuse treatment, request the district attorney to file a petition alleging the ~~child~~ minor to be a ~~child~~ minor in need of mental health treatment and to require inpatient treatment.

C. A mental health or substance abuse treatment facility may make application to the district attorney for the filing of a petition alleging a ~~child~~ minor to be a ~~child~~ minor in need of ~~mental health~~ treatment and to require inpatient treatment when the parent consenting to ~~a child's~~ the admission of a minor revokes such consent and the person in charge of the ~~mental health~~ facility, or other person authorized by the person in charge of the facility to make such determination, determines that the condition of the ~~child~~ minor is such that the ~~child~~ minor should remain in the ~~mental health~~ facility.

D. A ~~child~~ minor who is a ward of a court may be admitted to a hospital or other ~~mental health~~ facility for inpatient mental health or substance abuse evaluation or treatment only pursuant to the provisions of Section 5-507 of this title.

1. a. A parent having legal custody of a ~~child~~ minor who is a ward of the court, with the consent of the person responsible for the supervision of the case, may request the district attorney to file a petition alleging the ~~child~~ minor to be a ~~child~~ minor in need of ~~mental health~~ treatment and to require inpatient treatment, or

- b. The Department of Human Services, the Office of Juvenile Affairs or the juvenile bureau having supervision of the case may make such request.

2. A public or private child care agency having legal custody of a ~~child~~ minor may request the district attorney to file a petition alleging the ~~child~~ minor to be a ~~child~~ minor in need of ~~mental health~~ treatment and to require inpatient treatment.

~~E.~~ Nothing in the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act shall be interpreted to prohibit or preclude the provision of outpatient ~~mental health~~ treatment or services including, but not limited to, ~~an~~ outpatient ~~mental health~~ evaluation, counseling, educational, rehabilitative or other mental health and substance abuse services to the ~~child~~ minor, as necessary and appropriate, in the absence of a specific court order for such services.

~~F. E.~~ 1. An order of a court committing a ~~child~~ minor to a ~~mental health~~ facility for inpatient mental health or substance abuse evaluation or treatment shall not, by itself, relieve a parent of the obligation to provide for the support of the ~~child or~~ minor ~~nor~~ of liability for the cost of ~~mental health~~ treatment provided to the ~~child~~ minor.

2. Nothing in the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act shall be interpreted to:

- a. limit the authority of the court to order a parent to make support payments or to make payments or reimbursements for medical care or treatment, including mental health care or treatment, to the person, institution, agency or Department having custody of the ~~child~~ minor or providing the treatment, or
- b. abrogate the right of the ~~child~~ minor to any benefits provided through public funds for which the ~~child~~ minor is otherwise eligible.

3. An order committing a ~~child~~ minor to a ~~mental health~~ facility for inpatient mental health or substance abuse treatment shall not by itself serve to preclude a subsequent adjudication which finds the ~~child~~ minor to be delinquent, in need of supervision or deprived ~~or~~ nor shall ~~not~~ it cause the vacation of any such order of adjudication previously entered.

F. If a peace officer determines that a minor is a threat to self or others as a result of mental illness or drug or alcohol dependence to a degree that immediate emergency action is necessary, the officer shall take said minor into protective custody and shall transport said minor to a mental health or substance abuse treatment facility for evaluation. Peace officers providing such transportation services shall be entitled to reimbursement pursuant to Section 1-110 of this title.

SECTION 4. AMENDATORY 43A O.S. 2001, Section 5-504, is amended to read as follows:

Section 5-504. A. Upon the filing of a petition alleging that a child minor is a child minor in need of ~~mental health~~ treatment and requires inpatient mental health or substance abuse treatment, or upon the assumption of protective or emergency custody of an alleged deprived child pursuant to the provisions of Section 7003-2.1 of Title 10 of the Oklahoma Statutes, or when a child minor is the ward of the court, the judge of the district court having juvenile docket responsibility shall have jurisdiction of any child minor who is or is alleged to be a minor in need of ~~mental health~~ treatment and of the parent or legal custodian of said child minor, regardless of where the parent or legal custodian is found. When jurisdiction has been obtained over a child minor who is or is alleged to be in need of ~~mental health~~ treatment, such jurisdiction may be retained until the child minor is discharged from ~~mental health~~ treatment ordered by the court. For the convenience of the parties and in the interest of justice, a proceeding under the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act may be transferred to the district court in any other county.

1. The venue for legal proceedings pursuant to the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act shall be:

- a. the county where the child minor resides,
- b. when the child minor is in the custody of a public or private child care agency, the county in which the child minor resides at the time legal proceedings are initiated, or
- c. the county of original jurisdiction.

2. The district court in which a petition is filed or the district court in which custody has been assumed pursuant to the provisions of Section 7003-2.1 of Title 10 of the Oklahoma Statutes may retain jurisdiction of a child minor in need of ~~mental health~~ treatment in such proceeding even if the child minor is subject to the jurisdiction of another district court within the state. Any orders made by the court in which said petition is filed shall control over prior orders in regard to the child minor.

3. The district court in which a petition is filed which alleges that a child minor is a minor in need of ~~mental health~~ treatment may issue any temporary order or grant any interlocutory relief authorized by the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act even if another district court within the state has jurisdiction of the child minor or has jurisdiction to determine the custody or support of the child minor.

4. If the district court in which a petition is filed pursuant to either paragraph 2 or 3 of this subsection sustains the petition, the district court shall have the jurisdiction to make a final determination on the petition or to transfer the proceedings to a court having prior jurisdiction over the child minor. Where the other proceeding is pending in the same judicial district in which the petition is filed, the chief judge of the judicial district shall determine which judge shall try the issues when the judges to whom the cases have been assigned are unable to agree on the procedure that should be followed.



B. Unless otherwise specifically provided by the Inpatient Mental Health and Substance Abuse Treatment of ~~Children~~ Minors Act and Title 43A of the Oklahoma Statutes, the rules of civil procedure shall apply to all legal proceedings pursuant to the Inpatient Mental Health and Substance Abuse Treatment of ~~Children~~ Minors Act.

SECTION 5. AMENDATORY 43A O.S. 2001, Section 5-505, is amended to read as follows:

Section 5-505. A. A ~~child~~ minor may be admitted to a mental health or substance abuse treatment facility willing to admit the ~~child~~ minor for inpatient treatment upon application and with the consent of a parent having custody of the ~~child~~ minor as follows:

1. A ~~child~~ minor sixteen (16) years of age or older may be admitted to a willing mental health or substance abuse treatment facility for inpatient treatment upon the joint application and consent of the ~~child~~ minor and the ~~child's~~ parent of the minor; and

2. The consent of a ~~child~~ minor under the age of sixteen (16) is not required for admission pursuant to the provisions of this section.

B. Upon the application of a parent of the ~~child~~ minor, a mental health or substance abuse facility may admit the ~~child~~ minor for inpatient ~~mental health~~ evaluation or treatment if the person in charge of the ~~mental health~~ facility or a designee and a licensed mental health professional determines the ~~child~~ minor to be clinically eligible for such admission.

1. A ~~child~~ minor may be eligible for admission for inpatient evaluation when, after a prescreening examination, a licensed mental health professional determines and states in writing that there is reasonable cause to believe that the ~~child~~ minor may be a minor in need of ~~mental health~~ treatment and that such evaluation is necessary to properly determine the condition of the ~~child~~ minor and the ~~mental health~~ treatment needs of the ~~child~~ minor, if any.

2. A ~~child~~ minor may be eligible for inpatient mental health or substance abuse treatment when, after an outpatient or inpatient mental health evaluation, a licensed mental health professional determines and states in writing that in ~~his or her professional~~ the opinion of the professional, the ~~child~~ minor is a ~~child~~ minor in need of ~~mental health~~ treatment and:

a. the ~~child~~ minor appears to have a mental illness or drug or alcohol dependence serious enough to warrant inpatient treatment and is reasonably likely to benefit from the treatment, and

b. based upon the following, inpatient treatment is determined to be the least restrictive alternative that meets the needs of the ~~child~~ minor:

(1) reasonable efforts have been made to provide for the ~~mental health~~ treatment needs of the ~~child~~ minor through the provision of less restrictive alternatives and such alternatives have failed to meet the treatment needs of the ~~child~~ minor, or

(2) after a thorough consideration of less restrictive alternatives to inpatient treatment, the condition of the ~~child~~ minor is such that less restrictive alternatives are unlikely to meet the ~~mental health~~ treatment needs of the ~~child~~ minor, and

- c. the ~~child~~ minor has been provided with a clinically appropriate explanation of the nature and purpose of the treatment, and
- d. if the ~~child~~ minor is sixteen (16) years of age or older, the ~~child~~ minor has been provided with an explanation of the ~~child's~~ rights of the minor under this act as they would apply if the ~~child~~ minor were to object to admission, and the ~~child~~ minor has consented to admission.

3. If admission or transfer from a private ~~mental health~~ facility to a state-operated ~~mental health~~ facility is sought, the community mental health center serving the area in which the ~~child~~ minor resides shall provide the ~~mental health~~ evaluation required by this section and shall ensure that the necessary written findings have been made before approving the admission.

4. A copy of the written findings of the evaluation required by this section shall be provided to the consenting parent and the parent shall have the opportunity to discuss the findings with the person conducting the evaluation.

C. The determinations and written statements of a licensed mental health professional made pursuant to this section shall, upon the admission of the ~~child~~ minor for inpatient evaluation or treatment, be made a part of the medical record of the ~~child~~ minor.

D. Inpatient treatment of a ~~child~~ minor admitted under this section may not exceed ninety (90) consecutive days unless continued inpatient treatment has been authorized by appropriate hospital medical personnel, based upon their written findings that the criteria set forth in subsection B of this section continue to be met, after such persons have examined the ~~child~~ minor and interviewed the consenting parent and reviewed reports submitted by members of the facility staff familiar with the ~~child's~~ minor's condition.

E. Any ~~child~~ minor younger than sixteen (16) years of age admitted under this section ~~while younger than sixteen (16) years of age~~ and the ~~child's~~ consenting parent of the minor shall be informed orally and in writing by the director of the facility for inpatient treatment within five (5) days prior to the ~~child's~~ sixteenth birthday of the minor that continued voluntary treatment under the authority of this section requires the ~~child's~~ consent of the minor.

F. 1. If the parent who consented to ~~a child's~~ the admission of a minor under this section revokes such consent at any time, or if a ~~child~~ minor sixteen (16) or older objects at any time to further treatment, the ~~child~~ minor shall be discharged within forty-eight (48) hours to the custody of such consenting parent, unless the parent of the ~~child~~ minor refusing or revoking such consent or, when the parent revokes such consent, the facility, requests the

district attorney to file a petition alleging the ~~child~~ minor to be a child minor in need of ~~mental health~~ treatment and to require inpatient treatment in accordance with the provisions of subsection B of Section 5-506 of this title.

2. In such cases, the ~~child~~ minor may be detained up to ~~three (3) days~~ seventy-two (72) hours, excluding weekends and legal holidays, pending the filing of the petition and if a petition is filed, the ~~child~~ minor may be detained in the ~~mental health~~ facility only upon an order of the court pending hearing on the petition and further order of the court.

G. Nothing in this section shall be interpreted to prohibit or preclude an emergency admission of a ~~child~~ minor to a mental health or substance abuse treatment facility when the condition of the ~~child~~ minor warrants such admission. Whenever the admission of a ~~child~~ minor who has been admitted to a ~~mental health~~ facility as an emergency patient continues for longer than seventy-two (72) hours for the purpose of continued inpatient evaluation or treatment the provisions of subsection B of this section shall apply.

SECTION 6. AMENDATORY 43A O.S. 2001, Section 5-506, is amended to read as follows:

Section 5-506. A. Upon the application of a parent ~~with whom the child resides~~, a ~~child~~ minor sixteen (16) years of age or older who objects to admission may be admitted to a mental health or substance abuse treatment facility that is willing to admit the ~~child~~ minor for up to ~~three (3) days~~ seventy-two (72) hours, excluding weekends and legal holidays. If admission or transfer from a private ~~mental health~~ facility to a state-operated facility is sought, the community mental health center serving the area in which the ~~child~~ minor resides shall provide the required ~~mental health~~ evaluations and reports and shall ensure that the necessary written findings have been made.

B. 1. A ~~child~~ minor admitted pursuant to this section or detained as provided by Section 5-505 of this title shall be evaluated within forty-eight (48) hours of admission or detention by ~~an independent~~ a licensed mental health professional and a report of the evaluation shall be submitted to the district attorney.

2. Upon admission of a ~~child~~ minor pursuant to this section or detention pursuant to Section 5-505 of this title, the person requesting the petition shall immediately notify the district attorney. The ~~child~~ minor may be held by the ~~mental health~~ facility longer than three (3) days, excluding weekends and legal holidays, only after a petition is filed and upon an order of the court pending a hearing on a petition alleging the ~~child~~ minor to be a child minor in need of ~~mental health~~ treatment and to require inpatient treatment and further order of the court.

C. A ~~child~~ minor admitted under this section who rescinds an objection may be retained in the hospital pursuant to Section 5-505 of this title.

D. If the parent who consented to ~~a child's~~ the admission of a minor under this section revokes such consent at any time, the ~~child~~ minor shall be released within forty-eight (48) hours to the ~~parent's~~ custody of the parent unless the person in charge of the

facility, or a designee, requests the filing of a petition as provided by subsection C of Section 5-503 of this title.

SECTION 7. AMENDATORY 43A O.S. 2001, Section 5-507, is amended to read as follows:

Section 5-507. A. No ~~child~~ minor who is taken into protective or emergency custody pursuant to Section 7003-2.1 of Title 10 of the Oklahoma Statutes ~~or as an alleged deprived child~~, or who ~~is~~ has been adjudicated a ward of the court shall be admitted to a hospital or mental health or substance abuse treatment facility:

1. On an emergency psychiatric basis except as provided by subsection C of this section;

2. For an inpatient mental health evaluation except as provided by subsection D of this section; or

3. For inpatient ~~mental health care and~~ treatment except upon a commitment order of the court after a finding that the ~~child~~ minor requires such services as provided by Section 5-512 of this title.

