

1 AN ACT relating to child welfare.

2 ***Be it enacted by the General Assembly of the Commonwealth of Kentucky:***

3 ➔Section 1. KRS 199.462 is amended to read as follows:

- 4 (1) Before an applicant is approved to provide foster care or relative caregiver services  
5 to a child, ***to be*** considered a fictive kin placement for a child, or ~~approved~~ to  
6 receive a child for adoption, the Cabinet for Health and Family Services shall:
- 7 (a) Require a criminal background investigation of the applicant and any of the  
8 applicant's adult household members by means of a fingerprint check by the  
9 Department of Kentucky State Police and the Federal Bureau of Investigation;  
10 or
- 11 (b) Request from the Justice and Public Safety Cabinet records of all conviction  
12 information for the applicant and any of the applicant's adult household  
13 members. The Justice and Public Safety Cabinet shall furnish the information  
14 to the Cabinet for Health and Family Services and shall also send a copy of  
15 the information to the applicant.
- 16 (2) The request for records shall be in a manner approved by the Justice and Public  
17 Safety Cabinet, and the Justice and Public Safety Cabinet may charge a fee to be  
18 paid by the applicant for the actual cost of processing the request.
- 19 (3) The Cabinet for Health and Family Services shall not disapprove of any placement  
20 or custody arrangement, including but not limited to foster care, relative caregiver  
21 services, fictive kin placement, temporary custody, permanent custody, or adoption  
22 on the sole basis of a disability of the prospective caregiver without considering  
23 whether targeted adaptive or supportive services could enable the prospective  
24 caregiver to provide essential care and protection for the child.
- 25 (4) During a certified adoptive or foster home's annual reevaluation, the Cabinet for  
26 Health and Family Services may:
- 27 (a) Require a background investigation for each adult household member of the

1 certified adoptive or foster home under subsections (1) and (2) of this section;

2 or

3 (b) Register each adult household member of a certified adoptive or foster home  
4 under subsections (1) and (2) of this section in the rap back system.

5 (5) If a child is placed and resides in a fictive kin home for more than seventy-two (72)  
6 hours, the Cabinet for Health and Family Services shall take action, including but  
7 not limited to the following:

8 (a) Provide information on how to recognize and report child abuse or neglect;  
9 and

10 (b) Ensure that, within the first five (5) days of a child under the age of five (5)  
11 years old being placed in a fictive kin home, the fictive kin has completed a  
12 one (1) time training course of one and one-half (1.5) hours of training  
13 covering the prevention and recognition of pediatric abusive head trauma, as  
14 defined in KRS 620.020.

15 (6) **The Cabinet for Health and Family Services shall not approve an individual to**  
16 **provide foster care or relative caregiver services to a child, to be considered a**  
17 **fictive kin placement for a child, or to receive a child for adoption if the**  
18 **individual:**

19 **(a) Is a registrant as defined in KRS 17.500;**

20 **(b) Has an adult living in the individual's home who is a registrant as defined**  
21 **in KRS 17.500; or**

22 **(c) Has a minor child living in the individual's home who is a registrant as**  
23 **defined in KRS 17.500 or who has been declared a juvenile sex offender**  
24 **under KRS 635.510.**

25 **(7)** The Cabinet for Health and Family Services shall promulgate an administrative  
26 regulation **in accordance with KRS Chapter 13A** to implement this section.

27 ➔Section 2. KRS 199.801 is amended to read as follows:

- 1 (1) The department shall establish a procedure throughout the state that is designed to  
2 determine and expedite the placement of children who are in the custody of or  
3 committed to the department. The procedure shall utilize state-level and regional  
4 placement coordinators who may be state employees or employees of a contracted  
5 entity.
- 6 (2) The type of placement selected for a child in the custody of or committed to the  
7 department shall be the best alternative for the child that is in closest proximity to  
8 the child's home county, including considerations of the child's current early care  
9 and education provider or school, in order to promote educational stability for the  
10 child to the extent practicable in accordance with KRS 199.802 and the federal  
11 Every Student Succeeds Act of 2015, Pub. L. No. 114-95.
- 12 (3) If the type of placement that best suits the child's needs is not available in the child's  
13 home county, the regional placement coordinator shall document the circumstance  
14 as an unmet need and may seek a placement in surrounding counties, regions, and  
15 the state, in that order.
- 16 (4) If the type of placement that best suits the child's needs is not available within the  
17 state, the regional placement coordinator shall contact the commissioner of the  
18 department or the commissioner's designee to explore out-of-state placement.
- 19 (5) The department shall develop a diligent recruitment plan and reporting to support  
20 the recruitment and retention of family foster homes that are responsive to the needs  
21 of children in care, areas of unmet need, and strategies to meet the need. The plan  
22 and reporting shall be used as a guide in the establishment and modification of  
23 agreements with placements for the care of children in the custody of or committed  
24 to the cabinet and shall be made available upon request.
- 25 **(6) The department shall ensure that placement provisions exist to ensure that:**  
26 **(a) Safe and adequate foster care placements designed to meet the individual**  
27 **needs of all children, including in prevention, safety, ongoing, and adoptive**

1                    services are occurring; and  
2                    (b) Placements are the least restrictive, most family-like setting consistent with  
3                    the child's specific individual needs.

4                    ➔Section 3. KRS 600.020 is amended to read as follows:

5                    As used in KRS Chapters 600 to 645, unless the context otherwise requires:

- 6                    (1) "Abused or neglected child" means a child whose health or welfare is harmed or  
7                    threatened with harm when:
- 8                    (a) His or her parent, guardian, person in a position of authority or special trust,  
9                    as defined in KRS 532.045, or other person exercising custodial control or  
10                    supervision of the child:
- 11                    1. Inflicts or allows to be inflicted upon the child physical or emotional  
12                    injury as defined in this section by other than accidental means;
  - 13                    2. Creates or allows to be created a risk of physical or emotional injury as  
14                    defined in this section to the child by other than accidental means;
  - 15                    3. Engages in a pattern of conduct that renders the parent incapable of  
16                    caring for the immediate and ongoing needs of the child, including but  
17                    not limited to parental incapacity due to a substance use disorder as  
18                    defined in KRS 222.005;
  - 19                    4. Continuously or repeatedly fails or refuses to provide essential parental  
20                    care and protection for the child, considering the age of the child;
  - 21                    5. Commits or allows to be committed an act of sexual abuse, sexual  
22                    exploitation, or prostitution upon the child;
  - 23                    6. Creates or allows to be created a risk that an act of sexual abuse, sexual  
24                    exploitation, or prostitution will be committed upon the child;
  - 25                    7. Abandons or exploits the child;
  - 26                    8. Does not provide the child with adequate care, supervision, food,  
27                    clothing, shelter, and education or medical care necessary for the child's

1 well-being when financially able to do so or offered financial or other  
2 means to do so. A parent or other person exercising custodial control or  
3 supervision of the child legitimately practicing the person's religious  
4 beliefs shall not be considered a negligent parent solely because of  
5 failure to provide specified medical treatment for a child for that reason  
6 alone. This exception shall not preclude a court from ordering necessary  
7 medical services for a child;

8 9. Fails to make sufficient progress toward identified goals as set forth in  
9 the court-approved case plan to allow for the safe return of the child to  
10 the parent that results in the child remaining committed to the cabinet  
11 and remaining in foster care for fifteen (15) cumulative months out of  
12 forty-eight (48) months; or

13 10. Commits or allows female genital mutilation as defined in KRS 508.125  
14 to be committed; or

15 (b) A person twenty-one (21) years of age or older commits or allows to be  
16 committed an act of sexual abuse, sexual exploitation, or prostitution upon a  
17 child less than sixteen (16) years of age;

18 (2) "Age or developmentally appropriate" has the same meaning as in 42 U.S.C. sec.  
19 675(11);

20 (3) "Aggravated circumstances" means the existence of one (1) or more of the  
21 following conditions:

22 (a) The parent has not attempted or has not had contact with the child for a period  
23 of not less than ninety (90) days;

24 (b) The parent is incarcerated and will be unavailable to care for the child for a  
25 period of at least one (1) year from the date of the child's entry into foster care  
26 and there is no appropriate relative placement available during this period of  
27 time;

- 1 (c) The parent has sexually abused the child and has refused available treatment;
- 2 (d) The parent has been found by the cabinet to have engaged in abuse of the  
3 child that required removal from the parent's home two (2) or more times in  
4 the past two (2) years; or
- 5 (e) The parent has caused the child serious physical injury;
- 6 (4) "Beyond the control of parents" means a child who has repeatedly failed to follow  
7 the reasonable directives of his or her parents, legal guardian, or person exercising  
8 custodial control or supervision other than a state agency, which behavior results in  
9 danger to the child or others, and which behavior does not constitute behavior that  
10 would warrant the filing of a petition under KRS Chapter 645;
- 11 (5) "Beyond the control of school" means any child who has been found by the court to  
12 have repeatedly violated the lawful regulations for the government of the school as  
13 provided in KRS 158.150, and as documented in writing by the school as a part of  
14 the school's petition or as an attachment to the school's petition. The petition or  
15 attachment shall describe the student's behavior and all intervention strategies  
16 attempted by the school;
- 17 (6) "Boarding home" means a privately owned and operated home for the boarding and  
18 lodging of individuals which is approved by the Department of Juvenile Justice or  
19 the cabinet for the placement of children committed to the department or the  
20 cabinet;
- 21 (7) "Cabinet" means the Cabinet for Health and Family Services;
- 22 (8) "Certified juvenile facility staff" means individuals who meet the qualifications of,  
23 and who have completed a course of education and training in juvenile detention  
24 developed and approved by, the Department of Juvenile Justice after consultation  
25 with other appropriate state agencies;
- 26 (9) "Child" means any person who has not reached his or her eighteenth birthday,  
27 unless otherwise provided;

- 1 (10) "Child-caring facility" means any facility or group home other than a state facility,  
2 Department of Juvenile Justice contract facility or group home, or one certified by  
3 an appropriate agency as operated primarily for educational or medical purposes,  
4 providing residential care on a twenty-four (24) hour basis to children not related by  
5 blood, adoption, or marriage to the person maintaining the facility;
- 6 (11) "Child-placing agency" means any agency, other than a state agency, which  
7 supervises the placement of children in foster family homes or child-caring  
8 facilities or which places children for adoption;
- 9 (12) "Clinical treatment facility" means a facility with more than eight (8) beds  
10 designated by the Department of Juvenile Justice or the cabinet for the treatment of  
11 mentally ill children. The treatment program of such facilities shall be supervised  
12 by a qualified mental health professional;
- 13 (13) "Commitment" means an order of the court which places a child under the custodial  
14 control or supervision of the Cabinet for Health and Family Services, Department  
15 of Juvenile Justice, or another facility or agency until the child attains the age of  
16 eighteen (18) unless otherwise provided by law;
- 17 (14) "Community-based facility" means any nonsecure, homelike facility licensed,  
18 operated, or permitted to operate by the Department of Juvenile Justice or the  
19 cabinet, which is located within a reasonable proximity of the child's family and  
20 home community, which affords the child the opportunity, if a Kentucky resident,  
21 to continue family and community contact;
- 22 (15) "Complaint" means a verified statement setting forth allegations in regard to the  
23 child which contain sufficient facts for the formulation of a subsequent petition;
- 24 (16) "Court" means the juvenile session of District Court unless a statute specifies the  
25 adult session of District Court or the Circuit Court;
- 26 (17) "Court-designated worker" means that organization or individual delegated by the  
27 Administrative Office of the Courts for the purposes of placing children in

