

211.671 Definitions for section -- Substance-exposed infant -- Notification -- Plan of Safe Care assessment and process.

- (1) As used in this section:
 - (a) "Department" means the Department for Community Based Services within the Cabinet for Health and Family Services;
 - (b) "Plan of Safe Care" means a safety-focused and preventive plan developed and administered by the department to address the:
 1. Health, safety, and developmental needs of a substance-exposed infant; and
 2. Treatment, recovery, and support needs of a substance-exposed infant family or caregiver;
 - (c) "Plan of Safe Care Safety Assessment Response" means a preventive child safety response plan developed and administered by the department and authorized under this section; and
 - (d) "Substance-exposed infant":
 1. Means an infant identified at birth as having been knowingly prenatally exposed to alcohol, illegal substances, or misused prescription medications, regardless of whether the infant exhibits withdrawal symptoms or receives a diagnosis of Neonatal Abstinence Syndrome or Fetal Alcohol Spectrum Disorder; and
 2. Does not mean an infant identified at birth as having been prenatally exposed to prescription medications for which the mother holds a valid and properly used prescription or medications administered to the mother under supervision of a licensed healthcare provider during childbirth.

Identification as a substance-exposed infant shall not by itself constitute abuse or neglect absent findings under KRS 600.020.
- (2) A health care provider or facility involved in the delivery or care of an infant shall notify the department when an infant is suspected to be a substance-exposed infant.
- (3) Participation in a Plan of Safe Care shall be supportive and preventive in nature. Participation may be required as reasonably necessary to ensure child safety under the department's authority but shall not alone constitute a finding of abuse or neglect.
- (4) Notwithstanding KRS 620.030, a notification involving a substance-exposed infant shall be accepted for assessment under the Plan of Safe Care Safety Assessment Response regardless of whether the notification alleges abuse or neglect.
- (5) Notification under this section shall:
 - (a) Not require a determination or allegation of abuse or neglect;
 - (b) Not be limited to infants diagnosed with Neonatal Abstinence Syndrome or Fetal Alcohol Spectrum Disorder; and
 - (c) Be made for preventive safety and service coordination purposes and not for criminal prosecution.

- (6) The department shall, when a substance-exposed infant is born in a hospital or freestanding birthing center facility:
- (a) Conduct a safety-focused assessment to determine the safety and needs of the substance-exposed infant and of any other children residing in the household;
 - (b) Attempt initial contact with the caregiver and infant prior to discharge, with consent of the caregiver or consistent with authority pursuant to KRS Chapter 620. Initial contact shall not constitute completion of the Plan of Safe Care assessment;
 - (c) Attempt post-discharge contact with the caregiver and infant if contact does not occur prior to discharge with consent of the caregiver or consistent with authority pursuant to KRS Chapter 620;
 - (d) Complete the Plan of Safe Care and the Plan of Safe Care Safety Assessment Response within a timeline established by the department;
 - (e) Document safety findings prior to case closure and verify through direct contact if the infant and other children may safely remain in the home environment; and
 - (f) Collect aggregate data regarding implementation outcomes and compliance related to requirements of the Child Abuse Prevention and Treatment Act, 42 U.S.C. sec. 5106a, and submit a report on the data by December 1, 2026, and annually thereafter to the Legislative Research Committee for referral to the Interim Joint Committees on Families and Children and Health Services.
- (7) The department may utilize public or private service providers to implement this section.

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