B. 1. Whenever a ~~child~~ minor is taken into protective custody as provided by Section 7003-2.1 of Title 10 of the Oklahoma Statutes and is believed to be a ~~child~~ minor in need of ~~mental health~~ treatment, the ~~child~~ minor shall be taken to a shelter, hospital, foster home or other appropriate place as designated by the court, or the ~~child~~ minor shall be taken immediately before a judge of the district court for the purpose of obtaining an order for ~~protective~~ emergency custody. When a ~~child~~ minor has been taken into protective custody as a ~~child~~ minor in need of ~~mental health~~ treatment without a court order, the peace officer or employee of the court taking the ~~child~~ minor into protective custody shall immediately report the fact of the detention of the ~~child~~ minor to a judge of the district court in the county in which the ~~child~~ minor was taken into protective custody. If no judge is available locally, the detention shall be reported immediately to the presiding judge of the judicial administrative district, or if the presiding judge of the judicial administrative district cannot be reached, then to any judge regularly serving within the judicial administrative district.

2. The parent or legal guardian of the ~~child~~ minor shall be given immediate notice of the protective custody of the ~~child~~ minor whenever possible and prior adequate notice of any hearing pursuant to this subsection. Within the next two (2) judicial days following the taking of the ~~child~~ minor into protective custody, and thereafter at such intervals as may be determined by the court, the court shall conduct a hearing to determine whether the ~~child~~ minor should remain in protective custody or be released to the parent, guardian, legal custodian or another responsible person pending further proceedings pursuant to the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act.

3. The court may release a ~~child~~ minor alleged to be a minor in need of ~~mental health~~ treatment from protective custody upon such conditions as the court finds reasonably necessary for the protection of the ~~child~~ minor or others.

C. After a prescreening examination and a determination by a licensed mental health professional that there is reasonable cause to believe that as a result of a demonstrable mental illness or drug or alcohol dependence there exists an imminent danger that the child minor will intentionally or unintentionally seriously physically injure himself or another person, a child minor may be admitted to a hospital or mental health or substance abuse treatment facility on an emergency psychiatric basis. Except upon an order of the court for an inpatient ~~mental health~~ evaluation of the child minor as provided by subsection D of this section, such emergency ~~psychiatric~~ admission shall be for not more than two (2) days, excluding weekends and legal holidays.

D. After a prescreening ~~mental health~~ evaluation and upon an application by the district attorney, the court may issue an order for a ~~mental health~~ an evaluation of a child minor who is a ward of the court, or who has been taken into protective or emergency custody as otherwise provided by Title 10 of the Oklahoma Statutes, and who appears to be a child minor in need of ~~mental health~~ treatment. The evaluation shall be made by ~~an independent a~~ licensed mental health professional.

1. The court shall order an inpatient ~~mental health~~ evaluation only after a finding that there exists an imminent danger that the child minor will cause serious physical injury to that child minor or another person and therefore the ~~mental health~~ evaluation cannot be conducted on an outpatient basis. Such finding shall be based upon clear and convincing evidence.

2. In all other cases, the court shall order the ~~mental health~~ evaluation of the child minor to be conducted on an outpatient basis in or near the community in which the child minor resides at the time of such order.

E. An order committing a child minor who is a ward of the court for inpatient evaluation shall order the commitment of the child minor for not more than three (3) days, excluding weekends and holidays.

1. A child minor admitted pursuant to this section shall be evaluated within forty-eight (48) hours of admission by ~~an independent a~~ licensed mental health professional and a report of the evaluation ~~shall be~~ submitted to the district attorney.

2. If after the inpatient evaluation it appears that the child minor may require inpatient ~~mental health~~ treatment, the district attorney may file a petition with the court requesting an order committing the child minor to a ~~mental health~~ facility for inpatient ~~mental health~~ treatment. After the filing of a petition and upon an order of the court, the child minor may be detained in the ~~mental health~~ facility for no longer than necessary for a hearing on the petition and further order of the court.

F. Nothing in this section shall be interpreted to preclude or prohibit:

1. The admission of a child minor to a hospital for needed medical care and services, other than mental health treatment or examination; or

2. A parent having physical custody of a ~~child~~ minor who is a ward of the court from arranging for an emergency ~~psychiatric~~ admission of the ~~child~~ minor. In such cases, the parent shall immediately notify the person responsible for the supervision of the case of said admission.

SECTION 8. AMENDATORY 43A O.S. 2001, Section 5-508, is amended to read as follows:

Section 5-508. A. The report of ~~an independent~~ a licensed mental health professional prepared pursuant to Section 5-506 or 5-507 of this title shall include written findings as to whether:

1. The ~~child~~ minor appears to have demonstrable mental illness or drug or alcohol dependence and as a result of that mental illness or drug or alcohol dependence can be expected within the near future to inflict or attempt to inflict serious bodily harm to himself or herself or another person if ~~mental health~~ services are not provided, has engaged in one or more recent overt acts or made significant recent threats which substantially support that expectation, and is reasonably likely to benefit from ~~mental health~~ treatment; and

2. Based upon the following, inpatient treatment is the least restrictive alternative that meets the needs of the ~~child~~ minor:

- a. reasonable efforts have been made to provide for the ~~mental health~~ treatment needs of the ~~child~~ minor through the provision of less restrictive alternatives and such alternatives have failed to meet the treatment needs of the ~~child~~ minor, or
- b. after a thorough consideration of less restrictive alternatives to inpatient treatment, the condition of the ~~child~~ minor is such that less restrictive alternatives are unlikely to meet the ~~mental health~~ treatment needs of the ~~child~~ minor; and

3. The ~~child~~ minor has been provided with a clinically appropriate explanation of the nature and purpose of the treatment; and

4. If the ~~child~~ minor is sixteen (16) years of age or older and was admitted to or detained in a mental health or substance abuse treatment facility pursuant to Section 5-506 of this title, the ~~child~~ minor has been provided with an explanation of the rights of the ~~child~~ minor pursuant to the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act as they would apply if the ~~child~~ minor were to object to admission, and the ~~child~~ minor has objected to admission.

B. Any report of a mental health evaluation of a ~~child~~ minor alleged to be a ~~child~~ minor in need of ~~mental health~~ treatment that recommends that the ~~child~~ minor be found to be eligible for inpatient mental health or substance abuse treatment shall be signed by the ~~independent~~ licensed mental health professional examining the ~~child~~ minor.

C. The report of a mental health evaluation of a child minor pursuant to Section 5-506 or 5-507 of this title shall be submitted to the district attorney.

D. The parents, all public agencies, and all providers or programs which have treated or are treating the child minor shall cooperate with the person conducting a mental health evaluation for the purpose of providing a report to a district attorney or to a district court and shall promptly deliver, as otherwise provided by law, all records related to the treatment or education of the child minor.

SECTION 9. AMENDATORY 43A O.S. 2001, Section 5-509, is amended to read as follows:

Section 5-509. A. A petition alleging a child minor to be a child minor in need of ~~inpatient mental health~~ treatment shall be filed by a district attorney and may be filed by a district attorney only after receipt and review of the report of ~~an independent~~ a licensed mental health professional stating that in the opinion of said professional the child minor has a demonstrable mental illness or is drug or alcohol dependent and as a result of that mental illness or drug or alcohol dependence can be expected within the near future to inflict or attempt to inflict serious bodily harm to the child minor or another person if ~~mental health~~ services are not provided, and upon the request of:

1. A parent, a public or private child care agency having legal custody of the child minor, or a mental health or substance abuse treatment facility; or

2. When the child minor is a ward of the court, the Department of Human Services, the Office of Juvenile Affairs or juvenile bureau having supervision of the case or by the parent of the child minor with the consent of the Department or Office, as applicable, or juvenile bureau having supervision of the case.

B. If after receipt and review of the report of a licensed mental health professional:

1. The district attorney declines to file a petition, the child minor shall be discharged to the custody of the consenting parent or public or private agency having custody of the child minor; or

2. The petition is filed, a copy of the report of the licensed mental health professional shall be attached to the petition and notice shall be given as provided by Section 5-510 of this title.

C. 1. The proceeding shall be entitled "In the matter of \_\_\_\_\_, a child minor alleged to be in need of inpatient mental health or substance abuse treatment".

2. The petition shall allege that the child minor has a demonstrable mental illness or is drug or alcohol dependent and as a result of that mental illness or drug or alcohol dependence can be expected within the near future to inflict or attempt to inflict serious bodily harm to himself or another person if ~~mental health~~ services are not provided and has engaged in one or more recent overt acts or made significant recent threats which substantially

support that expectation and shall be verified and may be based upon information and belief. It shall set forth:

- a. with particularity the facts which bring the ~~child~~ minor within the purview of the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act,
- b. the name, age and residence of the ~~child~~ minor,
- c. the names and residences of ~~his~~ the parents of the minor,
- d. the name and residence of ~~his~~ the legal guardian of the minor, if there be one,
- e. the name and residence of the person or persons having custody or control of the ~~child~~ minor,
- f. the name and residence of the nearest known relative, if no parent or guardian can be found,
- g. the relief requested, and
- h. an endorsement of witnesses intended to be called by the petitioner.

D. Upon the filing of a petition pursuant to this section, the person requesting the petition shall ensure that a proposed individual treatment plan for the ~~child~~ minor is prepared and submitted to the court at least twenty-four (24) hours prior to the time set for the hearing. Whenever possible, the proposed individual treatment plan shall be attached to the petition.

SECTION 10. AMENDATORY 43A O.S. 2001, Section 5-510, is amended to read as follows:

Section 5-510. A. Upon the filing of a petition alleging a ~~child~~ minor to be a ~~child~~ minor in need of ~~mental health~~ treatment, the court shall:

1. ~~If the child is not represented by counsel, appoint~~ Appoint an attorney to represent the ~~child~~ minor if the minor is not represented by counsel. An attorney so appointed shall consult with the ~~child~~ minor at least twenty-four (24) hours prior to the date set for hearing the petition. In addition, the court may appoint a guardian ad litem as provided by Section ~~1109~~ 7003-3.7 of Title 10 of the Oklahoma Statutes;

2. Set a date for a hearing on the petition. Said date shall not be less than one (1) day, or more than three (3) days, excluding weekends and legal holidays, from the date of the filing of the petition. Upon the request of the attorney for the ~~child~~ minor, the date of the hearing may be extended once for up to an additional three (3) days, excluding weekends and holidays; and

3. Cause notice of the date, time, place and purpose of the hearing to be given to the petitioner, the ~~child~~ minor, and, if not the petitioner, the ~~parents~~ parent(s) of the ~~child~~ minor and, if applicable, the person in charge of the mental health or substance



abuse treatment facility. If the child minor is a ward of the court, and if not the petitioner, notice shall also be given to a public or private child care agency having legal custody of the child minor, if any, or to the person at the Department of Human Services, the Office of Juvenile Affairs or the applicable juvenile bureau responsible for the supervision of the case. Said notice shall be given at least twenty-four (24) hours prior to the date set for the hearing and shall be given in such manner as directed by the court.

B. The report of ~~a mental health~~ an evaluation of the child minor by ~~an independent~~ a licensed mental health professional shall be attached to a petition for an order committing a child minor to a facility for inpatient ~~mental health~~ treatment.

1. If the court finds the report submitted with the petition to be inadequate to aid the court in the disposition of the case, the court shall order an ~~independent mental health~~ additional evaluation of the child minor and the preparation of a proposed individualized treatment plan for the child minor.

2. The court may order such other reports as it deems necessary in order to aid the court in the disposition of the case.

SECTION 11. AMENDATORY 43A O.S. 2001, Section 5-511, is amended to read as follows:

Section 5-511. A. Hearings pursuant to the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act shall be private unless specifically ordered by the judge to be conducted in public, but persons having a direct interest in the case shall be admitted. Stenographic notes or other transcript of the hearings shall be kept as in other cases, but they shall not be open to inspection except by order of the court or as otherwise provided by Title 10 of the Oklahoma Statutes for court records relating to children.

B. The child minor may remain silent as a matter of right in hearings pursuant to the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act and shall be so advised. No statement, admission or confession made by the minor alleged to be a minor in need of treatment shall be used against the minor for any purpose except for proceedings pursuant to the Inpatient Mental Health and Substance Abuse Treatment of Minors Act.

C. A decision determining a child minor to be a child minor in need of ~~mental health~~ treatment must be based on sworn testimony and the child minor must have the opportunity for cross-examination unless the facts are stipulated. Where the facts are stipulated, the judge must ascertain from the child minor if ~~he~~ the minor agrees with the stipulation and ~~if he~~ understands the consequences of stipulating the facts.

D. In hearings to determine whether a child minor is a minor in need of ~~mental health~~ treatment, the child minor shall have the right to demand a trial by jury, which shall be granted as in other cases, unless waived, or the judge on his own motion may call a jury to try any such case. Such jury shall consist of six (6) persons.

SECTION 12. AMENDATORY 43A O.S. 2001, Section 5-512, is amended to read as follows:

Section 5-512. A. At the hearing the court shall determine whether by clear and convincing evidence:

1. The ~~child~~ minor has a demonstrable mental illness or is drug or alcohol dependent and as a result of that mental illness or drug or alcohol dependence can be expected within the near future to inflict or attempt to inflict serious bodily harm to himself or another person if ~~mental health~~ services are not provided and has engaged in one or more recent overt acts or made significant recent threats which substantially support that expectation; and

2. The ~~child~~ minor is a minor in need of ~~the inpatient mental health~~ treatment proposed in the individualized treatment plan and is likely to benefit from such treatment.

B. After a hearing, the court shall order the ~~child~~ minor to receive the least restrictive ~~mental health~~ care and treatment appropriate for the treatment needs of the ~~child~~ minor until such time as the care and treatment are no longer necessary.

C. The court shall not commit a ~~child~~ minor to a ~~mental health~~ facility for inpatient treatment unless the court determines:

1. The ~~child~~ minor has a demonstrable mental illness or is drug or alcohol dependent and as a result of that mental illness or drug or alcohol dependence can be expected within the near future to inflict or attempt to inflict serious bodily harm to himself or another person if ~~mental health~~ services are not provided and has engaged in one or more recent overt acts or made significant recent threats which substantially support that expectation; or

2. That all reasonable efforts have been made to provide for the ~~mental health~~ treatment needs of the ~~child~~ minor through the provision of less restrictive alternatives to inpatient treatment and that such alternatives have failed to meet the treatment needs of the ~~child~~ minor; or

3. After a thorough consideration of less restrictive alternatives to inpatient treatment, that the condition of the ~~child~~ minor is such that less restrictive alternatives are unlikely to meet the ~~mental health~~ treatment needs of the ~~child~~ minor; and

4. There are no comparably effective ~~mental health~~ services available to the ~~child~~ minor that are less physically intrusive or restrictive.