- 1 alternative placements prior to arraignment, conducting preliminary investigations,  
2 and formulating, entering into, and supervising diversion agreements and  
3 performing such other functions as authorized by law or court order;
- 4 (18) "Deadly weapon" has the same meaning as it does in KRS 500.080;
- 5 (19) "Department" means the Department for Community Based Services;
- 6 (20) "Dependent child" means any child, other than an abused or neglected child, who is  
7 under improper care, custody, control, or guardianship that is not due to an  
8 intentional act of the parent, guardian, or person exercising custodial control or  
9 supervision of the child;
- 10 (21) "Detention" means the safe and temporary custody of a juvenile who is accused of  
11 conduct subject to the jurisdiction of the court who requires a restricted or closely  
12 supervised environment for his or her own or the community's protection;
- 13 (22) "Detention hearing" means a hearing held by a judge or trial commissioner within  
14 twenty-four (24) hours, exclusive of weekends and holidays, of the start of any  
15 period of detention prior to adjudication;
- 16 (23) "Diversion agreement" means a mechanism designed to hold a child accountable  
17 for his or her behavior and, if appropriate, securing services to serve the best  
18 interests~~interest~~ of the child and to provide redress for that behavior without court  
19 action and without the creation of a formal court record;
- 20 (24) "Eligible youth" means a person who:
- 21 (a) Is or has been committed to the cabinet as dependent, neglected, or abused;
- 22 (b) Is eighteen (18) years of age to no older than twenty (20) years and six (6)  
23 months~~nineteen (19) years~~ of age; and
- 24 (c) Is requesting to extend or reinstate his or her commitment to the cabinet in  
25 order to participate in state or federal educational programs or to establish  
26 independent living arrangements;
- 27 (25) "Emergency shelter" is a group home, private residence, foster home, or similar

- 1 homelike facility which provides temporary or emergency care of children and  
2 adequate staff and services consistent with the needs of each child;
- 3 (26) "Emotional injury" means an injury to the mental or psychological capacity or  
4 emotional stability of a child as evidenced by a substantial and observable  
5 impairment in the child's ability to function within a normal range of performance  
6 and behavior with due regard to his or her age, development, culture, and  
7 environment as testified to by a qualified mental health professional;
- 8 (27) "Evidence-based practices" means policies, procedures, programs, and practices  
9 proven by scientific research to reliably produce reductions in recidivism;
- 10 (28) "Fictive kin" means an individual who is not related by birth, adoption, or marriage  
11 to a child, but who has an emotionally significant relationship with the child, or an  
12 emotionally significant relationship with a biological parent, siblings, or half-  
13 siblings of the child in the case of a child from birth to twelve (12) months of age,  
14 prior to placement;
- 15 (29) "Firearm" shall have the same meaning as in KRS 237.060 and 527.010;
- 16 (30) "Foster family home" means a private home in which children are placed for foster  
17 family care under supervision of the cabinet or a licensed child-placing agency;
- 18 (31) "Graduated sanction" means any of a continuum of accountability measures,  
19 programs, and sanctions, ranging from less restrictive to more restrictive in nature,  
20 that may include but are not limited to:
- 21 (a) Electronic monitoring;
- 22 (b) Drug and alcohol screening, testing, or monitoring;
- 23 (c) Day or evening reporting centers;
- 24 (d) Reporting requirements;
- 25 (e) Community service; and
- 26 (f) Rehabilitative interventions such as family counseling, substance abuse  
27 treatment, restorative justice programs, and behavioral or mental health

1 treatment;

2 (32) "Habitual runaway" means any child who has been found by the court to have been  
3 absent from his or her place of lawful residence without the permission of his or her  
4 custodian for at least three (3) days during a one (1) year period;

5 (33) "Habitual truant" means any child who has been found by the court to have been  
6 reported as a truant as defined in KRS 159.150(1) two (2) or more times during a  
7 one (1) year period;

8 (34) "Hospital" means, except for purposes of KRS Chapter 645, a licensed private or  
9 public facility, health care facility, or part thereof, which is approved by the cabinet  
10 to treat children;

11 (35) "Independent living" means those activities necessary to assist a committed child to  
12 establish independent living arrangements;

13 (36) "Informal adjustment" means an agreement reached among the parties, with  
14 consultation, but not the consent, of the victim of the crime or other persons  
15 specified in KRS 610.070 if the victim chooses not to or is unable to participate,  
16 after a petition has been filed, which is approved by the court, that the best  
17 interests~~interest~~ of the child would be served without formal adjudication and  
18 disposition;

19 (37) "Intentionally" means, with respect to a result or to conduct described by a statute  
20 which defines an offense, that the actor's conscious objective is to cause that result  
21 or to engage in that conduct;

22 (38) "Least restrictive alternative" means, except for purposes of KRS Chapter 645, that  
23 the program developed on the child's behalf is no more harsh, hazardous, or  
24 intrusive than necessary; or involves no restrictions on physical movements nor  
25 requirements for residential care except as reasonably necessary for the protection  
26 of the child from physical injury; or protection of the community, and is conducted  
27 at the suitable available facility closest to the child's place of residence to allow for

- 1 appropriate family engagement;
- 2 (39) "Motor vehicle offense" means any violation of the nonfelony provisions of KRS  
3 Chapters 186, 189, or 189A, KRS 177.300, 304.39-110, or 304.39-117;
- 4 (40) "Near fatality" means an injury that, as certified by a physician, places a child in  
5 serious or critical condition;
- 6 (41) "Needs of the child" means necessary food, clothing, health, shelter, and education;
- 7 (42) "Nonoffender" means a child alleged to be dependent, neglected, or abused and  
8 who has not been otherwise charged with a status or public offense;
- 9 (43) "Nonsecure facility" means a facility which provides its residents access to the  
10 surrounding community and which does not rely primarily on the use of physically  
11 restricting construction and hardware to restrict freedom;
- 12 (44) "Nonsecure setting" means a nonsecure facility or a residential home, including a  
13 child's own home, where a child may be temporarily placed pending further court  
14 action. Children before the court in a county that is served by a state operated  
15 secure detention facility, who are in the detention custody of the Department of  
16 Juvenile Justice, and who are placed in a nonsecure alternative by the Department  
17 of Juvenile Justice, shall be supervised by the Department of Juvenile Justice;
- 18 (45) "Out-of-home placement" means a placement other than in the home of a parent,  
19 relative, or guardian, in a boarding home, clinical treatment facility, community-  
20 based facility, detention facility, emergency shelter, fictive kin home, foster family  
21 home, hospital, nonsecure facility, physically secure facility, residential treatment  
22 facility, or youth alternative center;
- 23 (46) "Parent" means the biological or adoptive mother or father of a child;
- 24 (47) "Person exercising custodial control or supervision" means a person or agency that  
25 has assumed the role and responsibility of a parent or guardian for the child, but that  
26 does not necessarily have legal custody of the child;
- 27 (48) "Petition" means a verified statement, setting forth allegations in regard to the child,

1 which initiates formal court involvement in the child's case;

2 (49) "Physical injury" means substantial physical pain or any impairment of physical  
3 condition;

4 (50) "Physically secure facility" means a facility that relies primarily on the use of  
5 construction and hardware such as locks, bars, and fences to restrict freedom;

6 (51) "Public offense action" means an action, excluding contempt, brought in the interest  
7 of a child who is accused of committing an offense under KRS Chapter 527 or a  
8 public offense which, if committed by an adult, would be a crime, whether the same  
9 is a felony, misdemeanor, or violation, other than an action alleging that a child  
10 sixteen (16) years of age or older has committed a motor vehicle offense;

11 (52) "Qualified mental health professional" means:

12 (a) A physician licensed under the laws of Kentucky to practice medicine or  
13 osteopathy, or a medical officer of the government of the United States while  
14 engaged in the performance of official duties;

15 (b) A psychiatrist licensed under the laws of Kentucky to practice medicine or  
16 osteopathy, or a medical officer of the government of the United States while  
17 engaged in the practice of official duties, and who is certified or eligible to  
18 apply for certification by the American Board of Psychiatry and Neurology,  
19 Inc.;

20 (c) A psychologist with the health service provider designation, a psychological  
21 practitioner, a certified psychologist, or a psychological associate licensed  
22 under the provisions of KRS Chapter 319;

23 (d) A licensed registered nurse with a master's degree in psychiatric nursing from  
24 an accredited institution and two (2) years of clinical experience with  
25 mentally ill persons, or a licensed registered nurse with a bachelor's degree in  
26 nursing from an accredited institution who is certified as a psychiatric and  
27 mental health nurse by the American Nurses Association and who has three

- 1 (3) years of inpatient or outpatient clinical experience in psychiatric nursing  
2 and who is currently employed by a hospital or forensic psychiatric facility  
3 licensed by the Commonwealth or a psychiatric unit of a general hospital, a  
4 private agency or company engaged in providing mental health services, or a  
5 regional comprehensive care center;
- 6 (e) A licensed clinical social worker licensed under the provisions of KRS  
7 335.100, or a certified social worker licensed under the provisions of KRS  
8 335.080 with three (3) years of inpatient or outpatient clinical experience in  
9 psychiatric social work and currently employed by a hospital or forensic  
10 psychiatric facility licensed by the Commonwealth, a psychiatric unit of a  
11 general hospital, a private agency or company engaged in providing mental  
12 health services, or a regional comprehensive care center;
- 13 (f) A marriage and family therapist licensed under the provisions of KRS  
14 335.300 to 335.399 with three (3) years of inpatient or outpatient clinical  
15 experience in psychiatric mental health practice and currently employed by a  
16 hospital or forensic psychiatric facility licensed by the Commonwealth, a  
17 psychiatric unit of a general hospital, a private agency or company engaged in  
18 providing mental health services, or a regional comprehensive care center;
- 19 (g) A professional counselor credentialed under the provisions of KRS 335.500 to  
20 335.599 with three (3) years of inpatient or outpatient clinical experience in  
21 psychiatric mental health practice and currently employed by a hospital or  
22 forensic facility licensed by the Commonwealth, a psychiatric unit of a  
23 general hospital, a private agency or company engaged in providing mental  
24 health services, or a regional comprehensive care center; or
- 25 (h) A physician assistant licensed under KRS 311.840 to 311.862, who meets one  
26 (1) of the following requirements:
- 27 1. Provides documentation that he or she has completed a psychiatric

- 1                   residency program for physician assistants;
- 2           2.   Has completed at least one thousand (1,000) hours of clinical experience
- 3                   under a supervising physician, as defined by KRS 311.840, who is a
- 4                   psychiatrist and is certified or eligible for certification by the American
- 5                   Board of Psychiatry and Neurology, Inc.;
- 6           3.   Holds a master's degree from a physician assistant program accredited
- 7                   by the Accreditation Review Commission on Education for the
- 8                   Physician Assistant or its predecessor or successor agencies, is
- 9                   practicing under a supervising physician as defined by KRS 311.840,
- 10                  and:
- 11                  a.   Has two (2) years of clinical experience in the assessment,
- 12                          evaluation, and treatment of mental disorders; or
- 13                  b.   Has been employed by a hospital or forensic psychiatric facility
- 14                          licensed by the Commonwealth or a psychiatric unit of a general
- 15                          hospital or a private agency or company engaged in the provision
- 16                          of mental health services or a regional community program for
- 17                          mental health and individuals with an intellectual disability for at
- 18                          least two (2) years; or
- 19           4.   Holds a bachelor's degree, possesses a current physician assistant
- 20                   certificate issued by the board prior to July 15, 2002, is practicing under
- 21                   a supervising physician as defined by KRS 311.840, and:
- 22                  a.   Has three (3) years of clinical experience in the assessment,
- 23                          evaluation, and treatment of mental disorders; or
- 24                  b.   Has been employed by a hospital or forensic psychiatric facility
- 25                          licensed by the Commonwealth or a psychiatric unit of a general
- 26                          hospital or a private agency or company engaged in the provision
- 27                          of mental health services or a regional community program for