D. Whenever, after a hearing, the court finds that the ~~child~~ minor:

1. Is not a ~~child~~ minor in need of ~~mental health~~ treatment the court shall dismiss the case; or

2. Is a ~~child~~ minor in need of ~~mental health~~ treatment but does not require inpatient treatment, the court may order ~~mental health~~ treatment or services through a less restrictive alternative to inpatient mental health or substance abuse treatment, which may include ordering the ~~child~~ minor to take medication as prescribed by

a physician and, upon a finding that it is in the best interests of the child minor, the court may order the parents or other adult persons living in the home of the child minor to comply with reasonable conditions relating to the treatment of the child minor.

E. Whenever, after a hearing, the court finds that the child minor is a child minor in need of ~~mental health~~ treatment and requires inpatient treatment in a mental health or substance abuse treatment facility, the court shall order the commitment of the child minor to a mental health or substance abuse treatment facility for not more than thirty (30) days, and:

1. When the child minor is in the custody of a parent or legal guardian, order the parent or legal guardian to make arrangements for the admission of the child minor to a public or private mental health or substance abuse treatment facility appropriate for the inpatient care and treatment of children minors which is willing to admit the child minor for treatment; and

2. When the child minor is in the custody of the Department of Human Services or the Office of Juvenile Affairs, order the Department or Office, as applicable, to make arrangements for the placement of the child minor in a public or private mental health or substance abuse treatment facility appropriate for the inpatient treatment needs of the child minor.

F. Whenever the court commits a child minor to a mental health or substance abuse treatment facility for inpatient treatment pursuant to this section, the court shall set the matter for review and shall review the matter not more than thirty (30) days from the date of commitment and shall continue to review the matter at intervals of not more than thirty (30) days until the child minor is discharged from inpatient ~~mental health~~ treatment. After the review and a determination by the court that the child minor continues to meet the criteria for inpatient treatment, the court may extend the commitment order for up to thirty (30) days and set the matter for review as required by this subsection.

SECTION 13. AMENDATORY 43A O.S. 2001, Section 5-513, is amended to read as follows:

Section 5-513. A. Within ten (10) days after the admission of a child minor for inpatient ~~mental health~~ treatment, whether through a voluntary admission or an order of commitment pursuant to Section 5-512 of this title, the person in charge of the facility in which the child minor is being treated shall ensure that an individualized treatment plan has been prepared by the person responsible for the child's treatment of the minor. The child minor shall be involved in the preparation of the treatment plan to the maximum extent consistent with ~~his~~ the ability of the minor to understand and participate. The parent or legal custodian of the child minor or, if the child minor is in the custody of the Department of Human Services or the Office of Juvenile Affairs, the designated representative of the Department or Office, as applicable, shall be involved to the maximum extent consistent with the treatment needs of the child minor.

B. The child minor shall be discharged from the facility when ~~he~~ the minor no longer meets the admission or commitment criteria, as determined by appropriate ~~hospital~~ medical staff review after

such persons have examined the child minor and reviewed reports submitted by ~~members of the~~ facility staff familiar with the child's condition of the minor. If not previously discharged, a child minor committed by a court to inpatient ~~mental health~~ treatment shall be discharged upon the expiration of a court order committing the child minor for inpatient treatment or an order of the court directing the discharge of the child minor.

C. Prior to the discharge of the child minor from inpatient treatment, a discharge plan for the child minor shall be prepared and explained to the child minor and the parent or legal custodian of the child minor, or, if the child minor is in the custody of the Department of Human Services or the Office of Juvenile Affairs, a designated representative of the ~~Department or Office, as applicable~~ agency. The plan shall include but not be limited to:

1. The services required by the child minor in the community to meet ~~his~~ the minor's needs for treatment, education, housing and physical care and safety;

2. Identification of the public or private agencies that will be involved in providing treatment and support to the child minor; ~~and~~

3. Information regarding medication which should be prescribed to the child minor; ~~and~~

4. An appointment for follow-up outpatient treatment and medication management.

D. If the child minor is a ward of the court and is in the legal custody of the Department of Human Services, the Office of Juvenile Affairs or a private child care agency, or under the supervision of the Department, a statutorily constituted juvenile bureau or Office, as applicable, copies of the treatment and discharge plans shall be sent to the person at the Department of Human Services or other applicable person responsible for the supervision of the case.

SECTION 14. AMENDATORY 10 O.S. 2001, Section 1101.1, is amended to read as follows:

Section 1101.1 A. ~~On and after July 1, 1993, a~~ A child adjudicated to be deprived, delinquent or in need of supervision shall be placed in a mental health facility for inpatient treatment only in accordance with the provisions of the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act.

~~B. After July 1, 1993, and before January 1, 1994, the case of every child previously adjudicated to be a child in need of treatment prior to January 1, 1993, shall be reviewed to determine whether the child is a child in need of mental health treatment in accordance with the provisions of the Inpatient Mental Health Treatment of Children Act.~~

~~1. If the child appears to be a child in need of mental health treatment and appears to require inpatient mental health treatment, a petition may be filed in accordance with the provisions of the Inpatient Mental Health Treatment of Children Act.~~

~~2.~~ If the child does not appear to require inpatient mental health or substance abuse treatment and has not previously been adjudicated to be delinquent, deprived or in need of supervision, if warranted by the facts of the case, a petition may be filed as otherwise provided by Title 10 of the Oklahoma Statutes alleging the child to be deprived, delinquent, or in need of supervision.

~~C.~~ B. Nothing in this section or the Inpatient Mental Health and Substance Abuse Treatment of ~~Children~~ Minors Act shall prohibit or preclude a public or private agency having legal custody of a child from providing such child with necessary and appropriate outpatient mental health or substance abuse treatment services absent a specific finding or order of a court requiring the provision of such services.

SECTION 15. AMENDATORY 10 O.S. 2001, Section 7001-1.3, is amended to read as follows:

Section 7001-1.3 A. When used in the Oklahoma Children's Code, unless the context otherwise requires:

1. "Abandoned infant" means a child who is twenty-four (24) months of age or younger whose parent:
  - a. has willfully left the infant alone or in the care of another who is not the parent of the infant without identifying the infant or furnishing any means or methods of identification,
  - b. has willfully left the infant alone or in the care of another who is not the parent of the infant and expressed a willful intent by words, actions, or omissions not to return for the infant,
  - c. has knowingly placed or knowingly allowed the infant be placed in or remain in conditions or surroundings that posed or constituted a serious danger to the health and safety of the infant thereby demonstrating wanton disregard for the child's well-being,
  - d. is a father, or a putative father if the infant was born out of wedlock, and:
    - (1) if an infant is less than ninety (90) days of age, who fails to show that he has exercised proper parental rights and responsibilities with regard to the infant, including, but not limited to, contributing to the support of the mother of the infant to the extent of his financial ability during her term of pregnancy,
    - (2) (a) if an infant is older than ninety (90) days but less than fourteen (14) months of age, who fails to show that he has exercised proper parental rights and responsibilities with regard to the infant, including, but not limited to, contributing to the support of the infant to the extent of his financial ability, which may include contributing to the support of the mother of the infant to

the extent of his financial ability during her term of pregnancy.

- (b) failure to contribute to the support of the mother during her term of pregnancy, pursuant to this subdivision, shall not in and of itself be grounds for termination of the parental rights of the father or putative father, or
- (3) (a) if the infant is fourteen (14) months of age or older, who fails to show that he has exercised proper parental rights and responsibilities with regard to the infant, including, but not limited to, contributing to the support of the infant to the extent of his financial ability.
- (b) Pursuant to this subdivision, failure to contribute to the support of the mother during her term of pregnancy shall not in and of itself be grounds for termination of the parental rights of the father or putative father.

In any case where a father, or a putative father of an infant born out of wedlock, claims that prior to the receipt of notice of the hearing provided for in Section 7006-1.2 of this title he had been specifically denied knowledge of the infant or denied the opportunity to exercise parental rights and responsibilities with regard to the infant, such father or putative father shall prove to the satisfaction of the court that he made sufficient attempts to discover if he had fathered a child or made sufficient attempts to exercise parental rights and responsibilities with regard to the infant prior to the receipt of notice,

- e. has not established and/or maintained substantial and positive relationship with the infant during the six (6) months immediately prior to out-of-home placement or the six (6) continuous months while in out-of-home placement, and has not made meaningful efforts to gain or regain custody of the infant, despite being given the opportunity to do so. For purposes of this section, "establish and/or maintain substantial and positive relationship" includes but is not limited to:
  - (1) frequent and regular contact with the infant through frequent and regular visitation or frequent and regular communication to or with the infant, and
  - (2) the exercise of parental rights and responsibilities.

Incidental or token visits, communications or contributions shall not be sufficient to establish and/or maintain a substantial and positive relationship with the infant;

2. "Adjudicatory hearing" means a hearing to determine whether the allegations of a petition pursuant to the provisions of Part 3 of Article III of this Code are supported by the evidence and whether a child should be adjudged to be a ward of the court;

3. "Assessment" means a systematic process utilized by the Department of Human Services to respond to reports of alleged child abuse or neglect which, according to priority guidelines established by the Department, do not constitute a serious and immediate threat to a child's health, safety or welfare. The assessment includes, but is not limited to, the following elements:

- a. an evaluation of the child's safety, and
- b. a determination regarding the family's need for services;

4. "Child" means any person under eighteen (18) years of age except any person convicted of a crime specified in Section 7306-1.1 of this title or any person who has been certified as an adult pursuant to Section 7303-4.3 of this title and convicted of a felony;

5. "~~Child~~ Minor in need of ~~mental health~~ treatment" means a child in need of mental health or substance abuse treatment as defined by the Inpatient Mental Health and Substance Abuse Treatment of ~~Children~~ Minors Act;

6. "Child with a disability" means any child who has a physical or mental impairment which substantially limits one or more of the major life activities of the child, or who is regarded as having such an impairment by a competent medical professional;

7. "Child-placing agency" means a private agency licensed to place children in foster family homes, group homes, adoptive homes, transitional or independent living programs, or family child care homes or other out-of-home placements; and which approves and monitors such placements and facilities in accordance with the licensing requirements established by the Oklahoma Child Care Facilities Licensing Act;

8. "Chronic abuse or chronic neglect of a child" means a pattern of physical or sexual abuse or neglect which is repeated or continuing;

9. "Community-based services" or "community-based programs" means services or programs which maintain community participation or supervision in their planning, operation, and evaluation. Community-based services and programs may include, but are not limited to, emergency shelter, crisis intervention, group work, case supervision, job placement, recruitment and training of volunteers, consultation, medical, educational, home-based services, vocational, social, preventive and psychological guidance, training, counseling, early intervention and diversionary substance abuse treatment, sexual abuse treatment, transitional living, independent living, and other related services and programs;

10. "Court-appointed special advocate" or "CASA" means a responsible adult who has been trained and is supervised by a court-appointed special advocate program recognized by the court, and who

has volunteered to be available for appointment by the court to serve as an officer of the court as a guardian ad litem, pursuant to the provisions of Section 7003-3.7 of this title, to represent the best interests of any deprived child or child alleged to be deprived over whom the district court exercises jurisdiction, until discharged by the court;

11. "Court-appointed special advocate program" means an organized program, administered by either an independent, not-for-profit corporation, a dependent project of an independent, not-for-profit corporation or a unit of local government, which recruits, screens, trains, assigns, supervises and supports volunteers to be available for appointment by the court as guardians ad litem, to represent the best interests of a deprived child or a child alleged to be deprived in a case for which a deprived petition has been filed;

12. "Day treatment" means a nonresidential program which provides intensive services to a child who resides in the child's own home, the home of a relative, group home, a foster home or residential child care facility. Day treatment programs include, but are not limited to, educational services;

13. "Department" means the Department of Human Services;

14. "Deprived child" means a child:

- a. who is for any reason destitute, homeless, or abandoned,
- b. who does not have the proper parental care or guardianship or whose home is an unfit place for the child by reason of neglect, abuse, cruelty, or depravity on the part of the child's parents, legal guardian, or other person responsible for the child's health or welfare,
- c. who is a child in need of special care and treatment because of the child's physical or mental condition, and the child's parents, legal guardian, or other custodian is unable or willfully fails to provide such special care and treatment. As used in this paragraph, a child in need of special care and treatment includes, but is not limited to, a child who at birth tests positive for alcohol or a controlled dangerous substance and who, pursuant to a drug or alcohol screen of the child and an assessment of the parent, is determined to be at risk for future exposure to such substances,
- d. who is a child with a disability deprived of the nutrition necessary to sustain life or of the medical treatment necessary to remedy or relieve a life-threatening medical condition in order to cause or allow the death of the child if such nutrition or medical treatment is generally provided to similarly situated children without a disability or children with disabilities; provided that no medical treatment shall be necessary if, in the reasonable medical



judgment of the attending physician, such treatment would be futile in saving the life of the child,

- e. who is, due to improper parental care and guardianship, absent from school as specified in Section 10-106 of Title 70 of the Oklahoma Statutes, if the child is subject to compulsory school attendance, or
- f. whose parent, legal guardian or custodian for good cause desires to be relieved of custody.

Nothing in the Oklahoma Children's Code shall be construed to mean a child is deprived for the sole reason the parent, legal guardian, or person having custody or control of a child, in good faith, selects and depends upon spiritual means alone through prayer, in accordance with the tenets and practice of a recognized church or religious denomination, for the treatment or cure of disease or remedial care of such child.

Nothing contained in this paragraph shall prevent a court from immediately assuming custody of a child and ordering whatever action may be necessary, including medical treatment, to protect the child's health or welfare.

The phrase "dependent and neglected" shall be deemed to mean deprived;

15. "Dispositional hearing" means a hearing to determine the order of disposition which should be made with respect to a child adjudged to be a ward of the court;

16. "Emergency custody" means the custody of a child prior to adjudication of the child following issuance of an order of the district court pursuant to Section 7003-2.1 of this title or following issuance of an order of the district court pursuant to an emergency custody hearing, as specified by Section 7003-2.4 of this title;

17. "Facility" means a place, an institution, a building or part thereof, a set of buildings, or an area whether or not enclosing a building or set of buildings used for the lawful custody and treatment of children;

18. "Foster care" or "foster care services" means continuous twenty-four-hour care and supportive services provided for a child in foster placement including, but not limited to, the care, supervision, guidance, and rearing of a foster child by the foster parent;

19. "Foster child" means a child placed in foster placement;

20. "Foster family" means all persons living in a foster family home, other than a foster child;

21. "Foster family home" means the private residence of a foster family which provides foster care services to a child. Such term shall include a nonkinship foster family home, a specialized foster home, a therapeutic foster family home, or the home of a relative or other kinship care home;

22. "Foster parent" means any individual maintaining a foster family home, who is responsible for the care, supervision, guidance and rearing of and other foster care services provided to a foster child;

23. "Foster placement" means a child-placing agency or foster family home providing foster care services;

24. "Guardian ad litem" means a person appointed by the court to protect the best interests of a child pursuant to the provisions of Section 7003-3.7 of this title in a particular case before the court;

25. "Group home" means a residential facility housing no more than twelve children with a program which emphasizes family-style living in a homelike environment. Such group home may also offer a program within the community to meet the specialized treatment needs of its residents;

26. "Independent living program" means a program specifically designed to assist a child to enhance those skills and abilities necessary for successful adult living. An independent living program may include, but shall not be limited to, such features as minimal direct staff supervision, and the provision of supportive services to assist children with activities necessary for finding an appropriate place of residence, completing an education or vocational training, obtaining employment, or obtaining other similar services;

27. "Institution" means a residential facility offering care and treatment for more than twenty residents;

28. "Investigation" means an approach utilized by the Department to respond to reports of alleged child abuse or neglect which, according to priority guidelines established by the Department, constitute a serious and immediate threat to a child's health or safety. An investigation includes, but is not limited to, the following elements:

- a. an evaluation of the child's safety,
- b. a determination whether or not child abuse or neglect occurred, and
- c. a determination regarding the family's need for prevention and intervention-related services;

29. "Kinship care" means full-time care of a child by a kinship relation;

30. "Kinship guardianship" means a judicially created relationship between a child and a kinship relation of the child established pursuant to the provisions of Section 7003-5.5 of this title;

31. "Kinship relation" or "kinship relationship" means relatives, stepparents, or other responsible adults who have a bond or tie with a child and/or to whom has been ascribed a family relationship role with the child's parents or the child;

32. "Mental health facility" means a mental health or substance abuse treatment facility as defined by the Inpatient Mental Health and Substance Abuse Treatment of ~~Children~~ Minors Act;

33. "Multidisciplinary child abuse team" means any team established pursuant to Section 7110 of this title of three or more persons who are trained in the prevention, identification, investigation, prosecution and treatment of physical and sexual child abuse and who are qualified to facilitate a broad range of prevention and intervention-related services and services related to child abuse;

34. "Near death" means a child is in serious or critical condition, as certified by a physician, as a result of abuse or neglect;

35. "Neglect" means neglect as such term is defined by the Oklahoma Child Abuse Reporting and Prevention Act;

36. "Out-of-home placement" means a placement, other than a placement in the home of the parent, legal guardian or custodian from whose custody the court has removed the child;

37. "Permanency hearing" means a hearing by the court to determine whether a child is to be returned to the child's home or whether other permanent placement will be sought within a specific time frame for the child;

38. "Permanent custody" means a court-ordered custody of an adjudicated deprived child whose parent's parental rights have been terminated;

39. "Person responsible for a child's health, safety or welfare" includes a parent; a legal guardian; custodian; a foster parent; a person eighteen (18) years of age or older with whom the child's parent cohabitates or any other adult residing in the home of the child; an agent or employee of a public or private residential home, institution, facility or day treatment program as defined in Section 175.20 of this title; or an owner, operator, or employee of a child care facility as defined by Section 402 of this title;

40. "Protective custody" means custody of a child taken pursuant to Section 7003-2.1 of this title;

41. "Putative father" means the father of a child:

- a. born out of wedlock, or
- b. whose mother was married to another person at the time of the birth of such child or within ten (10) months prior to the birth of the child.

The term "putative father" includes, but is not limited to:

- (1) a man who has acknowledged or claims paternity of the child,

- (2) a man named as the father by the mother of the child, or
- (3) any man alleged to have engaged in sexual intercourse with the mother during a possible time of conception;

42. "Relative" means a grandparent, great-grandparent, brother or sister of whole or half blood, aunt, uncle or any other person related to the child within the third degree of consanguinity;

43. "Residential child care center" means a twenty-four-hours-a-day residential group care facility at which a specified number of children, normally unrelated, reside with adults other than their parents;

44. "Reasonable efforts" means the reasonable exercise of diligence and care, with regard to a child who is in out-of-home placement, or who is at imminent risk of being harmed, to:

- a. refer to, arrange for, or develop reasonable supportive and rehabilitative services for the family of such child that are required both to prevent unnecessary placement of the child outside of the child's home and to foster, whenever appropriate, the safe reunification of such child with the child's family, or
- b. place a child who cannot be returned home into a permanent placement;

45. a. "Residual parental rights and responsibilities" means those rights and responsibilities that remain with the parent:

- (1) after transfer of legal custody of the child, other than in connection with an action for termination of parental rights, a relinquishment of parental rights, a consent to termination of parental rights or an adoption, or
- (2) when a guardianship or kinship guardianship is established for the child.

b. Residual parental rights and responsibilities may be limited or restricted as determined by the court, and include, but are not limited to:

- (1) the right of visitation,
- (2) the right to consent to adoption,
- (3) the responsibility for support of and costs of medical care for the child,
- (4) the right to determine the religious faith of the child, and

- (5) the right to consent to termination of parental rights and the right to permanently relinquish parental rights;

46. "Responsible adult" for purposes of the release of a child from protective custody, means a stepparent, foster parent, a relative of the child who is eighteen (18) years of age or older, or any person having an obligation and authority to care for or safeguard the child in another person's absence who is eighteen (18) years of age or older;

47. "Secure facility" means a facility which is designed and operated to ensure that all entrances and exits from the facility are subject to the exclusive control of the staff of the facility, whether or not the juvenile being detained has freedom of movement within the perimeter of the facility, or a facility which relies on locked rooms and buildings, fences, or physical restraint in order to control behavior of its residents;

48. "Serious bodily injury" means a bodily injury that involves:

- a. substantial risk of death,
- b. extreme physical pain,
- c. protracted and obvious disfigurement, or
- d. protracted loss or impairment of the function of a bodily member, organ or mental faculty;

49. "Serious danger to the health and safety" means that without the intervention of another person or agency, a child would likely or in all probability sustain severe or permanent disability or injury, illness, or death;

50. "Sibling" means a biologically or legally related brother or sister of a child;

51. "Specialized foster care" means foster care provided to a child in a specialized foster home or agency-contracted home which:

- a. has been certified by the Developmental Disabilities Services Division of the Department of Human Services,
- b. is monitored by the Division, and
- c. is funded through the Home- and Community-Based Waiver Services Program administered by the Division;

52. "Temporary custody" means court-ordered custody of an adjudicated deprived child;

53. "Therapeutic foster family home" means a foster family home which provides specific treatment services, pursuant to a therapeutic foster care contract, which are designed to remedy social and behavioral problems of a foster child residing in the home;

54. "Torture" means to inflict:

- a. intense emotional or psychological anguish to or suffering by a child, or
- b. physical pain for the purpose of coercing or terrorizing a child;

55. "Training school" means an institution maintained by the state exclusively for the care, education, training, treatment, and rehabilitation of juvenile delinquents;

56. "Transitional living program" means a residential program that may be attached to an existing facility or operated solely for the purpose of assisting children to develop the skills and abilities necessary for successful adult living. The program may include, but shall not be limited to, reduced staff supervision, vocational training, educational services, employment and employment training, and other appropriate independent living skills training as a part of the transitional living program;

57. "Treatment and service plan" means a document written pursuant to Section 7003-5.3 of this title; and

58. "Voluntary foster care placement" means the temporary placement of a child by the parent, legal guardian or custodian of the child in foster care pursuant to a signed placement agreement between the Department or a child-placing agency and the child's parent, legal guardian or custodian.

B. Unless the context otherwise requires, the terms defined in the Oklahoma Child Abuse Reporting and Prevention Act and the Oklahoma Foster Care and Out-of-Home Placement Act shall have the same meaning when used in the Oklahoma Children's Code.

SECTION 16. AMENDATORY 10 O.S. 2001, Section 7003-2.1, is amended to read as follows:

Section 7003-2.1 A. A child may be taken into protective custody prior to the filing of a petition:

1. By a peace officer or employee of the court, without a court order if the child's surroundings are such as to endanger the welfare of the child or if continuation of the child in the child's home is contrary to the health, safety or welfare of the child;

2. By an order of the district court issued upon the application of the office of the district attorney. The court shall include in the order a specific determination that continuation of the child in the child's home is contrary to the health, safety or welfare of the child. The application presented by the district attorney may be supported by a sworn affidavit which may be based upon information and belief. The application shall state facts sufficient to demonstrate to the court that there is reasonable suspicion to believe the child is in need of protection due to abandonment, abuse or neglect, or is in surroundings that are such as to endanger the welfare of the child. The application may be verbal. If verbal, a written application shall be submitted to the district court within one (1) judicial day from the issuance of the order;

3. By order of the district court when the child is in need of medical or mental health treatment in order to protect the child's health, safety or welfare and the child's parent, legal guardian, custodian or other person having custody or control of the child is unwilling or unavailable to consent to such medical or mental health treatment or other action pursuant to this article. The court shall specifically include in the order authorization for such medical or mental health treatment as it deems necessary. The court shall include in the order a specific determination that continuation of the child in the child's home is contrary to the health, safety or welfare of the child; and

4. Pursuant to the provisions of Section ~~2~~ 7115.1 of this ~~act~~ title.

B. Whenever a child is taken into protective custody:

1. Such child may be taken to a children's shelter located within the county where protective custody is assumed or, if there is no children's shelter within the county, to a children's shelter designated by the court;

2. Except as otherwise provided by subsection C of this section, such child may be taken before a judge of the district court for the purpose of obtaining an order for protective custody. The court may place the child in the custody of the Department of Human Services. The Department may place the child in a kinship foster care home, another foster home or other suitable placement that is determined by the Department to meet the needs of the child;

3. Such child may be taken directly to or retained in a health care facility for medical treatment, when it reasonably appears to the peace officer or court employee that the child is in need of emergency medical treatment to maintain the child's health, or as otherwise directed by the court; or

4. Such child may be taken directly to or retained in a mental health or substance abuse treatment facility for ~~mental health care,~~ ~~or inpatient mental health~~ evaluation or inpatient ~~mental health~~ treatment, in accordance with the provisions of the Inpatient Mental Health and Substance Abuse Treatment of ~~Children~~ Minors Act, when it reasonably appears to the peace officer or court employee that the child is in need of emergency mental health care to preserve the child's health, or as otherwise directed by the court; and

5. Except as otherwise provided by subsection C of this section, the district court of the county where the protective custody is assumed shall be immediately notified, verbally or in writing, that the child has been taken into protective custody. If notification is verbal, written notification shall be sent to the district court within one (1) judicial day of such verbal notification.

C. The court may provide, in an order issued pursuant to this section or by a standing order or rule, for the disposition of children taken into protective custody and notification of the protective custody. Such order or rule shall be consistent with the provisions of subsection B of this section, but may also:

1. Designate a licensed child care facility other than a children's shelter appropriate for the temporary care of deprived children if such facility is willing to provide care;

2. Authorize the release of a child from protective custody in accord with such criteria as the court specifies or the placement of a child with such responsible persons as the court may designate and who are willing to provide care for the child pending further proceedings; and

3. Require such notice to the court concerning the assumption of protective custody and the disposition of children taken into protective custody as the court may direct.

D. No child taken into protective custody pursuant to this section shall be confined in any jail, adult lockup, or adult or juvenile detention facility. No child shall be transported or detained in a secure facility in association with delinquent, criminal, vicious, or dissolute persons.

SECTION 17. AMENDATORY 10 O.S. 2001, Section 7003-3.1, is amended to read as follows:

Section 7003-3.1 A. 1. A petition in a deprived child proceeding may be filed by the district attorney to determine if further action is necessary. The proceeding shall be entitled "In the matter of \_\_\_\_\_, an alleged deprived child".

2. The petition shall be verified and may be upon information and belief. The petition shall set forth:

- a. with particularity, facts which bring the child within the purview of this article,
- b. the name, age and residence of the child,
- c. the names and residences of the child's parents,
- d. the name and residence of the child's legal guardian, if there is one,
- e. the name and residence of the person or persons having custody or control of the child,
- f. the name and residence of the nearest known relative, if no parent, legal guardian or custodian of the child can be found, and
- g. the relief requested and an endorsement of witnesses intended to be called by the petitioner.

3. If a termination of parental rights is desired, it must be stated in the petition and summons, and if an order for the payment of funds for the care and maintenance of the child is desired, it must be stated in the petition and summons.

4. If any of the facts herein required are not known by the petitioner, the petition shall so state, along with the reasons why such facts are not known to petitioner.



B. 1. A petition for termination of parental rights may be filed by the district attorney or the child's attorney.

2. A petition for termination of parental rights shall be filed by the district attorney for those petitions required to be filed pursuant to the provisions of Section ~~15~~ 7003-4.7 of this ~~act~~ title.

3. If the child's attorney files a petition for the termination of the parental rights of the parents of the child, the district attorney shall join in the petition or motion for those petitions or motions required to be filed by the district attorney pursuant to the provisions of Section ~~15~~ 7003-4.7 of this ~~act~~ title.

C. A petition alleging a child to be a ~~child~~ minor in need of treatment shall be filed by a district attorney pursuant to the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act.

D. A copy of the petition in a deprived child proceeding shall be attached to and delivered with the summons.

E. 1. Any petition filed by the district attorney shall be signed by the district attorney or authorized assistant.

2. A petition for termination of parental rights filed by the child's attorney shall be signed by the child's attorney and the district attorney if joined as a party to the petition pursuant to the provisions of subsection B of this section.

SECTION 18. AMENDATORY 10 O.S. 2001, Section 7003-5.3, is amended to read as follows:

Section 7003-5.3 A. An individual treatment and service plan shall be filed with the court within thirty (30) days after a child has been adjudicated to be deprived.

B. The plan shall be filed by the Department of Human Services or the agency responsible for the supervision of the case, or by the Department or the agency or licensed child-placing agency having custody of the child if the child has been removed from the custody of its lawful parent or parents.