- 1                                    mental health and individuals with an intellectual disability for at  
2                                    least three (3) years;
- 3 (53) "Reasonable and prudent parent standard" has the same meaning as in 42 U.S.C.  
4                                    sec. 675(10);
- 5 (54) "Residential treatment facility" means a facility or group home with more than eight  
6                                    (8) beds designated by the Department of Juvenile Justice or the cabinet for the  
7                                    treatment of children;
- 8 (55) "Retain in custody" means, after a child has been taken into custody, the continued  
9                                    holding of the child by a peace officer for a period of time not to exceed twelve (12)  
10                                    hours when authorized by the court or the court-designated worker for the purpose  
11                                    of making preliminary inquiries;
- 12 (56) "Risk and needs assessment" means an actuarial tool scientifically proven to  
13                                    identify specific factors and needs that are related to delinquent and noncriminal  
14                                    misconduct;
- 15 (57) "Safety plan" means a written agreement developed by the cabinet and agreed to by  
16                                    a family that clearly describes the protective services that the cabinet will provide  
17                                    the family in order to manage risks to a child's safety;
- 18 (58) "School personnel" means those certified persons under the supervision of the local  
19                                    public or private education agency;
- 20 (59) "Secretary" means the secretary of the Cabinet for Health and Family Services;
- 21 (60) "Secure juvenile detention facility" means any physically secure facility used for  
22                                    the secure detention of children other than any facility in which adult prisoners are  
23                                    confined;
- 24 (61) "Serious physical injury" means physical injury which creates a substantial risk of  
25                                    death or which causes serious and prolonged disfigurement, prolonged impairment  
26                                    of health, or prolonged loss or impairment of the function of any bodily member or  
27                                    organ;

- 1 (62) "Sexual abuse" includes but is not necessarily limited to any contacts or interactions  
2 in which the parent, guardian, person in a position of authority or special trust, as  
3 defined in KRS 532.045, or other person having custodial control or supervision of  
4 the child or responsibility for his or her welfare, uses or allows, permits, or  
5 encourages the use of the child for the purposes of the sexual stimulation of the  
6 perpetrator or another person;
- 7 (63) "Sexual exploitation" includes but is not limited to a situation in which a parent,  
8 guardian, person in a position of authority or special trust, as defined in KRS  
9 532.045, or other person having custodial control or supervision of a child or  
10 responsible for his or her welfare, allows, permits, or encourages the child to  
11 engage in an act which constitutes prostitution under Kentucky law; or a parent,  
12 guardian, person in a position of authority or special trust, as defined in KRS  
13 532.045, or other person having custodial control or supervision of a child or  
14 responsible for his or her welfare, allows, permits, or encourages the child to  
15 engage in an act of obscene or pornographic photographing, filming, or depicting of  
16 a child as provided for under Kentucky law;
- 17 (64) "Social service worker" means any employee of the cabinet or any private agency  
18 designated as such by the secretary of the cabinet or a social worker employed by a  
19 county or city who has been approved by the cabinet to provide, under its  
20 supervision, services to families and children;
- 21 (65) "Staff secure facility for residential treatment" means any setting which assures that  
22 all entrances and exits are under the exclusive control of the facility staff, and in  
23 which a child may reside for the purpose of receiving treatment;
- 24 (66) "Statewide reporting system" means a system for making and compiling reports of  
25 child dependency, neglect, and abuse in Kentucky made via telephone call or in  
26 writing by a member of the public;
- 27 (67) (a) "Status offense action" is any action brought in the interest of a child who is

- 1 accused of committing acts, which if committed by an adult, would not be a  
2 crime. Such behavior shall not be considered criminal or delinquent and such  
3 children shall be termed status offenders. Status offenses shall include:
- 4 1. Beyond the control of school or beyond the control of parents;
  - 5 2. Habitual runaway;
  - 6 3. Habitual truant; and
  - 7 4. Alcohol offenses as provided in KRS 244.085.
- 8 (b) Status offenses shall not include violations of state or local ordinances which  
9 may apply to children such as a violation of curfew;
- 10 (68) "Take into custody" means the procedure by which a peace officer or other  
11 authorized person initially assumes custody of a child. A child may be taken into  
12 custody for a period of time not to exceed two (2) hours;
- 13 (69) "Transitional living support" means all benefits to which an eligible youth is  
14 entitled upon being granted extended or reinstated commitment to the cabinet by the  
15 court;
- 16 (70) "Transition plan" means a plan that is personalized at the direction of the youth that:
- 17 (a) Includes specific options on housing, health insurance, education, local  
18 opportunities for mentors and continuing support services, and workforce  
19 supports and employment services; and
  - 20 (b) Is as detailed as the youth may elect;
- 21 (71) "Valid court order" means a court order issued by a judge to a child alleged or  
22 found to be a status offender:
- 23 (a) Who was brought before the court and made subject to the order;
  - 24 (b) Whose future conduct was regulated by the order;
  - 25 (c) Who was given written and verbal warning of the consequences of the  
26 violation of the order at the time the order was issued and whose attorney or  
27 parent or legal guardian was also provided with a written notice of the

1 consequences of violation of the order, which notification is reflected in the  
2 record of the court proceedings; and

3 (d) Who received, before the issuance of the order, the full due process rights  
4 guaranteed by the Constitution of the United States;

5 (72) "Violation" means any offense, other than a traffic infraction, for which a sentence  
6 of a fine only can be imposed;

7 (73) "Youth alternative center" means a nonsecure facility, approved by the Department  
8 of Juvenile Justice, for the detention of juveniles, both prior to adjudication and  
9 after adjudication, which meets the criteria specified in KRS 15A.320; and

10 (74) "Youthful offender" means any person regardless of age, transferred to Circuit  
11 Court under the provisions of KRS Chapter 635 or 640 and who is subsequently  
12 convicted in Circuit Court.

13 ➔Section 4. KRS 610.030 is amended to read as follows:

14 Except as otherwise provided in KRS Chapters 600 to 645:

15 (1) If any person files a complaint alleging that a child, except a child alleged to be  
16 neglected, abused, dependent, or mentally ill who is subject to the jurisdiction of the  
17 court, may be within the purview of KRS Chapters 600 to 645, the court-designated  
18 worker shall make a preliminary determination as to whether the complaint is  
19 complete. In any case where the court-designated worker finds that the complaint is  
20 incomplete, the court-designated worker shall return the complaint without delay to  
21 the person or agency originating the complaint or having knowledge of the facts, or  
22 to the appropriate law enforcement agency having investigative jurisdiction of the  
23 offense, and request additional information in order to complete the complaint. The  
24 complainant shall promptly furnish the additional information requested;

25 (2) (a) Upon receipt of a complaint which appears to be complete and which alleges  
26 that a child has committed a public offense, the court-designated worker shall  
27 refer the complaint to the county attorney for review pursuant to KRS

1           635.010.

2           (b) If after review the county attorney elects to proceed, the court-designated  
3           worker shall conduct a preliminary intake inquiry to recommend whether the  
4           interests of the child or the public require that further action be taken or  
5           whether, in the interest of justice, the complaint can be resolved informally  
6           without the filing of a petition;

7           (3) Upon receipt of a complaint that appears to be complete and that alleges that the  
8           child has committed a status offense, the court-designated worker shall conduct a  
9           preliminary intake inquiry to determine whether the interests of the child or the  
10          public require that further action be taken;

11          (4) Prior to conducting a preliminary intake inquiry, the court-designated worker shall  
12          notify the child and the child's parent, guardian, or other person exercising custodial  
13          control or supervision of the child in writing:

14          (a) Of their opportunity to be present at the preliminary intake inquiry;

15          (b) That they may have counsel present during the preliminary intake inquiry as  
16          well as the formal conference thereafter;

17          (c) 1. That all information supplied by the child to a court-designated worker  
18             during any process prior to the filing of the petition shall be deemed  
19             confidential and shall not be subject to subpoena or to disclosure  
20             without the written consent of the child.

21             2. Information may be shared between treatment providers, the court-  
22             designated worker, and the family accountability, intervention, and  
23             response team to enable the court-designated worker to facilitate  
24             services and facilitate compliance with the diversion agreement; and

25          (d) That the child has the right to deny the allegation and demand a formal court  
26          hearing;

27          (5) The preliminary intake inquiry shall include the administration of an evidence-

1 based screening tool and, if appropriate and available, a validated risk and needs  
2 assessment, in order to identify whether the child and his or her family are in need  
3 of services and the level of intervention needed;

4 (6) (a) Upon the completion of the preliminary intake inquiry for a minor who is  
5 alleged to be a status offender under KRS 630.020(3) and is alleged to have  
6 been absent without excuse for fifteen (15) or more days during a school year,  
7 the court-designated worker shall refer the complaint to the county attorney.  
8 The county attorney shall then refer the complaint:

- 9 1. For formal court action; or
- 10 2. To be handled under subsection (8) of this section.

11 (b) Upon the completion of the preliminary intake inquiry for all other  
12 allegations, the court-designated worker may:

- 13 1. If the complaint alleges a status offense, determine that no further action  
14 be taken subject to review by the family accountability, intervention,  
15 and response team;
- 16 2. If the complaint alleges a public offense, refer the complaint to the  
17 county attorney;
- 18 3. Refer a public offense complaint for informal adjustment; or
- 19 4. Based upon the results of the preliminary intake inquiry, other  
20 information obtained, and a determination that the interests of the child  
21 and the public would be better served, and with the written approval of  
22 the county attorney for a public offense complaint, if necessary, conduct  
23 a formal conference and enter into a diversion agreement;

24 (7) Upon receiving written approval of the county attorney, if necessary, to divert a  
25 public offense complaint, and prior to conducting a formal conference, the court-  
26 designated worker shall advise in writing the complainant, the victim if any, and the  
27 law enforcement agency having investigative jurisdiction of the offense:

- 1 (a) Of the recommendation and the reasons therefor and that the complainant,  
2 victim, or law enforcement agency may submit within ten (10) days from  
3 receipt of such notice a complaint to the county attorney for special review; or
- 4 (b) In the case of a misdemeanor diverted pursuant to KRS 635.010(4), of the fact  
5 that the child was statutorily entitled to divert the case;
- 6 (8) A formal conference shall include the child and his or her parent, guardian, or other  
7 person exercising custodial control or supervision. The formal conference shall be  
8 used to:
- 9 (a) Present information obtained at the preliminary intake inquiry; and
- 10 (b) 1. Develop a diversion agreement that shall:
- 11 a. i. Require that the child regularly attend school; and  
12 ii. For a child against whom a complaint alleging truancy has  
13 been filed, require that if the child is absent from school  
14 without excuse for four (4) days during a diversion  
15 agreement, the child shall immediately be considered to have  
16 failed to complete the diversion agreement and subsection  
17 (9)(b)3. of this section shall immediately apply; and
- 18 b. Not exceed twelve (12) months in duration, and may include:
- 19 i. Referral of the child, and family if appropriate, to a public or  
20 private entity or person for the provision of identified  
21 services to address the complaint or assessed needs;
- 22 ii. Referral of the child, and family if appropriate, to a  
23 community service program within the limitations provided  
24 under KRS 635.080(2);
- 25 iii. Restitution, limited to the actual pecuniary loss suffered by  
26 the victim, if the child has the means or ability to make  
27 restitution;

- 1                   iv. Notification that the court-designated worker may apply
- 2                   graduated sanctions for failure to comply with the diversion
- 3                   agreement;
- 4                   v. Any other program or effort which reasonably benefits the
- 5                   community and the child; and
- 6                   vi. A plan for monitoring the child's progress and completion of
- 7                   the agreement.

8                   2. Prior to developing the diversion agreement, the court-designated

9                   worker or court-designated specialist shall contact the school district

10                  that the child attends to obtain background information from school

11                  personnel regarding family background, education records, any services

12                  previously provided, and any recommended trauma informed strategies.

13                  3. Upon developing a diversion agreement, the court-designated specialist

14                  shall make all details of the agreement accessible to:

15                  **a. The county attorney;**

16                  **b. The superintendent and the director of pupil personnel of the**

17                  **public school district in which the child is enrolled, or the**

18                  **principal of any private elementary or secondary school that the**

19                  **child attends;**

20                  **c. The school resource officer or any other contract employee hired**

21                  **to provide security services for the school that the child attends;**

22                  **and**

23                  **d. Upon request, any law enforcement officer**~~[ all members of the~~

24                  ~~family, accountability, intervention, and response team through an~~

25                  ~~electronic platform provided by the Administrative Office of the~~

26                  ~~Courts];~~

27                  (9) (a) If a child successfully completes a diversion agreement, the underlying

1 complaint shall be dismissed and further action related to that complaint shall  
2 be prohibited.