C. The treatment and service plan shall be based upon a comprehensive assessment and evaluation of the child and family. The plan shall be:

1. Developed with the participation or input of the parent, legal guardian, or custodian of the child, the child's attorney and the guardian ad litem of the child, if any, and, if appropriate, the child;

2. Individualized and specific to each child and the child's family. The plan shall contain specific time frames;

3. Written in simple and clear English. If English is not the principal language of the child's parent, legal guardian, or custodian, and such person is unable to read or comprehend the English language, to the extent possible the plan shall be written in such person's principal language;

4. Subject to modification based on changing circumstances consistent with the correction of the conditions that led to the adjudication of the child; and

5. Reasonable, accurate, and in compliance with the requirements of other court orders.

D. The individual treatment and service plan shall include, but not be limited to:

1. A history of the child and family, including identification of the problems leading to the deprived child adjudication. The statement of the conditions leading to the adjudication shall include a statement of the methods to be used to correct those conditions or to achieve permanent placement of the child;

2. Identification of the specific services to be provided to the child, including, but not limited to, educational, vocational educational, medical, drug or alcohol abuse treatment, or counseling or other treatment services, and identification of the services to be provided to the parent, legal guardian, custodian, stepparent, other adult person living in the home or other family members, to remediate or alleviate the conditions that led to the adjudication, including services needed to assist the family to provide safe and proper care of the child or to prevent further harm to the child;

3. A schedule of the frequency of services or treatment and the means by which delivery of the services or treatment will be assured or, as necessary, the proposed means by which support services or other assistance will be provided to enable the parent or the child to obtain the services or treatment;

4. The name of the social worker assigned to the case;

5. If the child is placed outside the home:

- a. the services to be provided during and after any such placement,
- b. the reasons for such placement and a statement as to the unavailability or inappropriateness of local placement, or other good cause, for any placement more than forty (40) miles from the home of the child,
- c. the services to be provided to the child to ensure safe and proper care while in such placement and the projected date of discharge,
- d. the services necessary to assist the child to reintegrate with the child's family or other community-based placement and a description of acts by and conduct that is expected of the parent or parents, legal guardian, custodian, or stepparent or other adult person living in the home that would alleviate the conditions that resulted in the removal of the child before the child can be returned to a safe home,
- e. if the child is sixteen (16) years of age or older, the services necessary to make the transition from

foster care or other community placement to independent living,

- f. a description of the type of safe and proper placement in which the child is to be placed,
- g. a description of the initial support obligation to the child, as determined by the court,
- h. a description of any visitation rights and obligations of the parent or parents, legal guardian, or custodian during the period the child is in care, and
- i. a discussion of the safety and appropriateness of the child's placement, which placement is intended to be in the least restrictive and most family-like setting available, consistent with the best interests and special needs of the child and in as close proximity as possible to the child's home;

6. Performance criteria that will measure the progress of the child and family toward completion of the treatment and service plan including, but not limited to, time frames for achieving objectives and addressing the identified problems;

7. A projected date for the completion of the treatment and service plan;

8. The name and business address of the attorney representing the child;

9. The permanency goal for the child and the reason for selection of that goal; and

- 10. a. In the case of a child with respect to whom the permanency plan is adoption or placement in other permanent placement, documentation of the steps the Department is taking to:
  - (1) find an adoptive family or other permanent living arrangement for the child,
  - (2) place the child with an adoptive family, a fit and willing kinship relation, a legal guardian, kinship guardian, or in another planned permanent living arrangement, and
  - (3) finalize the adoption or guardianship, kinship guardianship or other permanent placement.
- b. Such documentation shall include, at a minimum, child-specific recruitment efforts such as the use of state, regional and national adoption exchanges, including electronic exchange systems.

E. Each treatment plan shall specifically provide for the safety of the child, in accordance with state and federal law, and clearly define what actions or precautions will, or may, be necessary to provide for the safety and protection of the child.

F. The individual treatment and service plan shall include the following statement:

TO THE PARENT: THIS IS A VERY IMPORTANT DOCUMENT. ITS PURPOSE IS TO HELP YOU PROVIDE YOUR CHILD WITH A SAFE HOME WITHIN THE REASONABLE PERIOD SPECIFIED IN THE PLAN. IF YOU ARE UNWILLING OR UNABLE TO PROVIDE YOUR CHILD WITH A SAFE HOME, YOUR PARENTAL AND CUSTODIAL DUTIES AND RIGHTS MAY BE RESTRICTED OR TERMINATED OR YOUR CHILD MAY NOT BE RETURNED TO YOU.

G. Whenever a child who is subject to the provisions of this section is committed for inpatient mental health or substance abuse treatment pursuant to the Inpatient Mental Health and Substance Abuse Treatment of ~~Children~~ Minors Act, the individual treatment and service plan shall be amended as necessary and appropriate, including, but not limited to, identification of the treatment and services to be provided to the child and the child's family upon discharge of the child from inpatient mental health or substance abuse treatment.

H. In addition to the information required pursuant to subsection A of this section, when a child, who at birth tested positive for alcohol or a controlled dangerous substance and who was determined to be at risk for future exposure to such substances, has been removed from the home, the Department of Human Services, subject to court approval:

1. May require, as part of the treatment and service plan, that the mother of such child complete a treatment program approved by the Alcohol and Drug Abuse Prevention, Training, Treatment and Rehabilitation Authority prior to the return of the child to a safe home;

2. May require, as part of the treatment and service plan, that the father of the child, legal guardian, custodian, stepparent or other adult person living in the home who is an alcohol-dependent or a drug-dependent person, as such terms are defined by Section 3-403 of Title 43A of the Oklahoma Statutes, and whose conduct has contributed to the dependency of such child or mother on alcohol or drugs, or to the conditions which caused the child to be adjudicated deprived, complete a treatment program approved by the Alcohol and Drug Abuse Prevention, Training, Treatment and Rehabilitation Authority prior to the return of the child to the safe home; and

3. May require testing for substance abuse of the mother, father, legal guardian, custodian, stepparent or other adult person living in the home, on a monthly basis for a twelve-month period following completion of the substance abuse program and after return of the child to a safe home. A positive test of any such person shall be presented to the Department of Human Services and the district attorney.

I. Testing ordered by the court pursuant to subsection H of this section shall be admissible only for the purposes of deprived child and custody proceedings.

J. The services delineated in the individual treatment and service plan shall be designed to improve the conditions in the family home and aid in maintaining the child in a safe home, to facilitate the return of the child to the family home, or to

facilitate the permanent placement of the child. The plan shall focus on clearly defined objectives and shall provide the most efficient path to quick reunification or permanent placement. To the extent possible, the plan shall contain outcome based evaluation criteria that measure success in the reunification or permanent placement process.

K. In the event that the parent or parents are unwilling to participate in the development or implementation of the individual treatment and service plan, the Department shall document such unwillingness in writing to the parent or parents and shall file the document with the court.

L. The parents, any foster parents of the child, the child's attorney and the guardian ad litem of the child, if any, shall be each provided a copy of the treatment and service plan approved by the court.

SECTION 19. AMENDATORY 10 O.S. 2001, Section 7003-7.1, is amended to read as follows:

Section 7003-7.1 A. 1. Whenever the court transfers custody of a child as provided in this article, the person, institution, agency, or department receiving custody shall have the right to, and shall be responsible for, the care and control of the child, and shall have the duty and authority to provide food, clothing, shelter, medical care, education, and discipline for the child.

2. The court shall complete a form approved by the Oklahoma Supreme Court to verify information that has been considered prior to the custody transfer.

B. 1. Except for an emergency psychiatric admission pursuant to the Inpatient Mental Health and Substance Abuse Treatment of ~~Children~~ Minors Act, such person, institution, agency or department may provide or arrange for the provision of an inpatient ~~mental health~~ evaluation or inpatient ~~mental health~~ treatment of such ~~child~~ minor only pursuant to a court order as provided by the Inpatient Mental Health and Substance Abuse Treatment of ~~Children~~ Minors Act. Nothing in this subsection shall be interpreted to prohibit or preclude the provision of outpatient ~~mental health~~ services, including an outpatient ~~mental health~~ examination, counseling, educational, rehabilitative or other similar services to such ~~child~~ minor, as necessary and appropriate, in the absence of a specific court order for such services.

2. The medical care, surgery and extraordinary care shall be charged to the appropriate agency where the child qualifies for the care under law, rule or administrative order or decision.

3. Nothing in this subsection shall be interpreted to:

- a. relieve a parent of the obligation to provide for the support of the child as otherwise provided by law, or
- b. limit the authority of the court to order a parent to make support payments or to make payments or reimbursements for medical care or treatment, including mental health care or treatment, to the

person, institution, agency or department having custody of the child, or

- c. abrogate the right of the child to any benefits provided through public funds for which the child is otherwise eligible.

4. No person, agency or institution shall be liable in a civil suit for damages for authorizing or not authorizing surgery or extraordinary care in instances where an emergency exists, as determined by competent medical authority.

C. 1. If the child is placed in the custody of the Department of Human Services, whether in emergency, temporary or permanent custody, the Department shall determine the appropriate placement of the child. However, under no circumstances may the Department of Human Services return a child to a parent that contributed to the child being deprived due to abuse or neglect, without prior approval of the court. Any change in the placement of a child adjudicated to be deprived shall be in accord with the provisions of subsection B of Section 7003-5.4a of this title.

2. The person, institution, agency, or Department having legal custody of a child pursuant to an order of the court shall receive notice of court proceedings regarding the child and shall be allowed to intervene upon application as a party to all court proceedings pertaining to the care and custody of the child including, but not limited to: adjudication, disposition, review of disposition, termination of parental rights and proceedings pursuant to the Inpatient Mental Health and Substance Abuse Treatment of Children ~~Minors~~ Act.

SECTION 20. AMENDATORY 10 O.S. 2001, Section 7004-3.2, is amended to read as follows:

Section 7004-3.2 A. The Commission for Human Services shall promulgate written rules, outline policies and procedures governing the operation of those facilities operated with the Department of Human Services wherein children may be housed. Said policies and procedures shall include, but not be limited to, standards of cleanliness, temperature and lighting, availability of medical and dental care, provision of food, furnishings, clothing and toilet articles, supervision, appropriate and permissible use of restriction and confinement, procedures for enforcing rules of conduct consistent with due process of law and visitation privileges.

B. The policies prescribed shall, at a minimum, ensure that:

1. A child shall not be punished by physical force, deprivation of nutritious meals, deprivation of family visits or solitary confinement;

2. A child shall have the opportunity to participate in physical exercise each day;

3. A child shall be allowed daily access to showers and his own clothing or individualized clothing which is clean;

4. A child shall have constant access to writing materials and may send mail without limitation, censorship or prior reading, and may receive mail without prior reading, except that mail may be opened in the presence of the child, without being read, to inspect for contraband;

5. A child shall have reasonable opportunity to communicate and to visit with his family on a regular basis, and to communicate with persons in the community;

6. A child shall have immediate access to medical care as needed, and shall receive necessary psychological and psychiatric services;

7. A child in the custody or care of the Department shall be provided access to education including teaching, educational materials and books, provided, that such policies shall provide emphasis upon basic literacy skills, including but not limited to curricula requirements stressing reading, writing, mathematics, science, vocational-technical education, and other courses of instruction designed to assure that such children will be capable of being assimilated into society as productive adults capable of self-support and full participation;

8. A child shall have reasonable access to an attorney upon request;

9. A child shall be afforded a grievance procedure, including an appeal procedure; and

10. A child's mental health needs and mental well-being will be met, protected and served through provision of guidance, counseling and treatment programs, staffed by competent, professionally qualified persons, serving under the supervision of qualified mental health professionals as such term is defined by the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act.

C. Any contract or agreement entered into by the Department of Human Services for the residential care and treatment of children in the custody of the Department of Human Services shall provide that the contractor shall comply with the provisions of subsections A and B of this section and the provisions of this part.

SECTION 21. AMENDATORY 10 O.S. 2001, Section 7302-5.2, is amended to read as follows:

Section 7302-5.2 A. Whenever a child who has been adjudicated by the court as a child in need of supervision has been committed to the Department of Juvenile Justice, the Department may place the child in the home of the child, the home of a relative of the child, foster home, group home, transitional living program, independent living program, community-based setting, rehabilitative facility or child care facility under the operation of or licensure of the state, or in a state school for the mentally retarded if eligible for admission thereto. No child in need of supervision shall be placed in a Department-operated institution, other than a rehabilitative facility.

B. The Department of Juvenile Justice may establish and maintain one or more rehabilitative facilities to be used

exclusively for the custody of children in need of supervision. Each such facility shall be, primarily, a nonsecure facility having as its primary purpose the rehabilitation of children adjudicated to be in need of supervision. Such facility shall have a bed capacity for no more than twenty children, and shall minimize the institutional atmosphere and prepare the child for reintegration into the community. Provided however, that such facility may be designed and operated as a secure facility used exclusively for children in need of supervision whom the court has specifically found to be so unmanageable, ungovernable and antisocial that no other reasonable alternative exists for treatment or restraint other than placement in such a secure facility. Such facility shall not rely on locked rooms, fences, or physical restraints.

C. A child in need of supervision who has been found by a court to be a ~~child~~ minor in need of ~~mental health~~ treatment shall be placed as provided by Section 7303-8.4 of this title and the Inpatient Mental Health and Substance Abuse Treatment of ~~Children~~ Minors Act.

SECTION 22. AMENDATORY 10 O.S. 2001, Section 7302-5.3, is amended to read as follows:

Section 7302-5.3 A. It is the intent of the Legislature of this state to provide for the creation of all reasonable means and methods that can be established by a state for:

1. The prevention of delinquency;
2. The care and rehabilitation of delinquent children; and
3. The protection of the public.

It is further the intent of the Legislature that this state, through the Department of Juvenile Justice, establish, maintain and continuously refine and develop a balanced and comprehensive state program for children who are potentially delinquent or are delinquent.