3 (b) If a child fails to appear for a preliminary intake inquiry, declines to enter into  
4 a diversion agreement, or fails to complete a diversion agreement, then:

5 1. For a public offense complaint, the matter shall be referred to the county  
6 attorney for formal court action and, if a petition is filed, the child may  
7 request that the court dismiss the complaint based upon his or her  
8 substantial compliance with the terms of diversion;

9 2. For a status offense complaint, except as provided for in subparagraph 3.  
10 of this paragraph, the court-designated worker shall refer the matter to  
11 the family accountability, intervention, and response team for review  
12 and further action; and

13 3. For a status offense complaint alleging truancy for which the child failed  
14 diversion in accordance with subsection (8)(b)1.a.ii. of this section, the  
15 matter shall immediately be referred to the county attorney for formal  
16 court action.

17 (c) If the child enters into a diversion agreement or is referred to the family  
18 accountability, intervention, and response team for truancy and there is no  
19 action implemented by the family accountability, intervention, and response  
20 team within thirty (30) days, the family accountability, intervention, and  
21 response team shall report to the court the reasons for inaction and shall  
22 provide a plan for action on the child's case. The court shall review on the  
23 record any diversion agreement and any report, without the attendance or  
24 appearance of the child, at regular intervals at the court's discretion to verify  
25 family accountability, intervention, and response team member attendance,  
26 team accountability, and performance.

27 (d) If a child fails to appear for a preliminary intake inquiry or fails to complete a

1 diversion agreement due to lack of parental cooperation, the court-designated  
2 worker shall make a determination that the child failed to complete the  
3 diversion due to lack of parent cooperation;

4 (10) If a complaint is referred to the court, the complaint and findings of the court-  
5 designated worker's preliminary intake inquiry shall be submitted to the court for  
6 the court to determine whether process should issue;

7 (11) If the court receives a report with a determination that the diversion is failed due to  
8 lack of parental cooperation, the court may order parental cooperation and refer the  
9 case back to the court-designated worker. The child shall not be detained upon this  
10 finding; and

11 (12) At any stage in the proceedings described in this section, the court or the county  
12 attorney may review any decision of the court-designated worker. The court upon  
13 its own motion or upon written request of the county attorney may refer any  
14 complaint for a formal hearing.

15 ➔Section 5. KRS 610.345 is amended to read as follows:

16 (1) When a child is adjudicated guilty of an offense which classifies him or her as a  
17 youthful offender, the judge in the court in which the matter was tried shall direct  
18 the clerk to notify the superintendent and the director of pupil personnel of the  
19 public school district in which the child is enrolled, or the principal of any private  
20 elementary or secondary school which the child attends of the adjudication and the  
21 petition and disposition of the case.

22 (2) When a child is adjudicated guilty of an offense which would classify him or her as  
23 a violent offender under KRS 439.3401, or be a felony under KRS Chapter 218A,  
24 508, 510, or 527 if committed by an adult, but which would not classify him or her  
25 as a youthful offender, the judge in the court in which the matter was tried shall  
26 direct the clerk to notify the superintendent and the director of pupil personnel of  
27 the public school district in which the child is enrolled, or the principal of any

1 private elementary or secondary school which the child attends of the charge, the  
2 adjudication, and the disposition of the case.

3 (3) *When a child is the respondent or petitioner for a domestic violence order issued*  
4 *under KRS 403.740 or an interpersonal protective order issued under KRS*  
5 *456.060, the judge in the court in which the matter was tried shall direct the clerk*  
6 *to notify:*

7 *(a) The superintendent and director of pupil personnel of the public school*  
8 *district in which the child is enrolled, or the principal of any private*  
9 *elementary or secondary school that the child attends; and*

10 *(b) The school resource officer or any other contract employee hired to provide*  
11 *security services for the school.*

12 (4) When a court-designated worker receives notice that a county attorney has made a  
13 determination pursuant to KRS 635.010(1) that probable cause exists to file a public  
14 offense petition alleging that the child committed an offense that, if committed by  
15 an adult, would be a:

16 (a) Felony; or

17 (b) Misdemeanor involving:

- 18 1. A controlled substance;
- 19 2. The possession, carrying, or use of a deadly weapon;
- 20 3. Physical injury to another person;
- 21 4. Sexual contact;
- 22 5. Sexual intercourse; or
- 23 6. Deviate sexual intercourse;

24 the court-designated worker shall notify the superintendent *and the director of*  
25 *pupil personnel* of the public school district in which the child is enrolled, or the  
26 principal of any private elementary or secondary school ~~*that*~~<sup>*which*</sup> the child  
27 attends of the charge. If the complaint is successfully diverted, the court-designated

1 worker shall notify the superintendent **and the director of pupil personnel** or the  
2 principal of the successful diversion, and all records of the incident or notification  
3 created in the school district or the school under this subsection shall be destroyed  
4 and shall not be included in the child's school records.

5 ~~(5)~~~~(4)~~ When a child is adjudicated guilty of an offense that meets the criteria set  
6 forth in subsection ~~(4)~~~~(3)~~(a) or (b) of this section, the judge in the court in which  
7 the matter is considered shall direct the clerk to notify the superintendent **and the**  
8 **director of pupil personnel** of the public school district in which the child is  
9 enrolled, or the principal of any private elementary or secondary school that the  
10 child attends of the charge, the adjudication, and the disposition of the case. If the  
11 petition is dismissed or informally adjusted, the clerk shall notify the superintendent  
12 **and the director of pupil personnel** or the principal of the disposition, and all  
13 records of the incident or notification created in the school district or the school  
14 under this subsection shall be destroyed and shall not be included in the child's  
15 school records.

16 ~~(6)~~~~(5)~~ The notifications required in subsections (1) to ~~(5)~~~~(4)~~ of this section shall be  
17 made within twenty-four (24) hours of the county attorney's determination pursuant  
18 to KRS 635.010(1), successful completion of diversion, or entry of the court order.  
19 The name of the complainant shall be deleted. The county attorney may, upon  
20 request by the school district or the school, provide a statement of the facts in the  
21 case, not to include the complainant's name.

22 ~~(7)~~~~(6)~~ Notice to a district superintendent referenced in subsections (1) to ~~(5)~~~~(4)~~ of  
23 this section shall be released by the superintendent to the principal of the school in  
24 which the child is enrolled. A principal of a public or private school receiving  
25 notice shall release the information to **any school resource officer or** employees of  
26 the school having responsibility for classroom instruction or counseling of the child,  
27 and may release it to other school personnel as described in subsection ~~(8)~~~~(7)~~ of

1 this section, but the information shall otherwise be confidential and shall not be  
2 shared by school personnel with any other person or agency except as may  
3 otherwise be required by law~~]. The notification in writing of the nature of the~~  
4 ~~offense committed by the child and any probation requirements shall not become a~~  
5 ~~part of the child's student record].~~

6 ~~(8)~~~~(7)~~ Records or information disclosed pursuant to this section shall be limited to  
7 records of that student's criminal petition and the disposition thereof covered by this  
8 section, shall be subject to the provisions of KRS 610.320 and 610.340, and shall  
9 not be disclosed to any other person, including school personnel, except to a district  
10 superintendent, **director of pupil personnel**, public or private elementary and  
11 secondary school administrative, transportation, and counseling personnel, and to  
12 any **school resource officer**, teacher, or school employee with whom the student  
13 may come in contact. This section shall not authorize the disclosure of any other  
14 juvenile record or information relating to the child.

15 ~~(9)~~~~(8)~~ The Department of Juvenile Justice shall provide a child's offense history  
16 information pursuant to this section to the superintendent **and the director of pupil**  
17 **personnel** of the local school district in which the child, who is committed to the  
18 department, is placed.

19 ~~(10)~~~~(9)~~ Records or information received by the school pursuant to this section shall:  
20 (a) Be kept in a locked file, when not in use, to be opened only on permission of  
21 the administrator **or any school resource officer**; and  
22 (b) For the purposes of destruction required in this section, not include education  
23 records, as defined in KRS 160.700, created by the school.

24 ~~(11)~~~~(10)~~ A superintendent of a public school district may designate an employee of the  
25 school district to receive notices and carry out the superintendent's responsibilities  
26 under this section. The superintendent shall provide the clerk and the court-  
27 designated worker with notice of any designation and the name and contact

1 information for the superintendent's designee.

2 ➔Section 6. KRS 620.050 is amended to read as follows:

- 3 (1) Anyone acting upon reasonable cause in the making of a report or acting under  
4 KRS 620.030 to 620.050 in good faith shall have immunity from any liability, civil  
5 or criminal, that might otherwise be incurred or imposed. Any such participant shall  
6 have the same immunity with respect to participation in any judicial proceeding  
7 resulting from such report or action. However, any person who knowingly makes a  
8 false report and does so with malice shall be guilty of a Class A misdemeanor.
- 9 (2) Any employee or designated agent of a children's advocacy center shall be immune  
10 from any civil liability arising from performance within the scope of the person's  
11 duties as provided in KRS 620.030 to 620.050. Any such person shall have the  
12 same immunity with respect to participation in any judicial proceeding. Nothing in  
13 this subsection shall limit liability for negligence. Upon the request of an employee  
14 or designated agent of a children's advocacy center, the Attorney General shall  
15 provide for the defense of any civil action brought against the employee or  
16 designated agent as provided under KRS 12.211 to 12.215.
- 17 (3) Neither the husband-wife nor any professional-client/patient privilege, except the  
18 attorney-client and clergy-penitent privilege, shall be a ground for refusing to report  
19 under this section or for excluding evidence regarding a dependent, neglected, or  
20 abused child or the cause thereof, in any judicial proceedings resulting from a report  
21 pursuant to this section. This subsection shall also apply in any criminal proceeding  
22 in District or Circuit Court regarding a dependent, neglected, or abused child.
- 23 (4) Upon receipt of a report of an abused, neglected, or dependent child pursuant to this  
24 chapter, the cabinet as the designated agency or its delegated representative shall  
25 initiate a prompt investigation or assessment of family needs, take necessary action,  
26 and shall offer protective services toward safeguarding the welfare of the child. The  
27 cabinet shall work toward preventing further dependency, neglect, or abuse of the

1 child or any other child under the same care, and preserve and strengthen family  
2 life, where possible, by enhancing parental capacity for adequate child care. If an  
3 oral or written report, including but not limited to electronic submissions, alleging  
4 that a child is dependent, neglected, or abused is made pursuant to this section, and  
5 the cabinet determines that the report does not meet criteria for an investigation, the  
6 cabinet shall refer the family to appropriate community-based child and family  
7 service agencies for services to preserve and strengthen family life in accordance  
8 with the requirements in 42 U.S.C. sec. 5106a.

9 (5) The report of suspected child abuse, neglect, or dependency and all information  
10 obtained by the cabinet or its delegated representative, as a result of an investigation  
11 or assessment made pursuant to this chapter, except for those records provided for  
12 in subsection (6) of this section, shall only~~not~~ be divulged to~~anyone except~~:

- 13 (a) Persons suspected of causing dependency, neglect, or abuse;
- 14 (b) The custodial parent or legal guardian of the child alleged to be dependent,  
15 neglected, or abused;
- 16 (c) Persons within the cabinet with a legitimate interest or responsibility related  
17 to the case;
- 18 (d) A licensed child-caring facility or child-placing agency evaluating placement  
19 for or serving a child who is believed to be the victim of an abuse, neglect, or  
20 dependency report;
- 21 (e) Other medical, psychological, educational, or social service agencies, child  
22 care administrators, corrections personnel, or law enforcement agencies,  
23 including the county attorney's office, the coroner, and the local child fatality  
24 response team, that have a legitimate interest in the case;
- 25 (f) A noncustodial parent when the dependency, neglect, or abuse is  
26 substantiated;
- 27 (g) Members of multidisciplinary teams as defined by KRS 620.020 and which

- 1 operate pursuant to KRS 431.600;
- 2 (h) Employees or designated agents of a children's advocacy center;
- 3 (i) Those persons so authorized by court order;
- 4 (j) The external child fatality and near fatality review panel established by KRS
- 5 620.055;
- 6 **(k) A person, agency, or organization engaged in a bona fide research, quality**
- 7 **improvement, or evaluation project having value as determined by the**
- 8 **cabinet. This paragraph shall not limit the authority of the cabinet to**
- 9 **decline to share data in cases where it deems a research, quality**
- 10 **improvement, or evaluation project lacks sufficient merit or value, or where**
- 11 **it deems the perceived risks to be unacceptably high. Data sharing shall be**
- 12 **driven by the aims of advancing human knowledge, complying with federal**
- 13 **requirements, and facilitating future planning for programs that support**
- 14 **families, serve maltreated children, or inform the development of policy.**
- 15 **Data may be shared under this paragraph only when the following**
- 16 **conditions are met:**
- 17 **1. The person, agency, or organization enters into a data-use agreement**
- 18 **with the cabinet and complies with the data security and privacy**
- 19 **conditions outlined by the Office of Data Analytics within the cabinet;**
- 20 **2. Any confidential information provided for a research, quality**
- 21 **improvement, or evaluation project under this paragraph shall not be**
- 22 **redisclosed. The cabinet shall not share personally identifiable**
- 23 **information under this paragraph, except in cases where the**
- 24 **information is essential to the completion of the project. As used in**
- 25 **this subparagraph, "personally identifiable information" means the**
- 26 **current definition promulgated by the United States National Institute**
- 27 **of Standards and Technology at the time of data sharing; and**

1                    **3. If a research, quality improvement, or evaluation project results in the**  
 2                    **publication or public dissemination of related material, confidential**  
 3                    **information provided for a research, quality improvement, or**  
 4                    **evaluation project under this subparagraph shall not be disclosed in**  
 5                    **the results;** or

6                    ~~(L)(k)}~~ The Commonwealth Office of the Ombudsman established pursuant to  
 7                    KRS 43.035.

8                    (6) (a) Files, reports, notes, photographs, records, electronic and other  
 9                    communications, and working papers used or developed by a children's  
 10                    advocacy center in providing services under this chapter are confidential and  
 11                    shall not be disclosed except to the following persons:

- 12                    1. Staff employed by the cabinet, law enforcement officers, and  
 13                    Commonwealth's and county attorneys who are directly involved in the  
 14                    investigation or prosecution of the case, including a cabinet  
 15                    investigation or assessment of child abuse, neglect, and dependency in  
 16                    accordance with this chapter;
- 17                    2. Medical and mental health professionals listed by name in a release of  
 18                    information signed by the guardian of the child, provided that the  
 19                    information shared is limited to that necessary to promote the physical  
 20                    or psychological health of the child or to treat the child for abuse-related  
 21                    symptoms;
- 22                    3. The court and those persons so authorized by a court order;
- 23                    4. The external child fatality and near fatality review panel established by  
 24                    KRS 620.055;
- 25                    5. The Commonwealth Office of the Ombudsman established pursuant to  
 26                    KRS 43.035; **and**
- 27                    6. The parties to an administrative hearing conducted by the cabinet or its

1           designee in accordance with KRS Chapter 13B in an appeal of a cabinet-  
2           substantiated finding of abuse or neglect. The children's advocacy center  
3           may, in its sole discretion, provide testimony in lieu of files, reports,  
4           notes, photographs, records, electronic and other communications, and  
5           working papers used or developed by the center if the center determines  
6           that the release poses a threat to the safety or well-being of the child, or  
7           would be in the best interests of the child. Following the administrative  
8           hearing and any judicial review, the parties to the administrative hearing  
9           shall return all files, reports, notes, photographs, records, electronic and  
10          other communications, and working papers used or developed by the  
11          children's advocacy center to the center~~;~~ and

12          ~~7. A person, agency, or organization engaged in a bona fide research,~~  
13          ~~quality improvement, or evaluation project having value as determined~~  
14          ~~by the cabinet. Nothing in this subparagraph shall limit the authority of~~  
15          ~~the cabinet to decline to share data in cases where it deems a research,~~  
16          ~~quality improvement, or evaluation project lacks sufficient merit or~~  
17          ~~value, or the perceived risks are unacceptably high. Data sharing shall~~  
18          ~~be driven by the aims of advancing human knowledge, complying with~~  
19          ~~federal requirements, and facilitating future planning for programs that~~  
20          ~~support families, serve maltreated children, or inform the development~~  
21          ~~of policy. Data may be shared under this subparagraph provided that the~~  
22          ~~following conditions are met:~~

23          ~~a. The person, agency, or organization enters into a data use~~  
24                  ~~agreement with the cabinet and complies with the data security~~  
25                  ~~and privacy conditions outlined by the Office of Data Analytics~~  
26                  ~~within the cabinet;~~

27          ~~b. Any confidential information provided for a research, quality~~

1 ~~improvement, or evaluation project under this subparagraph shall~~  
2 ~~not be redisclosed. The cabinet shall not share personally~~  
3 ~~identifiable information under this subparagraph, except in cases~~  
4 ~~where such information is essential to the completion of the~~  
5 ~~project. For the purposes of this subdivision, "personally~~  
6 ~~identifiable information" means the current definition promulgated~~  
7 ~~by the United States National Institute of Standards and~~  
8 ~~Technology at the time of data sharing; and~~

9 ~~e. If a research or evaluation project results in the publication or~~  
10 ~~public dissemination of related material, confidential information~~  
11 ~~provided for a research, quality improvement, or evaluation project~~  
12 ~~under this subparagraph shall not be disclosed in the results].~~

13 (b) The provisions of this subsection shall not be construed as to contravene the  
14 Rules of Criminal Procedure relating to discovery.

15 (7) Nothing in this section shall prohibit a parent or guardian from accessing records  
16 for his or her child providing that the parent or guardian is not currently under  
17 investigation by a law enforcement agency or the cabinet relating to the abuse or  
18 neglect of a child.

19 (8) Nothing in this section shall prohibit employees or designated agents of a children's  
20 advocacy center from disclosing information during a multidisciplinary team  
21 review of a child sexual abuse case as set forth under KRS 620.040. Persons  
22 receiving this information shall sign a confidentiality statement consistent with  
23 statutory prohibitions on disclosure of this information.

24 (9) Employees or designated agents of a children's advocacy center may confirm to  
25 another children's advocacy center that a child has been seen for services. If an  
26 information release has been signed by the guardian of the child, a children's  
27 advocacy center may disclose relevant information to another children's advocacy

1 center.

- 2 (10) (a) An interview of a child recorded at a children's advocacy center shall not be  
3 duplicated, except that the Commonwealth's or county attorney prosecuting  
4 the case may:
- 5 1. Make and retain one (1) copy of the interview; and
  - 6 2. Make one (1) copy for the defendant's or respondent's counsel that the  
7 defendant's or respondent's counsel shall not duplicate.
- 8 (b) The defendant's or respondent's counsel shall file the copy with the court clerk  
9 at the close of the case.
- 10 (c) Unless objected to by the victim or victims, the court, on its own motion, or  
11 on motion of the attorney for the Commonwealth shall order all recorded  
12 interviews that are introduced into evidence or are in the possession of the  
13 children's advocacy center, law enforcement, the prosecution, or the court to  
14 be sealed.
- 15 (d) The provisions of this subsection shall not be construed as to contravene the  
16 Rules of Criminal Procedure relating to discovery.
- 17 (11) Identifying information concerning the individual initiating the report under KRS  
18 620.030 shall not be disclosed except:
- 19 (a) To law enforcement officials that have a legitimate interest in the case;
  - 20 (b) To the agency designated by the cabinet to investigate or assess the report;
  - 21 (c) To members of multidisciplinary teams as defined by KRS 620.020 that  
22 operated under KRS 431.600;
  - 23 (d) Under a court order, after the court has conducted an in camera review of the  
24 record of the state related to the report and has found reasonable cause to  
25 believe that the reporter knowingly made a false report; or
  - 26 (e) The external child fatality and near fatality review panel established by KRS  
27 620.055.

- 1 (12) (a) Information may be publicly disclosed by the cabinet in a case where child  
2 abuse or neglect has resulted in a child fatality or near fatality.
- 3 (b) The cabinet shall conduct an internal review of any case where child abuse or  
4 neglect has resulted in a child fatality or near fatality and the cabinet had prior  
5 involvement with the child or family. The cabinet shall prepare a summary  
6 that includes an account of:
- 7 1. The cabinet's actions and any policy or personnel changes taken or to be  
8 taken, including the results of appeals, as a result of the findings from  
9 the internal review; and
- 10 2. Any cooperation, assistance, or information from any agency of the state  
11 or any other agency, institution, or facility providing services to the  
12 child or family that were requested and received by the cabinet during  
13 the investigation of a child fatality or near fatality.
- 14 (c) The cabinet shall submit a report by September 1 of each year containing an  
15 analysis of all summaries of internal reviews occurring during the previous  
16 year and an analysis of historical trends to the Governor, the General  
17 Assembly, and the state child fatality review team created under KRS  
18 211.684.
- 19 (13) When an adult who is the subject of information made confidential by subsection  
20 (5) of this section publicly reveals or causes to be revealed any significant part of  
21 the confidential matter or information, the confidentiality afforded by subsection (5)  
22 of this section is presumed voluntarily waived, and confidential information and  
23 records about the person making or causing the public disclosure, not already  
24 disclosed but related to the information made public, may be disclosed if disclosure  
25 is in the best interest of the child or is necessary for the administration of the  
26 cabinet's duties under this chapter.
- 27 (14) (a) As a result of any report of suspected child abuse or neglect:~~[-,]~~

- 1            1.    Photographs and X-rays;~~[-or-]~~
- 2            2.    *A comprehensive urine drug screen using confirmatory methodology*
- 3                            *that shall include the following synthetic opioids:*
- 4                            *a. Buprenorphine;*
- 5                            *b. Fentanyl;*
- 6                            *c. Methadone; and*
- 7                            *d. Xylazine; or*

8            3.    Other appropriate medical diagnostic procedures;  
 9            may be taken or caused to be taken, without the consent of the parent or other  
 10           person exercising custodial control or supervision of the child, as a part of the  
 11           medical evaluation or investigation of these reports.~~[-]~~

12           (b)    These photographs and X-rays, *comprehensive drug screens,* or results of  
 13           other medical diagnostic procedures may be introduced into evidence in any  
 14           subsequent judicial proceedings or an administrative hearing conducted by the  
 15           cabinet or its designee in accordance with KRS Chapter 13B in an appeal of a  
 16           cabinet-substantiated finding of child abuse or neglect.~~[-]~~

17           (c)    The person performing the diagnostic procedures,~~[-or-]~~ taking photographs or  
 18           X-rays, *or administering the comprehensive drug screen* shall be immune  
 19           from criminal or civil liability for having performed the act. Nothing herein  
 20           shall limit liability for negligence.

21           (15) In accordance with 42 U.S.C. sec. 671, the cabinet shall share information about a  
 22           child in the custody of the cabinet with a relative or a parent of the child's sibling  
 23           for the purposes of:

- 24           (a)    Evaluating or arranging a placement for the child;
- 25           (b)    Arranging appropriate treatment services for the child; or
- 26           (c)    Establishing visitation between the child and a relative, including a sibling of
- 27           the child.

1 (16) In accordance with 42 U.S.C. sec. 671, the cabinet shall, in the case of siblings  
2 removed from their home who are not jointly placed, provide for frequent visitation  
3 or other ongoing interaction between the siblings, unless the cabinet determines that  
4 frequent visitation or other ongoing interaction would be contrary to the safety or  
5 well-being of any of the siblings.

6 (17) This section shall not be interpreted as prohibiting the Commonwealth Office of the  
7 Ombudsman from reporting pursuant to KRS 43.035 on de-identified information  
8 made confidential by this section.