B. Except as provided in subsection C of this section, whenever a child who has been adjudicated by the court as a delinquent child has been committed to the Department of Juvenile Justice, the Department shall provide for placement pursuant to any option authorized by paragraphs 1 through 7 of this subsection; provided, nothing in this subsection shall be construed to establish a priority in regard to the selection of an option or to mandate the exclusive use of one particular option:

1. Place the child in a state training school or other institution or facility maintained by the state for delinquent children if the child has:
  - a. exhibited seriously violent, aggressive or assaultive behavior,
  - b. committed a serious felony constituting violent, aggressive and assaultive behavior,
  - c. habitually committed delinquent acts if such acts would constitute felonies if committed by an adult,



- d. committed multiple serious delinquent acts, or
- e. violated any condition of probation or parole,

to the extent that it is necessary for the protection of the public. For purposes of placement, all deferred prosecutions for serious, habitual, violent, aggressive or assaultive crimes shall count toward placement decisions;

2. Place the child in a facility maintained by the state for children, or in a foster home, group home, transitional living program or community residential center;

3. Allow the child his liberty, under supervision, in an independent living program;

4. Allow the child his liberty, under supervision, either immediately or after a period in one of the facilities referred to in paragraphs 1 and 2 of this subsection;

5. Place the child in a state school for mentally retarded, if the child is eligible for admission thereto;

6. Place the child in any licensed private facility deemed by the Department of Juvenile Justice to be in the best interest of the child; or

7. Place the child as provided by Section 7303-8.4 of this title and the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act, if the delinquent child has been found by a court to be in need of mental health or substance abuse treatment.

C. The Department shall place priority on the placement of delinquent youth held in secure juvenile detention facilities.

D. Placement of a juvenile pursuant to this section or any other provision of law shall be the responsibility of the Department of Juvenile Justice and shall occur as soon as reasonably possible after adjudication and after the selected placement option becomes available.

The court shall not have authority to require specific placement of a juvenile in a time frame which would require the removal of any other juvenile from such placement.

SECTION 23. AMENDATORY 10 O.S. 2001, Section 7302-6.1, is amended to read as follows:

Section 7302-6.1 A. In addition to the other powers and duties prescribed by law, the Department of Juvenile Justice shall have the following duties and powers with regard to juveniles placed in Department-operated institutions and facilities:

1. Provide for the care, education, training, treatment and rehabilitation of juveniles who are placed in the institutions and facilities. The Department shall provide for a uniform system of assessment of the reading ability of each juvenile upon initial placement in a Department-operated institution or facility. The assessment shall include, but not be limited to, the following skills:

- a. the level of word decoding skills of the juvenile,
- b. the level of vocabulary and spelling ability of the juvenile, and
- c. the comprehension level of the juvenile.

The Department may give assistance to local school districts in providing an education to such juveniles, may supplement such education, and may provide facilities for such purposes. It shall be the duty of the Department to assure that juveniles in the aforesaid institutions and facilities receive educational services which provide each juvenile with a balanced and comprehensive reading program, which includes as its primary and foundational components:

- (1) an organized, systematic, explicit skills program that may include phonics, word recognition strategies and other word decoding skills to address the needs of the individual juvenile as determined by the entry level needs assessment,
- (2) a strong language arts and comprehension program that includes a balance of oral and written language, an ongoing individualized evaluation and diagnosis that informs the teacher and an assessment that assures accountability, and
- (3) writing, mathematics, science and vocational-technical education;

2. Transfer from a juvenile institution to another facility under the jurisdiction of the Department, a juvenile who has been adjudicated delinquent, if the Department believes it advisable to do so; transfer from a facility for juveniles in need of supervision to another such facility, a juvenile who has been adjudicated in need of supervision, provided that such transfer is consistent with the treatment needs of the juvenile; transfer from a juvenile institution or facility to a state school for the mentally retarded, any juvenile eligible for admission thereto, if the juvenile appears to be in need of the care and treatment provided at such school; transfer from a facility for delinquent or in need of supervision juveniles to an appropriate facility or to the Department of Mental Health and Substance Abuse Services any juvenile found by the court to be a juvenile minor in need of ~~mental health~~ treatment pursuant to the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act and committed to inpatient mental health or substance abuse treatment as provided by the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act. If a transfer is made pursuant to this paragraph, the Department shall comply with the notification requirements of Section 7303-5.4 of this title;

3. Release on parole a juvenile previously adjudicated to be delinquent, subject to terms and conditions specified by the Department, whenever the Department determines that such release will not be detrimental to society and that the juvenile is ready to be returned to the community and revoke said parole for violation of the specified terms or conditions of parole pursuant to the provisions of this section and the rules and procedures established by the Department for such revocation;

4. Release any juvenile from a juvenile institution for placement in a group home, transitional living program, independent living program, other community-based facility or program or out-of-home care subject to terms and conditions specified by the Department; and

5. Provide parole services for juveniles released on parole from juvenile institutions, and aftercare services for juveniles discharged from juvenile institutions or facilities. Persons designated as Juvenile Parole Officers by the Department shall have the power to serve process and to apprehend and detain juveniles and make arrests in accordance with the laws of the state.

B. The transfer of a juvenile from a nonsecure placement to a secure placement shall be subject to an administrative transfer hearing and any revocation of parole shall be subject to a parole revocation hearing.

1. In any administrative transfer or parole revocation proceeding, the following minimum standards shall apply:

- a. the juvenile shall have the right to notice of the proposed transfer or parole revocation hearing and the alleged violation of administrative or parole rules on which the proposed transfer or parole revocation is based,
- b. the juvenile shall have the right to representation by an attorney,
- c. the juvenile shall have the right to present evidence on behalf of the juvenile, and
- d. the juvenile shall have a right to bail, except that said right to bail shall not be construed to require that a juvenile who is in residence in a Department-operated institution or other facility at the time of an alleged violation leading to an administrative transfer proceeding be released from such institution or facility.

2. The situs of said hearings shall be the county in which the alleged violation of administrative or parole rules occurs. The judge having juvenile docket jurisdiction in said county shall aid the administrative transfer or parole revocation process of the Department by:

- a. determining eligibility for and amount of bail;
- b. deciding any intermediate custody or placement issue; and
- c. if legal counsel for the juvenile has not otherwise been obtained, appointing legal counsel for the juvenile and fixing the amount of compensation for the legal counsel. Said judge shall also determine if the juvenile is eligible for free legal services. If the juvenile is not eligible for free legal services, the court shall order the parents or legal guardian of the juvenile to pay for such services.

3. If legal counsel for the juvenile has not otherwise been obtained, the appointment of legal counsel for the juvenile, the setting of the amount of compensation for such counsel, and the determination of whether or not the juvenile is eligible for free legal services shall be provided for pursuant to the Indigent Defense Act; provided, however, in those counties subject to the provisions of Section 138.1 of Title 19 of the Oklahoma Statutes, the legal services shall be provided by the county indigent defender as provided by law. If the juvenile is not eligible for free legal services, the court shall order the parents or legal guardian of the juvenile to pay for such services.

C. The Department may participate in federal programs relating to delinquent juveniles, or juveniles in need of supervision, or institutions and services for such juveniles and apply for, receive, use and administer federal funds for such purposes.

D. The Department shall receive interest earnings on the investment by the State Treasurer of monies, to be credited to an agency special account, for the benefit of and held in trust for persons placed in the custody of the Department or in residence at institutions or facilities maintained by the Department.

SECTION 24. AMENDATORY 10 O.S. 2001, Section 7303-1.1, is amended to read as follows:

Section 7303-1.1 A. A child may be taken into custody prior to the filing of a petition alleging that the child is delinquent or in need of supervision:

1. By a peace officer, without a court order for any criminal offense for which the officer is authorized to arrest an adult without a warrant, or if the child is willfully and voluntarily absent from the home of the child without the consent of the parent, legal guardian, legal custodian or other person having custody and control of the child for a substantial length of time or without intent to return, or if the child's surroundings are such as to endanger the welfare of the child;

2. By an employee of the court without a court order, if the child is willfully and voluntarily absent from the home of the child without the consent of the parent, legal guardian, legal custodian or other person having custody and control of the child for a substantial length of time or without intent to return, or if the child's surroundings are such as to endanger the welfare of the child;

3. Pursuant to an order of the district court issued on the application of the office of the district attorney. The application presented by the district attorney shall be supported by a sworn affidavit which may be based upon information and belief. The application shall state facts sufficient to demonstrate to the court that there is probable cause to believe the child has committed a crime or is in violation of the terms of probation, parole or order of the court;

4. By order of the district court pursuant to subsection E of this section when the child is in need of medical or mental health treatment or other action in order to protect the child's health or welfare and the parent, legal guardian, legal custodian or other

person having custody or control of the child is unwilling or unavailable to consent to such medical or mental health treatment or other action; and

5. Pursuant to an emergency ex parte or a final protective order of the district court issued pursuant to the Protection from Domestic Abuse Act.

Any child referred to in this subsection shall not be considered to be in the custody of the Office of Juvenile Affairs.

B. Whenever a child is taken into custody as a delinquent child or a child in need of supervision pursuant to subsection A of this section, the child shall be detained, held temporarily in the custodial care of a peace officer or other person employed by a police department, or be released to the custody of the child's parent, legal guardian, legal custodian, attorney or other responsible adult, upon the written promise of such person to bring the child to the court at the time fixed if a petition is to be filed and to assume responsibility for costs for damages caused by the child if the child commits any delinquent acts after being released regardless of whether or not a petition is to be filed. It shall be a misdemeanor for any person to sign the written promise and then fail to comply with the terms of the promise. Any person convicted of violating the terms of the written promise shall be subject to imprisonment in the county jail for not more than six (6) months or a fine of not more than Five Hundred Dollars (\$500.00) or both such fine and imprisonment. In addition, if a parent, legal guardian, legal custodian, attorney or other responsible adult is notified that the child has been taken into custody, it shall be a misdemeanor for such person to refuse to assume custody of the child within a timely manner. If detained, the child shall be taken immediately before a judge of the district court in the county in which the child is sought to be detained, or to the place of detention or shelter designated by the court. If no judge be available locally, the person having the child in custody shall immediately report the detention of the child to the presiding judge of the judicial administrative district, provided that the child shall not be detained in custody beyond the next judicial day or for good cause shown due to problems of arranging for and transporting the child to and from a secure juvenile detention center, beyond the next two (2) judicial days unless the court shall so order after a detention hearing to determine if there exists probable cause to detain the child. The child shall be present at the detention hearing or the image of the child may be broadcast to the judge by closed-circuit television or any other electronic means that provides for a two-way communication of image and sound between the child and the judge. If the latter judge cannot be reached, such detention shall be reported immediately to any judge regularly serving within the judicial administrative district. If detained, a reasonable bond for release shall be set. Pending further disposition of the case, a child whose custody has been assumed by the court may be released to the custody of a parent, legal guardian, legal custodian, or other responsible adult or to any other person appointed by the court, or be detained pursuant to Article IV of the Oklahoma Juvenile Code in such place as shall be designated by the court, subject to further order.

C. When any child is taken into custody pursuant to this title and it reasonably appears to the peace officer, employee of the

court or person acting pursuant to court order that the child is in need of medical treatment to preserve the health of the child, any peace officer, any employee of the court or person acting pursuant to court order shall have the authority to authorize medical examination and medical treatment for any child found to be in need of medical treatment as diagnosed by a competent medical authority in the absence of the child's parent, legal guardian, legal custodian, or other person having custody and control of the child who is competent to authorize medical treatment. The officer or the employee of the court or person acting pursuant to court order shall authorize said medical treatment only after exercising due diligence to locate the child's parent, legal guardian, legal custodian, or other person legally competent to authorize said medical treatment. The child's parent, legal guardian, legal custodian, or other person having custody and control shall be responsible for such medical expenses as ordered by the court. No peace officer, any employee of the court or person acting pursuant to court order authorizing such treatment in accordance with the provisions of this section for any child found in need of such medical treatment shall have any liability, civil or criminal, for giving such authorization.

D. A child who has been taken into custody as otherwise provided by this Code who appears to be a ~~child~~ minor in need of ~~mental health~~ treatment may be admitted to a mental health or substance abuse treatment facility on an emergency ~~psychiatric~~ basis or for an inpatient ~~mental health~~ evaluation or ~~inpatient mental health~~ for treatment only in accordance with the provisions of the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act. The child's parent, legal guardian, legal custodian, or other person having custody and control shall be responsible for such mental health expenses as ordered by the court. No peace officer, any employee of the court or person acting pursuant to court order authorizing such treatment in accordance with the provisions of this section for any child found in need of such mental health evaluation or treatment shall have any liability, civil or criminal, for giving such authorization.

E. 1. A child may be taken into custody pursuant to an order of the court specifying that the child is in need of medical treatment or other action to protect the child's health or welfare and the parent, legal guardian, legal custodian, or other responsible adult having custody or control of a child is unwilling or unavailable to consent to such medical treatment or other action.

2. If the child is in need of immediate medical treatment or other action to protect the child's health or welfare, the court may issue an emergency ex parte order upon application of the district attorney of the county in which the child is located. The application for an ex parte order may be verbal or in writing and shall be supported by facts sufficient to demonstrate to the court that there is reasonable cause to believe that the child is in need of immediate medical treatment or other action to protect the child's health or welfare. The emergency ex parte order shall be in effect until a full hearing is conducted. A copy of the application, notice for full hearing and a copy of any ex parte order issued by the court shall be served upon such parent, legal guardian, legal custodian, or other responsible adult having custody or control of the child. Within twenty-four (24) hours of the filing of the application the court shall schedule a full hearing on

the application, regardless of whether an emergency ex parte order had been issued or denied.

3. Except as otherwise provided by paragraph 2 of this section, whenever a child is in need of medical treatment to protect the child's health or welfare, or whenever any other action is necessary to protect the child's health or welfare, and the child's parent, legal guardian, legal custodian, or other person having custody or control of the child is unwilling or unavailable to consent to such medical treatment or other action, the court, upon application of the district attorney of the county in which the child is located, shall hold a full hearing within five (5) days of filing the application. Notice of the hearing and a copy of the application shall be served upon the parent, legal guardian, legal custodian, or other person having custody or control of the child.

4. At any hearing held pursuant to this subsection, the court may grant any order or require such medical treatment or other action as is necessary to protect the health or welfare of the child.

5. a. The parent, legal guardian, legal custodian, or other person having custody or control of the child shall be responsible for such medical expenses as ordered by the court.
- b. No peace officer, any employee of the court or person acting pursuant to court order authorizing such treatment in accordance with the provisions of this subsection for any child found in need of such medical treatment shall have any liability, civil or criminal.

SECTION 25. AMENDATORY 10 O.S. 2001, Section 7303-1.3, is amended to read as follows:

Section 7303-1.3 A. The court may provide by rule who shall make a preliminary inquiry to determine whether the interests of the public or of the child who is within the purview of the Oklahoma Juvenile Code require that further court action be taken. Provided, that where intake is to be provided by the Department of Juvenile Justice under contract with the Supreme Court, or under the provision of rules issued by the Supreme Court, the preliminary inquiry shall follow the uniform contractual procedures as agreed to by the Supreme Court and the Department. If it is determined by the preliminary inquiry that no further action be taken and if agreed to by the district attorney, said person or the court may make such informal adjustment as is practicable without a petition.

B. A petition in a juvenile proceeding may be filed by the district attorney to determine if further action is necessary. The proceeding shall be entitled "In the matter of \_\_\_\_\_, an alleged (delinquent) or (a child alleged to be in need of supervision)".

The petition shall be verified and may be upon information and belief. It shall set forth:

1. With particularity facts which bring the child within the purview of the Oklahoma Juvenile Code;

2. The name, age and residence of the child;
3. The names and residences of the parents of the child;
4. The name and residence of the legal guardian of the child, if applicable;
5. The name and residence of the person or persons having custody or control of the child;
6. The name and residence of the nearest known relative, if no parent or guardian can be found;
7. The relief requested; and
8. The specific federal law, state law or municipal ordinance under which the child is charged, and an endorsement of witnesses intended to be called by the petitioner, where the child is sought to be adjudged a delinquent child.

If a termination of parental rights is desired, it must be stated in the petition and summons, and if an order for the payment of funds for the care and maintenance of the child is desired, it must be stated in the petition and summons. If any of the facts herein required are not known by the petitioner, the petition shall so state, along with the reasons why said facts are not known to petitioner.

C. A petition alleging a child to be a ~~child~~ minor in need of treatment shall be filed by a district attorney pursuant to the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act.

D. A copy of the petition shall be attached to and delivered with the summons.

E. A district attorney may defer filing a petition alleging a child to be delinquent or in need of supervision for a period of ninety (90) days if the child participates in a teen court program or a first-time offender program, as defined in Section 7303-4.6 of this title. If the child successfully completes the program, the district attorney shall not file the petition. The records of a case for which a petition is not filed shall be subject to the provisions of Article VII of the Oklahoma Juvenile Code.

SECTION 26. AMENDATORY 10 O.S. 2001, Section 7303-1.7, is amended to read as follows:

Section 7303-1.7 A. After a petition under the provisions of this article has been filed, the court may order the child to be examined and evaluated by a physician or other appropriate professional to aid the court in making the proper disposition concerning the child. The court may order a mental health evaluation of a child as provided by the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act.

B. Whenever a child concerning whom a petition has been filed appears to be in need of nursing, medical or surgical care, the court may order the parent or other person responsible for the care and support of the child to provide such care in a hospital or



otherwise. If the parent or other person fails to provide such care, the court may, after due notice, enter an order therefor, and the expense thereof, when approved by the court, shall be a charge upon the county, but the court may adjudge that the person having the duty under the law to support the child pay part or all of the expenses of such care. In an emergency the court may, when health or condition of the child may require it, cause the child to be placed in a public hospital or institution for treatment or special care, or in a private hospital or institution which will receive the child for like purpose, and consent to emergency treatment or surgery.

C. After adjudication and at the request of a judge in any juvenile proceeding, the Department of Juvenile Justice shall investigate the home conditions and environment of the child and the financial ability, occupation and earning capacity of the parent, legal guardian or custodian of the child. Upon request by the court of another state, the Department may conduct a similar investigation.

SECTION 27. AMENDATORY 10 O.S. 2001, Section 7303-5.2, is amended to read as follows:

Section 7303-5.2 A. An individual treatment and service plan shall be filed with the court within the thirty (30) days after any child has been adjudicated to be delinquent or in need of supervision. Said plan shall be filed by the person, department or agency responsible for the supervision of the case or by the legal custodian if the child has been removed from the custody of its lawful parent or parents. The treatment and service plan shall be based on a comprehensive assessment and evaluation of the child and family and include but not be limited to:

1. A history of the child and family, including identification of the problems leading to the adjudication;

2. Identification of the specific services available to the child to remediate or alleviate the conditions that led to the adjudication, including but not limited to educational, vocational-educational, medical, drug or alcohol abuse treatment or counseling or other treatment services;

3. Identification of the services to be provided to the parent, legal guardian, legal custodian, stepparent, other adult person living in the home or other family members, to remediate or alleviate the conditions that led to the adjudication, including services needed to assist the family to provide proper care and supervision of the child;

4. Performance criteria that will measure the progress of the child and family toward completion of the treatment and service plan;

5. A projected date for the completion of the treatment and service plan; and

6. The name and business address of the attorney representing the child, if any.

B. The individual treatment and service plan shall be amended as necessary and appropriate to reflect the disposition of the court. The amended plan shall be filed with the court within thirty (30) days of the order of disposition removing the child from the home and shall state:

1. The reasons for such placement and a statement as to the unavailability or inappropriateness of local placement, or other good cause, for any placement more than forty (40) miles from the home of the child;

2. The services to be provided to the child while in such placement and the projected date of discharge;

3. The services necessary to assist the child to reintegrate with the family of the child or other community-based placement; and

4. If the child is age sixteen (16) or older, the services necessary to make the transition from community placement to independent living.

C. Whenever a child who is subject to the provisions of this section is committed for inpatient mental health or substance abuse treatment pursuant to the Inpatient Mental Health and Substance Abuse Treatment of ~~Children~~ Minors Act, the individual treatment and service plan shall be amended as necessary and appropriate, including but not limited to identification of the treatment and services to be provided to the child and his family upon discharge of the child from inpatient mental health or substance abuse treatment.

SECTION 28. AMENDATORY 10 O.S. 2001, Section 7303-8.1, is amended to read as follows:

Section 7303-8.1 A. 1. Whenever the court transfers custody of a child as provided in this article, the person, institution, agency, or department receiving custody shall have the right to, and shall be responsible for, the care and control of the child, and shall have the duty and authority to provide food, clothing, shelter, medical care, education, and discipline for the child, and to authorize and consent to medical care for the child provided by a qualified health care professional. Except for an emergency psychiatric admission pursuant to the Inpatient Mental Health and Substance Abuse Treatment of ~~Children~~ Minors Act, said person, institution, agency or department may provide or arrange for the provision of an inpatient ~~mental health~~ evaluation or inpatient ~~mental health~~ treatment of such ~~child~~ minor only pursuant to a court order as provided by the Inpatient Mental Health and Substance Abuse Treatment of ~~Children~~ Minors Act. Nothing in this subsection shall be interpreted to prohibit or preclude the provision of outpatient ~~mental health~~ services, including an outpatient ~~mental health~~ examination, counseling, educational, rehabilitative or other similar services to said ~~child~~ minor, as necessary and appropriate, in the absence of a specific court order for such services.

2. The medical care, surgery and extraordinary care shall be charged to the appropriate agency where the child qualifies for the care under law, rule or administrative order or decision.

3. Nothing in this subsection shall be interpreted to:

- a. relieve a parent of the obligation to provide for the support of the child as otherwise provided by law, or
- b. limit the authority of the court to order a parent to make support payments or to make payments or reimbursements for medical care or treatment, including mental health care or treatment, to the person, institution, agency or Department having custody of the child, or
- c. abrogate the right of the child to any benefits provided through public funds for which the child is otherwise eligible.

4. No person, agency or institution shall be liable in a civil suit for damages for authorizing or not authorizing surgery or extraordinary care in an emergency, as determined by competent medical authority. No state employee shall be liable for the costs of any medical care or mental health services provided to any child in the custody of the Office of Juvenile Affairs.

B. The person, institution, agency, or department having legal custody of a child pursuant to an order of the court shall receive notice of court proceedings regarding the child as provided in Sections 7303-2.1 and 7303-5.1 of this title and shall be allowed to intervene upon application as a party to all court proceedings pertaining to the care and custody of the child including, but not limited to: adjudication, disposition, review of disposition, termination of parental rights and proceedings pursuant to the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act.

SECTION 29. AMENDATORY 10 O.S. 2001, Section 7303-8.4, is amended to read as follows:

Section 7303-8.4 A. The Department of Juvenile Justice may provide for the care of a child who is in the custody of the Office of Juvenile Affairs and found by a court to be a child minor in need of ~~mental health~~ treatment pursuant to the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act:

1. In the home of the child, the home of a relative of the child, a foster home, a group home, a transitional living program, an independent living program or in any other community-based child care facility determined by the Department to be appropriate for the care of the child, or as otherwise provided by the Oklahoma Juvenile Code, and shall provide for the outpatient care and treatment of the child; or

2. The Department shall place a child who has been committed by a court for inpatient mental health or substance abuse treatment as provided by the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act in a Department-operated treatment center or ~~other appropriate~~ a public or private ~~mental health~~ facility as determined by the Department. The Department may place such child with the Department of Mental Health and Substance Abuse Services upon the consent of the Commissioner of Mental Health and Substance Abuse Services or his designee. The Department shall establish a system for the regular review by a qualified mental health professional, at intervals of not more than thirty (30) days,

of the case of each child in need of treatment in the custody of the Department and receiving inpatient care and treatment to determine whether or not continued inpatient treatment is required and appropriate for the child. When such child no longer requires inpatient care and treatment in a mental health treatment facility, the Department shall place the child as provided in paragraph 1 of this subsection.

B. In providing for the outpatient mental health care and the treatment of children in its custody, the Department of Juvenile Justice shall utilize to the maximum extent possible and appropriate the services available through:

1. The guidance centers operated by the State Department of Health; and

2. The Department of Mental Health and Substance Abuse Services;

3. The Department of Human Services; and

4. Community-based private agencies and organizations.

SECTION 30. AMENDATORY 10 O.S. 2001, Section 7303-8.5, is amended to read as follows:

Section 7303-8.5 A. The Office of Juvenile Affairs and the Department of Mental Health and Substance Abuse Services, no later than September 1, 1995, shall jointly:

1. Establish procedures which shall ensure that children placed in the custody of the Office of Juvenile Affairs or its Department of Juvenile Justice shall have adequate and appropriate access to mental health services, including but not limited to inpatient services in accordance with the provisions of the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act, emergency services, group homes, and day treatment services, provided through the Oklahoma Youth Center and to other appropriate facilities and programs operated by or available through the Department of Mental Health and Substance Abuse Services; and

2. Establish administrative procedures for the timely and expeditious resolution of any dispute which may arise over the placement of a child in a facility or program operated by the Department of Mental Health and Substance Abuse Services. Such procedures shall, at a minimum, provide:

a. for a person designated by each agency to serve as its representative for the purpose of resolving any dispute which may arise over the placement of a child in an inpatient treatment facility operated by the Department of Mental Health and Substance Abuse Services, and

b. that whenever there is no resolution of a dispute over the placement of a child in an inpatient facility operated by the Department of Mental Health and Substance Abuse Services within three (3) working days after the initial request of the Office of Juvenile Affairs or the Department of Juvenile Justice for the

consent of the Department of Mental Health and Substance Abuse Services for the placement of a child in a Department of Mental Health and Substance Abuse Services inpatient facility, an arbitrator provided for in subsection B of this section will be notified, and the matter will be immediately submitted for arbitration and that the decision of the arbitrator shall be a final decision, and

- c. an opportunity for the child whose placement is in dispute to be represented at any arbitration proceedings regarding his placement.

B. No later than September 1, 1995, the Office of Juvenile Affairs and the Department of Mental Health and Substance Abuse Services shall jointly select an individual to serve as arbitrator and an individual to serve as an alternate in case the arbitrator is unavailable. Any person selected to serve as an arbitrator or alternate arbitrator shall:

- 1. Be a person qualified to make a decision regarding the placement of a child found by a court to be a child in need of mental health treatment;

- 2. Agree to make his services immediately available upon notification of a dispute to be resolved; and

- 3. Agree to provide a decision within no more than one (1) week after notification of a dispute over the placement of a child.

C. If for any reason the Department of Juvenile Justice and the Department of Mental Health and Substance Abuse Services are unable to jointly agree upon a person to serve as arbitrator by September 1, 1995, the Commission on Children and Youth shall select said person at its next regularly scheduled monthly meeting.

D. Nothing in the Oklahoma Juvenile Code shall be construed as prohibiting the Department of Mental Health and Substance Abuse Services from admitting a child, upon the voluntary application for admission by the parent or legal guardian of the child and the recommendation of a qualified mental health professional for such admission, to a facility or program operated by the Department of Mental Health and Substance Abuse Services appropriate for the care and treatment of the child.

SECTION 31. AMENDATORY 10 O.S. 2001, Section 7304-1.1, is amended to read as follows:

Section 7304-1.1 A. When a child is taken into custody pursuant to the provisions of the Oklahoma Juvenile Code, the child shall be detained only if it is necessary to assure the appearance of the child in court or for the protection of the child or the public.

- 1. a. No pre-adjudicatory or predisposition detention or custody order shall remain in force and effect for more than thirty (30) days. The court, for good and sufficient cause shown, may extend the effective period of such an order for an additional period not to exceed sixty (60) days. If the child is being

detained for the commission of a murder, the court may, if it is in the best interests of justice, extend the effective period of such an order an additional sixty (60) days.

- b. Whenever the court orders a child to be held in a juvenile detention facility, an order for secure detention shall remain in force and effect for not more than ten (10) days after such order. Upon an application of the district attorney and after a hearing on such application, the court, for good and sufficient cause shown, may extend the effective period of such an order for an additional period not to exceed ten (10) days after such hearing. The total period of pre-adjudicatory or predisposition shall not exceed the ninety-day limitation as specified in subparagraph a of this paragraph. The child shall be present at the hearing on the application for extension unless, as authorized and approved by the court, the attorney for the child is present at the hearing and the child is available to participate in the hearing via telephone conference communication. For the purpose of this paragraph, "telephone conference communication" means use of a telephone device that allows all parties, including the child, to hear and be heard by the other parties at the hearing. After the hearing, the court may order continued detention in a juvenile detention center, may order the child detained in an alternative to secure detention or may order the release of the child from detention.

2. No child alleged or adjudicated to be deprived or in need of supervision or who is or appears to be a ~~child~~ minor in need of ~~mental health~~ treatment as defined by the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act, shall be confined in any jail, adult lockup, or adult detention facility. No child shall be transported or detained in association with criminal, vicious, or dissolute persons.