9 ➔Section 7. KRS 620.140 is amended to read as follows:

10 (1) In determining the disposition of all cases brought on behalf of dependent,  
11 neglected, or abused children, the juvenile session of the District Court ***or the***  
12 ***family division of the Circuit Court***, in the best ***interests***~~[interest]~~ of the child, shall  
13 have but shall not be limited to the following dispositional alternatives:

14 (a) Informal adjustment of the case by agreement, which may be entered into at  
15 any time. Informal adjustment may include an agreed plan by which:

16 1. The parent or other person exercising custodial control or supervision  
17 agrees that grounds exist for a finding of dependency, neglect, or abuse,  
18 and agrees to the conditions of protective orders under paragraph (b) of  
19 this subsection for a duration of up to one (1) year;

20 2. The action will be dismissed by the court, without hearing, at the end of  
21 the period agreed upon if no motion is brought alleging a violation of a  
22 protective order; and

23 3. If a motion is brought alleging a violation of a protective order, a  
24 hearing will be held at which the parent or other person exercising  
25 custodial control or supervision may contest the alleged violation, but  
26 may not contest the original grounds for a finding of dependency,  
27 neglect, or abuse. If a violation is found to have occurred, the court may

1                   consider other dispositional alternatives pursuant to this section;

2           (b) Protective orders, such as the following:

3                   1. Requiring the parent or any other person to abstain from any conduct  
4                   abusing, neglecting, or making the child dependent;

5                   2. Placing the child in his or her own home under supervision of the  
6                   cabinet or its designee with services as determined to be appropriate by  
7                   the cabinet; and

8                   3. Orders authorized by KRS 403.715 to 403.785 and by KRS Chapter  
9                   456;

10           (c) Removal of the child to the custody of an adult relative, fictive kin, other  
11           person, or child-caring facility or child-placing agency, taking into  
12           consideration the wishes of the parent or other person exercising custodial  
13           control or supervision. Before any child is committed to the cabinet or placed  
14           out of his or her home under the supervision of the cabinet, the court shall  
15           determine that reasonable efforts have been made by the court or the cabinet  
16           to prevent or eliminate the need for removal and that continuation in the home  
17           would be contrary to the welfare of the child. If a child is to be placed with an  
18           adult relative or fictive kin, the child, if able, parent, or other person  
19           exercising custodial control or supervision shall provide a list to the cabinet of  
20           possible persons to be considered;

21           (d) Commitment of the child to the custody of the cabinet for placement for an  
22           indeterminate period of time not to exceed his or her attainment of the age  
23           eighteen (18), unless the youth elects to extend his or her commitment beyond  
24           the age of eighteen (18) under paragraph (e) of this subsection. Beginning at  
25           least six (6) months prior to an eligible youth attaining the age of eighteen  
26           (18), the cabinet shall provide the eligible youth with education,  
27           encouragement, assistance, and support regarding the development of a

1 transition plan, and inform the eligible youth of his or her right to extend  
2 commitment beyond the age of eighteen (18); or

3 (e) **Upon the receipt of the request and with concurrence of the cabinet,** extend  
4 or reinstate **the youth's commitment or custody**~~[an eligible youth's~~  
5 ~~commitment]~~ up to the age of twenty-one (21) to receive transitional living  
6 support. The request shall be made by the youth prior to attaining twenty (20)  
7 years **and six (6) months** of age. A youth may **extend or reinstate his or**  
8 **her**~~[opt in or out of extended]~~ commitment up to **three (3) times**~~[two (2)]~~  
9 times prior to attaining twenty (20) years **and six (6) months** of age, **without**  
10 **seeking approval from the commissioner of the department. A youth may**  
11 **extend or reinstate his or her commitment more than three (3) times prior to**  
12 **attaining twenty (20) years and six (6) months of age if approved by the**  
13 **commissioner of the department or his or her designee**~~[with a ninety (90)~~  
14 ~~day grace period between the time he or she exits and then reenters custody so~~  
15 ~~long as there is documentation that his or her request was submitted prior to~~  
16 ~~attaining twenty (20) years of age]. The court may grant an extension or~~  
17 ~~reinstatement of a youth's commitment even if the concurrence of the cabinet~~  
18 ~~occurs after the youth attains twenty (20) years **and six (6) months** of age].~~  
19 ~~Upon receipt of the request and with the concurrence of the cabinet, the court~~  
20 ~~may authorize commitment up to the age of twenty one (21)].~~

21 (2) An order of temporary custody to the cabinet shall not be considered as a  
22 permissible dispositional alternative.

23 ➔Section 8. KRS 620.055 is amended to read as follows:

24 (1) An external child fatality and near fatality review panel is hereby created and  
25 established for the purpose of conducting comprehensive reviews of child fatalities  
26 and near fatalities, reported to the Cabinet for Health and Family Services,  
27 suspected to be a result of abuse or neglect. The panel shall be attached to the

1 Justice and Public Safety Cabinet for staff and administrative purposes.

2 (2) The external child fatality and near fatality review panel shall be composed of the  
3 following five (5) ex officio nonvoting members and seventeen (17) voting  
4 members:

5 (a) Two (2) members of the Kentucky General Assembly, one (1) appointed by  
6 the President of the Senate and one (1) appointed by the Speaker of the House  
7 of Representatives, who shall be ex officio nonvoting members;

8 (b) The commissioner of the Department for Community Based Services, who  
9 shall be an ex officio nonvoting member;

10 (c) The commissioner of the Department for Public Health, who shall be an ex  
11 officio nonvoting member;

12 (d) A family court judge selected by the Chief Justice of the Kentucky Supreme  
13 Court, who shall be an ex officio nonvoting member~~[members]~~;

14 (e) A pediatrician from the University of Kentucky's Department of Pediatrics  
15 who is licensed and experienced in forensic medicine relating to child abuse  
16 and neglect to be selected by the Attorney General from a list of three (3)  
17 names provided by the dean of the University of Kentucky School of  
18 Medicine;

19 (f) A pediatrician from the University of Louisville's Department of Pediatrics  
20 who is licensed and experienced in forensic medicine relating to child abuse  
21 and neglect to be selected by the Attorney General from a list of three (3)  
22 names provided by the dean of the University of Louisville School of  
23 Medicine;

24 (g) The state medical examiner or designee;

25 (h) A court-appointed special advocate (CASA) program director to be selected  
26 by the Attorney General from a list of three (3) names provided by the  
27 Kentucky CASA Association;

- 1 (i) A peace officer with experience investigating child abuse and neglect  
2 fatalities and near fatalities to be selected by the Attorney General from a list  
3 of three (3) names provided by the commissioner of the Kentucky State  
4 Police;
- 5 (j) A representative from Prevent Child Abuse Kentucky, Inc. to be selected by  
6 the Attorney General from a list of three (3) names provided by the president  
7 of the Prevent Child Abuse Kentucky, Inc. board of directors;
- 8 (k) A practicing local prosecutor to be selected by the Attorney General;
- 9 (l) The executive director of the Kentucky Domestic Violence Association or the  
10 executive director's designee;
- 11 (m) The chairperson of the State Child Fatality Review Team established in  
12 accordance with KRS 211.684 or the chairperson's designee;
- 13 (n) A practicing social work clinician to be selected by the Attorney General from  
14 a list of three (3) names provided by the Board of Social Work;
- 15 (o) A practicing addiction counselor to be selected by the Attorney General from  
16 a list of three (3) names provided by the Kentucky Association of Addiction  
17 Professionals;
- 18 (p) A representative from the family resource and youth service centers to be  
19 selected by the Attorney General from a list of three (3) names submitted by  
20 the Cabinet for Health and Family Services;
- 21 (q) A representative of a community mental health center to be selected by the  
22 Attorney General from a list of three (3) names provided by the Kentucky  
23 Association of Regional Mental Health and Mental Retardation Programs,  
24 Inc.;
- 25 (r) A member of a citizen foster care review board selected by the Chief Justice  
26 of the Kentucky Supreme Court;
- 27 (s) An at-large representative who shall serve as chairperson to be selected by the

1 Secretary of State;

2 (t) The president of the Kentucky Coroners Association; and

3 (u) A practicing medication-assisted treatment provider to be selected by the  
4 Attorney General from a list of three (3) names provided by the Kentucky  
5 Board of Medical Licensure.

6 (3) (a) ~~[By August 1, 2013, ]~~The appointing authority or the appointing authorities,  
7 as the case may be, shall have appointed panel members. Initial terms of  
8 members, other than those serving ex officio, shall be staggered to provide  
9 continuity. Initial appointments shall be: five (5) members for terms of one (1)  
10 year, five (5) members for terms of two (2) years, and five (5) members for  
11 terms of three (3) years, these terms to expire, in each instance, on June 30  
12 and thereafter until a successor is appointed and accepts appointment.

13 (b) Upon the expiration of these initial staggered terms, successors shall be  
14 appointed by the respective appointing authorities~~[,]~~ for terms of two (2)  
15 years~~[,]~~ and until successors are appointed and accept their appointments.  
16 Members shall be eligible for reappointment. Vacancies in the membership of  
17 the panel shall be filled in the same manner as the original appointments.

18 (c) At any time, a panel member shall recuse himself or herself from the review  
19 of a case if the panel member believes he or she has a personal or private  
20 conflict of interest.

21 (d) If a voting panel member is absent from two (2) or more consecutive,  
22 regularly scheduled meetings, the member shall be considered to have  
23 resigned and shall be replaced with a new member in the same manner as the  
24 original appointment.

25 (e) If a voting panel member is proven to have violated subsection (13) of this  
26 section, the member shall be removed from the panel, and the member shall  
27 be replaced with a new member in the same manner as the original

1 appointment.

2 (4) The panel shall meet at least quarterly and may meet upon the call of the  
3 chairperson of the panel.

4 (5) Members of the panel shall receive no compensation for their duties related to the  
5 panel, but may be reimbursed for expenses incurred in accordance with state  
6 guidelines and administrative regulations.

7 (6) Each panel member shall be provided copies of all information set out in this  
8 subsection, including but not limited to records and information, upon request, to be  
9 gathered, unredacted, and submitted to the panel within thirty (30) days by the  
10 Cabinet for Health and Family Services from the Department for Community Based  
11 Services or any agency, organization, or entity involved with a child subject to a  
12 fatality or near fatality:

13 (a) Cabinet for Health and Family Services records and documentation regarding  
14 the deceased or injured child and his or her caregivers, residents of the home,  
15 and persons supervising the child at the time of the incident that include all  
16 records and documentation set out in this paragraph:

- 17 1. All prior and ongoing investigations, services, or contacts;  
18 2. ~~Any and~~ All records of services to the family provided by agencies or  
19 individuals contracted by the Cabinet for Health and Family Services;  
20 and  
21 3. All documentation of actions taken as a result of child fatality internal  
22 reviews conducted pursuant to KRS 620.050(12)(b);

23 (b) Licensing reports from the Cabinet for Health and Family Services, Office of  
24 Inspector General, if an incident occurred in a licensed facility;

25 (c) All available records regarding protective services provided out of state;

26 (d) All records of services provided by the Department for Juvenile Justice  
27 regarding the deceased or injured child and his or her caregivers, residents of

1 the home, and persons involved with the child at the time of the incident;

2 (e) Autopsy reports;

3 (f) Emergency medical service, fire department, law enforcement, coroner, and  
4 other first responder reports, including but not limited to photos and  
5 interviews with family members and witnesses;

6 (g) Medical records regarding the deceased or injured child, including but not  
7 limited to all records and documentation set out in this paragraph:

8 1. Primary care records, including progress notes; developmental  
9 milestones; growth charts that include head circumference; all  
10 laboratory and X-ray requests and results; and birth record that includes  
11 record of delivery type, complications, and initial physical exam of  
12 baby;

13 2. In-home provider care notes about observations of the family, bonding,  
14 others in home, and concerns;

15 3. Hospitalization and emergency department records;

16 4. Dental records;

17 5. Specialist records; and

18 6. All photographs of injuries of the child that are available;

19 (h) Educational records of the deceased or injured child, or other children residing  
20 in the home where the incident occurred, including but not limited to the  
21 records and documents set out in this paragraph:

22 1. Attendance records;

23 2. Special education services;

24 3. School-based health records; and

25 4. Documentation of any interaction and services provided to the children  
26 and family.

27 The release of educational records shall ~~comply~~comply ~~be in compliance~~ with the

1 Family Educational Rights and Privacy Act, 20 U.S.C. sec. 1232g and its  
2 implementing regulations;

3 (i) Head Start records or records from any other child care or early child care  
4 provider;

5 (j) Records of any Family, Circuit, or District Court involvement with the  
6 deceased or injured child and his or her caregivers, residents of the home and  
7 persons involved with the child at the time of the incident that include but are  
8 not limited to the juvenile and family court records and orders set out in this  
9 paragraph, pursuant to KRS Chapters 199, 403, 405, 406, and 600 to 645:

10 1. Petitions;

11 2. Court reports by the Department for Community Based Services,  
12 guardian ad litem, court-appointed special advocate, and the Citizen  
13 Foster Care Review Board;

14 3. All orders of the court, including temporary, dispositional, or  
15 adjudicatory; and

16 4. Documentation of annual or any other review by the court;

17 (k) Home visit records from the Department for Public Health or other services;

18 (l) All information on prior allegations of abuse or neglect and deaths of children  
19 of adults residing in the household;

20 (m) All law enforcement records and documentation regarding the deceased or  
21 injured child and his or her caregivers, residents of the home, and persons  
22 involved with the child at the time of the incident;~~and~~

23 (n) Mental health records regarding the deceased or injured child and his or her  
24 caregivers, residents of the home, and persons involved with the child at the  
25 time of the incident; **and**

26 **(o) All supervisory consult notes, documents, and information related to all**  
27 **fatal and near fatal cases.**

- 1 (7) The panel may seek the advice of experts, such as persons specializing in the fields  
2 of psychiatric and forensic medicine, nursing, psychology, social work, education,  
3 law enforcement, family law, or other related fields, if the facts of a case warrant  
4 additional expertise.
- 5 (8) The panel shall have full access to The Workers Information System, known as  
6 TWIST, and the internet The Workers Information System, known as iTWIST,  
7 that are maintained by the Cabinet for Health and Family Services.
- 8 (9) The panel shall be provided with the quarterly System Safety Review Report that  
9 is submitted to the Safety Action Group (SAG) and with any additional reports,  
10 minutes, and recommendations from the SAG meetings that are not part of the  
11 recommendations incorporated in the Cabinet for Health and Family Services  
12 Annual Fatality Report.
- 13 (10) The panel shall post updates after each meeting to the website of the Justice and  
14 Public Safety Cabinet regarding case reviews, findings, and recommendations.
- 15 ~~(11)~~<sup>(9)</sup> The panel chairperson, or other requested persons, shall report a summary of  
16 the panel's discussions and proposed or actual recommendations to the Interim Joint  
17 Committee on Families and Children of the Kentucky General Assembly monthly  
18 or at the request of a committee co-chair. The goal of the committee shall be to  
19 ensure impartiality regarding the operations of the panel during its review process.
- 20 ~~(12)~~<sup>(10)</sup> (a) The panel shall publish an annual report by February 1 of each year  
21 consisting of case reviews, findings, and recommendations for system and  
22 process improvements to help prevent child fatalities and near fatalities that  
23 are due to abuse and neglect. The report shall be submitted to the Governor,  
24 the secretary of the Cabinet for Health and Family Services, the Chief Justice  
25 of the Supreme Court, the Attorney General, the State Child Abuse and  
26 Neglect Prevention Board established pursuant to KRS 15.905, and the  
27 director of the Legislative Research Commission for distribution to the

1 Interim Joint Committee on Families and Children, and the Interim Joint  
2 Committee on Judiciary.

3 (b) The panel shall determine which agency is responsible for implementing each  
4 recommendation, and shall forward each recommendation in writing to the  
5 appropriate agency.

6 (c) Any agency that receives a recommendation from the panel shall, within  
7 ninety (90) days of receipt:

8 1. Respond to the panel with a written notice of intent to implement the  
9 recommendation, an explanation of how the recommendation will be  
10 implemented, and an approximate time frame of implementation; or

11 2. Respond to the panel with a written notice that the agency does not  
12 intend to implement the recommendation, and a detailed explanation of  
13 why the recommendation cannot be implemented.

14 (13) ~~(a)~~ ~~(11)~~ Information and record copies that are confidential under state or federal  
15 law and are provided to the external child fatality and near fatality review  
16 panel by the Cabinet for Health and Family Services, the Department for  
17 Community Based Services, or any agency, organization, or entity for review  
18 shall not become the information and records of the panel and shall not lose  
19 their confidentiality by virtue of the panel's access to the information and  
20 records. ~~{ }~~

21 (b) The original information and records used to generate information and record  
22 copies provided to the panel in accordance with subsection (6) of this section  
23 shall be maintained by the appropriate agency in accordance with state and  
24 federal law and shall be subject to the Kentucky Open Records Act, KRS  
25 61.870 to 61.884. ~~{ }~~

26 (c) All open records requests shall be made to the appropriate agency, not to the  
27 external child fatality and near fatality review panel or any of the panel

1 members. Information and record copies provided to the panel for review  
2 shall be exempt from the Kentucky Open Records Act, KRS 61.870 to  
3 61.884.[]

4 **(d)** At the conclusion of the panel's examination, all copies of information and  
5 records provided to the panel involving an individual case shall be destroyed  
6 by the Justice and Public Safety Cabinet.

7 **(14) (a)**~~[(12)]~~ Notwithstanding any provision of law to the contrary, the portions of the  
8 external child fatality and near fatality review panel meetings during which an  
9 individual child fatality or near fatality case is reviewed or discussed by panel  
10 members may be a closed session and subject to the provisions of KRS  
11 61.815(1) and shall only occur following the conclusion of an open session.  
12 At the conclusion of the closed session, the panel shall immediately convene  
13 an open session and give a summary of what occurred during the closed  
14 session.

15 **(b) 1. The external child fatality and near fatality review panel may compel**  
16 **the attendance of individuals from an investigating agency to discuss**  
17 **cases that are being reviewed or discussed by the panel under**  
18 **paragraph (a) of this subsection in closed session. Any testimony**  
19 **provided by the individual in closed session shall not be used as**  
20 **evidence in any civil, criminal, or administrative hearing.**  
21 **2. An individual from an investigating agency shall not be compelled to**  
22 **appear before the panel to discuss a specific case until after final**  
23 **judgment was entered by the court in that case or the Commonwealth**  
24 **declines to prosecute the case.**

25 **(15)**~~[(13)]~~ Each member of the external child fatality and near fatality review panel, any  
26 person attending a closed panel session, and any person presenting information or  
27 records on an individual child fatality or near fatality shall not release information

1 or records not available under the Kentucky Open Records Act, KRS 61.870 to  
2 61.884 to the public.

3 ~~(16)~~~~[(14)]~~ A member of the external child fatality and near fatality review panel shall not  
4 be prohibited from making a good faith report to any state or federal agency of any  
5 information or issue that the panel member believes should be reported or  
6 disclosed~~[ in an effort]~~ to facilitate effectiveness and transparency in Kentucky's  
7 child protective services.

8 ~~(17)~~~~[(15)]~~ A member of the external child fatality and near fatality review panel shall not  
9 be held liable for any civil damages or criminal penalties pursuant to KRS 620.990  
10 as a result of any action taken or omitted in the performance of the member's duties  
11 pursuant to this section and KRS 620.050, except for violations of subsection  
12 ~~(13)~~~~[(11)]~~, ~~(14)~~~~[(12)]~~, or ~~(15)~~~~[(13)]~~ of this section.

13 ~~(18)~~~~[(16)]~~ The proceedings, records, opinions, and deliberations of the external child  
14 fatality and near fatality review panel shall be privileged and shall not be subject to  
15 discovery, subpoena, or introduction into evidence in any civil or criminal actions  
16 in any manner that would directly or indirectly identify specific persons or cases  
17 reviewed by the panel. Nothing in this subsection shall be construed to restrict or  
18 limit the right to discover or use in any civil action any evidence that is  
19 discoverable independent of the proceedings of the panel.

20 ~~(19)~~~~[(17)]~~ The Legislative Oversight and Investigations Committee of the Kentucky  
21 General Assembly shall conduct an annual evaluation of the external child fatality  
22 and near fatality review panel established pursuant to this section to monitor the  
23 operations, procedures, and recommendations of the panel and shall report its  
24 findings to the General Assembly.

25 ➔SECTION 9. A NEW SECTION OF KRS CHAPTER 211 IS CREATED TO  
26 READ AS FOLLOWS:

27 **(1) As used in this section:**

- 1        (a) "Department" means Department for Community Based Services within the  
2            Cabinet for Health and Family Services;
- 3        (b) "Plan of Safe Care" means a safety-focused and preventive plan developed  
4            and administered by the department to address the:
- 5            1. Health, safety, and developmental needs of a substance-exposed  
6            infant; and
- 7            2. Treatment, recovery, and support needs of a substance-exposed infant  
8            family or caregiver;
- 9        (c) "Plan of Safe Care Safety Assessment Response" means a preventive child  
10            safety response plan developed and administered by the department and  
11            authorized under this section; and
- 12        (d) "Substance-exposed infant" means an infant identified at birth as having  
13            been prenatally exposed to alcohol, illegal substances, or misused  
14            prescription medications, regardless of whether the infant exhibits  
15            withdrawal symptoms or receives a diagnosis of Neonatal Abstinence  
16            Syndrome or Fetal Alcohol Spectrum Disorder. Identification as a  
17            substance-exposed infant shall not by itself constitute abuse or neglect  
18            absent findings under KRS 600.020.
- 19        (2) A health care provider or facility involved in the delivery or care of an infant  
20            shall notify the department when an infant is suspected to be a substance-exposed  
21            infant.
- 22        (3) Participation in a Plan of Safe Care shall be supportive and preventive in nature.  
23            Participation may be required as reasonably necessary to ensure child safety  
24            under the department's authority but shall not alone constitute a finding of abuse  
25            or neglect.
- 26        (4) Notwithstanding KRS 620.030, a notification involving a substance-exposed  
27            infant shall be accepted for assessment under the Plan of Safe Care Safety

1 Assessment Response regardless of whether the notification alleges abuse or  
2 neglect.

3 (5) Notification under this section shall:

4 (a) Not require a determination or allegation of abuse or neglect;

5 (b) Not be limited to infants diagnosed with Neonatal Abstinence Syndrome or  
6 Fetal Alcohol Spectrum Disorder; and

7 (c) Be made for preventive safety and service coordination purposes and not for  
8 criminal prosecution.

9 (6) The department shall, when a substance-exposed infant is born in a hospital or  
10 birthing center facility:

11 (a) Conduct a safety-focused assessment to determine the safety and needs of  
12 the substance-exposed infant and of any other children residing in the  
13 household;

14 (b) Attempt initial contact with the caregiver and infant prior to discharge, with  
15 consent of the caregiver or consistent with authority pursuant to KRS  
16 Chapter 620. Initial contact shall not constitute completion of the Plan of  
17 Safe Care assessment;

18 (c) Attempt post discharge contact with the caregiver and infant if contact does  
19 not occur prior to discharge with consent of the caregiver or consistent with  
20 authority pursuant to KRS Chapter 620;

21 (d) Complete the Plan of Safe Care and the Plan of Safe Care Safety  
22 Assessment Response within a timeline established by the department;

23 (e) Document safety findings prior to case closure and verify through direct  
24 contact if the infant and other children may safely remain in the home  
25 environment; and

26 (f) Collect aggregate data regarding implementation outcomes and compliance  
27 related to requirements of the Child Abuse Prevention and Treatment Act

1           42 U.S.C. sec. 5106a and submit a report on the data by December 1, 2026,  
 2           and annually thereafter to the Legislative Research Committee for referral  
 3           to the Interim Joint Committees on Families and Children and Health  
 4           Services.

5   (7) The department may utilize public or private service providers to implement this  
 6   section.

7           ➔SECTION 10. A NEW SECTION OF KRS CHAPTER 625 IS CREATED TO  
 8 READ AS FOLLOWS:

9   (1) By December 1, 2026, and annually thereafter until December 1, 2029, the  
 10   Administrative Office of the Courts shall collect data from each Circuit Court  
 11   detailing the length of time that lapses from the filing of each petition for  
 12   involuntary termination of parental rights until the final disposition of the case.  
 13   The data shall be reported to the Legislative Research Commission for referral to  
 14   the Interim Joint Committees on Judiciary and Families and Children.