3. Except as otherwise authorized by this section a child who has been taken into custody as a deprived child, a child in need of supervision, or who appears to be a ~~child~~ minor in need of ~~mental health~~ treatment, may not be placed in any detention facility pending court proceedings, but must be placed in shelter care or foster care or, with regard to a child who appears to be a ~~child~~ minor in need of ~~mental health~~ treatment, a mental health or substance abuse treatment facility in accordance with the provisions of the Inpatient Mental Health and Substance Abuse Treatment of Children Minors Act, or released to the custody of his parents or some other responsible party. When a child is taken into custody as a child in need of supervision as a result of being a runaway, the court may order the child placed in a juvenile detention facility pending court proceedings if it finds said detention to be essential for the safety of the child.

B. No child shall be placed in secure detention unless:

1. The child is an escapee from any delinquent placement;

2. The child is a fugitive from another jurisdiction with a warrant on a delinquency charge or confirmation of delinquency charges by the home jurisdiction;

3. The child is seriously assaultive or destructive towards others or himself;

4. The child is detained for the commission of a crime that would constitute a serious act as defined by Section 7302-9.2 of this title;

5. The child is detained for the commission of a crime that would constitute a habitual criminal act as defined by Section 7302-9.2 of this title;

6. The child is currently charged with a felony act as defined by Section 7302-9.2 of this title or misdemeanor and:

- a. is on probation or parole on a prior delinquent offense,
- b. is on pre-adjudicatory community supervision,
- c. is currently on release status on a prior delinquent offense, or
- d. has willfully failed or there is reason to believe that the child will willfully fail to appear for juvenile court proceedings.

C. A child who has violated a court order and has had the order revoked or modified pursuant to Section 7303-5.3 of this title may be placed into an Office of Juvenile Affairs-designated sanction detention bed or an Office of Juvenile Affairs-approved sanction program.

D. A child shall be detained in secure detention only in accordance with the guidelines adopted pursuant to Section 7302-9.3 of this title.

E. 1. Except as otherwise provided in this section, no child shall be placed in secure detention in a jail, adult lockup, or other adult detention facility unless:

- a. the child is detained for the commission of a crime that would constitute a felony if committed by an adult, and
- b. the child is awaiting an initial court appearance, and
- c. the child's initial court appearance is scheduled within twenty-four (24) hours after being taken into custody, excluding weekends and holidays, and
- d. the court of jurisdiction is outside of the Standard Metropolitan Statistical Area as defined by the Bureau of Census, and
- e. there is no existing acceptable alternative placement for the child, and

f. the jail, adult lockup or adult detention facility meets the requirements for licensure of juvenile detention facilities, as adopted by the Office of Juvenile Affairs, is appropriately licensed, and provides sight and sound separation for juveniles, which includes:

- (1) total separation between juveniles and adult facility spatial areas such that there could be no haphazard or accidental contact between juvenile and adult residents in the respective facilities,
- (2) total separation in all juvenile and adult program activities within the facilities, including recreation, education, counseling, health care, dining, sleeping and general living activities, and
- (3) separate juvenile and adult staff, specifically direct care staff such as recreation, education and counseling.

Specialized services staff, such as cooks, bookkeepers, and medical professionals who are not normally in contact with detainees or whose infrequent contacts occur under conditions of separation of juvenile and adults can serve both.

2. Nothing in this section shall preclude a child who is detained for the commission of a crime that would constitute a felony if committed by an adult, or a child who is an escapee from a juvenile training school or from a Department of Juvenile Justice group home from being held in any jail certified by the State Department of Health, police station or similar law enforcement offices for up to six (6) hours for purposes of identification, processing or arranging for transfer to a secure detention or alternative to secure detention. Such holding shall be limited to the absolute minimum time necessary to complete these actions.

- a. The time limitations for holding a child in a jail for the purposes of identification, processing or arranging transfer established by this section shall not include the actual travel time required for transporting a child from a jail to a juvenile detention facility or alternative to secure detention.
- b. Whenever the time limitations established by this subsection are exceeded, this circumstance shall not constitute a defense in a subsequent delinquency or criminal proceeding.

3. Nothing in this section shall preclude detaining in a county jail or other adult detention facility an eighteen-year old charged in a juvenile petition for whom certification to stand trial as an adult is prayed.

4. Nothing in this section shall preclude detaining in a county jail or other adult detention facility a person provided for in Section 7304-1.2 of this title if written or electronically



transmitted confirmation is received from the state seeking return of the individual that the person is a person provided for in Section 7304-1.2 of this title and if, during the time of detention, the person is detained in a facility meeting the requirements of 7304-1.3 of this title.

5. Nothing in this section shall preclude detaining a person, whose age is not immediately ascertainable and who is being detained for the commission of a felony, in a jail certified by the State Department of Health, a police station or similar law enforcement office for up to twenty-four (24) hours for the purpose of determining whether or not the person is a child, if:

- a. there is a reasonable belief that the person is eighteen (18) years of age or older,
- b. there is a reasonable belief that a felony has been committed by the person,
- c. a court order for such detention is obtained from a judge of the district court within six (6) hours of initially detaining the person,
- d. there is no juvenile detention facility that has space available for the person and that is within thirty (30) miles of the jail, police station, or law enforcement office in which the person is to be detained, and
- e. during the time of detention the person is detained in a facility meeting the requirements of subparagraph f of paragraph 1 of this subsection.

The time limitation provided for in this paragraph shall include the time the person is detained prior to the issuance of the court order.

The time limitation provided for in this paragraph shall not include the actual travel time required for transporting the person to the jail, police station, or similar law enforcement office. If the time limitation established by this paragraph is exceeded, this circumstance shall not constitute a defense in any subsequent delinquency or criminal proceeding.

F. Nothing contained in this section shall in any way reduce or eliminate a county's liability as otherwise provided by law for injury or damages resulting from the placement of a child in a jail, adult lockup, or other adult detention facility.

G. Any juvenile detention facility shall be available for use by any eligible Indian child as that term is defined by the Oklahoma Indian Child Welfare Act, providing that the use of the juvenile detention facility meets the requirements of the Oklahoma Juvenile Code. The Indian tribe may contract with any juvenile detention facility for the providing of detention services.

H. Each member of the staff of a juvenile detention facility shall satisfactorily complete a training program provided or approved by the Department of Juvenile Justice.

SECTION 32. AMENDATORY 28 O.S. 2001, Section 162, is amended to read as follows:

Section 162. A. The clerks of the courts shall collect as costs in every juvenile delinquency, child in need of supervision, or deprived case in which the juvenile is adjudicated, irrespective of whether or not the sentence is deferred, or ~~child~~ minor in need of ~~mental health~~ treatment case pursuant to the Inpatient Mental Health and Substance Abuse Treatment of ~~Children~~ Minors Act, Section 5-501 et seq. of Title 43A of the Oklahoma Statutes, irrespective of whether the child is committed for inpatient mental health or substance abuse treatment, or in every such case in which a petition is filed at the demand of the parents of a juvenile and said petition is subsequently dismissed prior to adjudication at said parents' request, the following flat charge and no more, except for the charges provided for in this section, which fee shall cover docketing of the case, filing of all papers, issuance of process, warrants and orders, and other services to date of judgment:

For each case where one or more juveniles are adjudicated deprived..... \$50.00

For each juvenile who is certified to stand trial as an adult..... \$75.00

In each juvenile case wherein parental rights are terminated..... \$50.00

For each juvenile adjudicated in need of supervision..... \$50.00

For each child found to be a ~~child~~ minor in need of ~~mental health~~ treatment..... \$50.00

For each juvenile adjudicated for an offense which would be a misdemeanor if committed by an adult, including violation of any traffic law, whether charged individually or conjointly with others..... \$50.00

For each juvenile adjudicated for an offense which would be a felony if committed by an adult, whether charged individually or conjointly with others..... \$75.00

For the services of a court reporter at each trial held in the case..... \$20.00

When a jury is requested.....\$30.00

A sheriff's fee for serving or endeavoring to serve all writs, warrants, orders, process, commands, or notices or pursuing any fugitive from justice..... \$20.00 or

mileage as established  
by Oklahoma Statutes,  
whichever is greater.

B. Such costs shall be levied against the juvenile, the parent, or both, but shall not be levied against the legal guardian or any state or private agency having custody of any juvenile subject to such proceedings.

C. Prior to adjudication, parties in juvenile delinquency, child in need of supervision, ~~child~~ minor in need of treatment, and deprived cases shall not be required to pay, advance, or post security for the issuance or service of process to obtain compulsory attendance of witnesses. These fees shall be deposited into the court fund, except the sheriff's fee, when collected, shall be transferred to the general fund of the county in which service is made or attempted to be made.

D. The clerk of the district court shall charge the sum of One Hundred Dollars (\$100.00) for preparing, assembling, indexing, and transmitting the record for appellate review. This fee shall be paid by the party taking the appeal and shall be entered as costs in the action. If more than one party to the action shall prosecute an appeal from the same judgment or order, the fee shall be paid by the party whose petition in error is determined by the district court or by the appellate court to commence the principal appeal. The fees collected hereunder shall be paid into the court fund.

E. Fees and costs collected in juvenile cases may be withdrawn from the court fund and used for operations of the juvenile bureaus, in counties wherein a statutory juvenile bureau is in operation, upon approval by the Chief Justice of the Oklahoma Supreme Court.

F. In those seventy-four counties in which court services are provided by contract between the Oklahoma Supreme Court and the Department of Human Services, funds received from court costs in juvenile cases may be withdrawn from the court fund and paid to the Department of Human Services upon approval by the Chief Justice of the Oklahoma Supreme Court. Said funds are to be expended by the Department of Human Services to supplement community-based programs, such as youth services programs, day treatment programs and group home services. Specific annual training of Department workers in community-based services providing the above court-related services is also to be included for expenditure of funds received from court costs in juvenile cases by the Department of Human Services.

G. In those seventy-four counties in which court services are provided by contract between the Oklahoma Supreme Court and the Office of Juvenile Affairs, funds received from court costs or orders for care and maintenance in juvenile cases may be withdrawn from the court fund and paid to the Office of Juvenile Affairs upon approval by the Chief Justice of the Oklahoma Supreme Court. Said funds are to be expended by the Office of Juvenile Affairs to provide care and maintenance and to supplement community-based programs, such as alternative education, juvenile offender community and victim restitution work programs, community sanction programs, youth services programs, day treatment programs, group home services, and detention services. Specific annual training of agency workers in community-based services providing the above court-related services is also to be included for expenditure of funds received from court costs in juvenile cases by the Office of Juvenile Affairs.

SECTION 33. AMENDATORY 43A O.S. 2001, Section 12-104, is amended to read as follows:

Section 12-104. A. There is hereby created until January 1, 2005, a Youth Suicide Prevention Council. The Council shall assist with the implementation of the Youth Suicide Prevention Act.

B. The Youth Suicide Prevention Council shall be composed of twenty-one (21) members as follows:

1. One member of the Oklahoma House of Representatives appointed by the Speaker of the House of Representatives;

2. One member of the Oklahoma State Senate appointed by the President Pro Tempore of the Senate;

3. Two representatives of the Department of Mental Health and Substance Abuse Services appointed by the Commissioner of Mental Health and Substance Abuse Services;

4. Two representatives of the State Department of Health appointed by the State Commissioner of Health;

5. One representative of the State Department of Education appointed by the State Superintendent of Public Instruction;

6. One representative of the Office of Juvenile Affairs appointed by the Director of the Office of Juvenile Affairs;

7. One representative of the Oklahoma Commission on Children and Youth appointed by the Director of the Oklahoma Commission on Children and Youth;

8. Two survivors of attempted youth suicide or other youth who have had experience with attempted suicide or suicide, one each appointed by the President Pro Tempore of the Senate and the Speaker of the House of Representatives;

9. Two survivors of suicide, including, but not limited to, parents or other family members of youths who committed suicide, to be appointed by the President Pro Tempore of the Senate;

10. One teacher and one school counselor each to be appointed by the Speaker of the House of Representatives;

11. Two licensed mental health professionals who work in the area of suicide prevention, appointed by the Governor;

12. One child psychiatrist who is licensed pursuant to the laws of this state appointed by the President Pro Tempore of the Senate; and

13. Three members of the clergy, one each appointed by the President Pro Tempore of the Senate, the Speaker of the House of Representatives and the Governor.

C. The Commissioner of Mental Health and Substance Abuse Services, or a designee, shall convene the initial meeting of the Council, at which time the Council shall elect a chair and vice-chair from among its membership. Staff assistance to the Council shall be provided by the Department of Mental Health and Substance Abuse Services and the State Department of Health. Members of the Council shall receive no compensation for their service on the Council but shall be reimbursed by the appointing authority for travel expenses incurred in the performance of their duties pursuant to the State Travel Reimbursement Act.

D. Upon four consecutive absences of a Council member, the position shall be considered vacant. The chair may notify the appointing authority of the vacancy and request that another individual be appointed to fill the position.

E. The responsibilities of the Council shall include, but not be limited to, the following:

1. Collaborate with community partnership boards established pursuant to Section 601.11 of Title 10 of the Oklahoma Statutes and other community-level planning bodies to assist in the development and coordination of local resources and building community capacity to address the issue of youth suicide;

2. Provide technical assistance to schools and communities with respect to the best practices in the identification and treatment of children, youth and young adults at risk for committing suicide;

3. Identify and promote strategies to prevent suicide among children, youth and young adults; and

4. Promote public awareness of the problem of youth suicide and the efforts being made in Oklahoma to reduce morbidity and mortality associated with suicide.

~~E.~~ F. The Council shall submit a report to the Governor, the Speaker of the House of Representatives, the President Pro Tempore of the Senate, the Commissioner of Mental Health and Substance Abuse Services and the State Commissioner of Health no later than December 1 of each year. The report shall provide an update of activities and progress in implementing the provisions of the Youth Suicide Prevention Act, and offer policy and legislative recommendations.

SECTION 34. This act shall become effective July 1, 2002.

SECTION 35. It being immediately necessary for the preservation of the public peace, health and safety, an emergency is hereby declared to exist, by reason whereof this act shall take effect and be in full force from and after its passage and approval.

Passed the House of Representatives the 20th day of May, 2002.

---

Presiding Officer of the House of  
Representatives

Passed the Senate the 22nd day of May, 2002.

---

Presiding Officer of the Senate