15   (2) By December 1, 2026, and annually thereafter until December 1, 2029, the  
 16   Cabinet for Health and Family Services shall collect data detailing the length of  
 17   time that each child remains in foster care placement prior to the filing of a  
 18   petition for involuntary termination of parental rights. The data shall be  
 19   delineated by county and reported to the Legislative Research Commission for  
 20   referral to the Interim Joint Committees on Judiciary and Families and Children.

21           ➔Section 11. KRS 508.090 is amended to read as follows:

22   As used~~[The following definitions apply]~~ in KRS 508.100 to 508.120 unless the context  
 23   requires otherwise~~[otherwise requires]:~~

24   (1) "Abuse or neglect" means

25       (a) The infliction of:

26           1. Physical pain~~[,]~~ or injury, including ingestion or inhalation of a  
 27           controlled substance; or

1           2.   Mental injury;~~[-]~~ or

2           **(b)** The deprivation of services by a person which are necessary to maintain the  
3           health and welfare of a person, or a situation in which an adult, living alone, is  
4           unable to provide or obtain for himself **or herself** the services which are  
5           necessary to maintain his **or her** health or welfare;~~[-]~~

6           **(2)** **"Controlled substance" has the same meaning as in KRS 218A.010; and**

7           **(3)** "Physically helpless" and "mentally helpless" means a person who lacks substantial  
8           capacity to defend himself **or herself** or solicit protection from law enforcement  
9           agencies.

10          ➔Section 12. KRS 508.100 is amended to read as follows:

11         (1) A person is guilty of criminal abuse **or neglect** in the first degree when he **or she**  
12         intentionally abuses **or neglects** another person or permits another person of whom  
13         he **or she** has actual custody to be abused **or neglected** and thereby:

14         (a) Causes serious physical injury;

15         (b) Places him **or her** in a situation that may cause him **or her** serious physical  
16         injury; or

17         (c) Causes torture, cruel confinement, or cruel punishment;

18         to a person **under thirteen (13) years old**~~[twelve (12) years of age or less]~~, or who  
19         is physically helpless or mentally helpless.

20         (2) Criminal abuse **or neglect** in the first degree is a Class C felony unless the victim is  
21         under **thirteen (13)**~~[twelve (12)]~~ years old, in which case it is a Class B felony.

22          ➔Section 13. KRS 508.110 is amended to read as follows:

23         (1) A person is guilty of criminal abuse **or neglect** in the second degree when he **or she**  
24         wantonly abuses **or neglects** another person or permits another person of whom he  
25         **or she** has actual custody to be abused **or neglected** and thereby:

26         (a) Causes serious physical injury; or

27         (b) Places him **or her** in a situation that may cause him **or her** serious physical

1 injury; or

2 (c) Causes torture, cruel confinement, or cruel punishment;

3 to a person **under thirteen (13) years old**~~[twelve (12) years of age or less]~~, or who  
4 is physically helpless or mentally helpless.

5 (2) Criminal abuse **or neglect** in the second degree is a Class D felony.

6 ➔Section 14. KRS 508.120 is amended to read as follows:

7 (1) A person is guilty of criminal abuse **or neglect** in the third degree when he **or she**  
8 recklessly abuses **or neglects** another person or permits another person of whom he  
9 **or she** has actual custody to be abused **or neglected** and thereby:

10 (a) Causes serious physical injury; or

11 (b) Places him **or her** in a situation that may cause him **or her** serious physical  
12 injury; or

13 (c) Causes torture, cruel confinement, or cruel punishment;

14 to a person **under thirteen (13) years old**~~[twelve (12) years of age or less]~~, or who  
15 is physically helpless or mentally helpless.

16 (2) Criminal abuse **or neglect** in the third degree is a Class A misdemeanor **unless the**  
17 **person is under thirteen (13) years old and the person has suffered serious**  
18 **physical injury by the ingestion or inhalation of a controlled substance, in which**  
19 **case it is a Class D felony.**

20 ➔Section 15. KRS 15.440 is amended to read as follows:

21 (1) Each unit of government that meets the following requirements shall be eligible to  
22 share in the distribution of funds from the Law Enforcement Foundation Program  
23 fund:

24 (a) Employs one (1) or more police officers;

25 (b) Pays every police officer at least the minimum federal wage;

26 (c) Requires all police officers to have, at a minimum, a high school degree, or its  
27 equivalent as determined by the council, except that each police officer

1 employed prior to the date on which the officer's police department was  
2 included as a participant under KRS 15.410 to 15.510 shall be deemed to have  
3 met the requirements of this subsection;

- 4 (d) 1. Requires all police officers to successfully complete a basic training  
5 course of nine hundred twenty-eight (928) hours' duration within one (1)  
6 year of the date of employment at a school certified or recognized by the  
7 council, which may provide a different number of hours of instruction as  
8 established in this paragraph, except that each police officer employed  
9 prior to the date on which the officer's police department was included  
10 as a participant under KRS 15.410 to 15.510 shall be deemed to have  
11 met the requirements of this subsection.
- 12 2. As the exclusive method by which the number of hours required for  
13 basic training courses shall be modified from that which is specifically  
14 established by this paragraph, the council may, by the promulgation of  
15 administrative regulations in accordance with the provisions of KRS  
16 Chapter 13A, explicitly set the exact number of hours for basic training  
17 at a number different from nine hundred twenty-eight (928) hours based  
18 upon a training curriculum approved by the Kentucky Law Enforcement  
19 Council as determined by a validated job task analysis.
- 20 3. If the council sets an exact number of hours different from nine hundred  
21 twenty-eight (928) in an administrative regulation as provided by this  
22 paragraph, it shall not further change the number of hours required for  
23 basic training without promulgating administrative regulations in  
24 accordance with the provisions of KRS Chapter 13A.
- 25 4. Nothing in this paragraph shall be interpreted to prevent the council,  
26 pursuant to its authority under KRS 15.330, from approving training  
27 schools with a curriculum requiring attendance of a number of hours

1           that exceeds nine hundred twenty-eight (928) hours or the number of  
2           hours established in an administrative regulation as provided by  
3           subparagraphs 2. and 3. of this paragraph. However, the training  
4           programs and schools for the basic training of law enforcement  
5           personnel conducted by the department pursuant to KRS 15A.070 shall  
6           not contain a curriculum that requires attendance of a number of hours  
7           for basic training that is different from nine hundred twenty-eight (928)  
8           hours or the number of hours established in an administrative regulation  
9           promulgated by the council pursuant to the provisions of KRS Chapter  
10          13A as provided by subparagraphs 2. and 3. of this paragraph.

11          5.   KRS 15.400 and 15.404(1) and subparagraphs 1. to 4. of this paragraph  
12          to the contrary notwithstanding, the council may, through the  
13          promulgation of administrative regulations in accordance with KRS  
14          Chapter 13A, approve basic training credit for:

15           a.   Years of service credit as a law enforcement officer with previous  
16           service in another state; and

17           b.   Basic training completed in another state.

18          6.   KRS 15.400 and 15.404(1) and subparagraphs 1. to 4. of this paragraph  
19          to the contrary notwithstanding, the council may, through the  
20          promulgation of administrative regulations in accordance with KRS  
21          Chapter 13A, approve basic training credit for:

22           a.   Completion of eight hundred forty-eight (848) hours of training at  
23           a school established pursuant to KRS 15A.070;

24           b.   A minimum of fifteen (15) years of experience as a certified law  
25           enforcement instructor at a school established pursuant to KRS  
26           15A.070;

27           c.   Completion of an average of forty (40) hours of Kentucky Law

- 1 Enforcement Council approved in-service training annually from  
2 January 1, 1997, through January 1, 2020;
- 3 d. Three (3) years of active, full-time service as a:
- 4 i. City, county, urban-county, charter county, consolidated  
5 local, or unified local government police officer;
- 6 ii. Sheriff's deputy, excluding special deputies appointed under  
7 KRS 70.045;
- 8 iii. Department of Kentucky State Police officer; or
- 9 iv. Kentucky Department of Fish and Wildlife Resources game  
10 warden exercising peace officer powers under KRS 150.090;  
11 and
- 12 e. Completion of the:
- 13 i. Twenty-four (24) hour legal update Penal Code course;
- 14 ii. Sixteen (16) hour legal update constitutional procedure  
15 course; and
- 16 iii. Forty (40) hour basic officer skills course within one (1) year  
17 prior to applying for certification;
- 18 (e) Requires all police officers to successfully complete each calendar year an in-  
19 service training course, appropriate to the officer's rank and responsibility and  
20 the size and location of the officer's police department, of forty (40) hours'  
21 duration, at a school certified or recognized by the council which may include  
22 a four (4) hour course which meets the requirements of paragraph (j) of this  
23 subsection. This in-service training requirement shall be waived for the period  
24 of time that a peace officer is serving on active duty in the United States  
25 Armed Forces. This waiver shall be retroactive for peace officers from the  
26 date of September 11, 2001;
- 27 (f) Complies with all provisions of law applicable to police officers or police

1 departments, including:

2 1. Transmission of data to the centralized criminal history record  
3 information system as required by KRS 17.150; and

4 2. Transmission of reports as required by KRS 15.391;

5 (g) Complies with all rules and regulations, appropriate to the size and location of  
6 the police department issued by the cabinet to facilitate the administration of  
7 the fund and further the purposes of KRS 15.410 to 15.510;

8 (h) Possesses a written policy and procedures manual related to domestic violence  
9 for law enforcement agencies that has been approved by the cabinet. The  
10 policy shall comply with the provisions of KRS 403.715 to 403.785. The  
11 policy shall include:

12 1. A purpose statement;

13 2. Definitions;

14 3. Supervisory responsibilities;

15 4. Procedures for twenty-four (24) hour access to protective orders;

16 5. Procedures for enforcement of court orders or relief when protective  
17 orders are violated;

18 6. Procedures for timely and contemporaneous reporting of adult abuse and  
19 domestic violence to the Cabinet for Health and Family Services,  
20 Department for Community Based Services;

21 7. Victim rights, assistance, and service responsibilities; and

22 8. Duties related to timely completion of records;

23 (i) Possesses ~~by January 1, 2023,~~ a written policy and procedures manual  
24 related to sexual assault examinations that meets the standards provided by,  
25 and has been approved by, the cabinet, and which includes:

26 1. A requirement that evidence collected as a result of an examination  
27 performed under KRS 216B.400 be taken into custody within five (5)

- 1 days of notice from the collecting facility that the evidence is available  
2 for retrieval;
- 3 2. A requirement that evidence received from a collecting facility relating  
4 to an incident which occurred outside the jurisdiction of the police  
5 department be transmitted to a police department with jurisdiction  
6 within ten (10) days of its receipt by the police department;
- 7 3. A requirement that all evidence retrieved from a collecting facility under  
8 this paragraph be transmitted to the Department of Kentucky State  
9 Police forensic laboratory within thirty (30) days of its receipt by the  
10 police department;
- 11 4. A requirement that a suspect standard, if available, be transmitted to the  
12 Department of Kentucky State Police forensic laboratory with the  
13 evidence received from a collecting facility;
- 14 5. A process for notifying the victim from whom the evidence was  
15 collected of the progress of the testing, whether the testing resulted in a  
16 match to other DNA samples, and if the evidence is to be destroyed. The  
17 policy may include provisions for delaying notice until a suspect is  
18 apprehended or the office of the Commonwealth's attorney consents to  
19 the notification, but shall not automatically require the disclosure of the  
20 identity of any person to whom the evidence matched; and
- 21 6. A requirement that DNA samples collected as a result of an examination  
22 performed under KRS 216B.400 that are voluntarily submitted solely for  
23 elimination purposes shall not be checked against any DNA index,  
24 retained, or included in any DNA index;~~and~~
- 25 (j) Requires all police officers to successfully complete by December 31, 2022,  
26 and every two (2) years thereafter, a training course certified by the council of  
27 not less than four (4) hours in emergency vehicle operation; **and**

1 (k) Possesses by December 1, 2026, a written policy and procedures manual  
2 related to pediatric ingestion or inhalation of controlled substances that  
3 includes a requirement that:

4 1. In each case where a child:

5 a. Is suspected to have ingested or inhaled a controlled substance  
6 as defined in KRS 218A.010; and

7 b. Requires medical attention;

8 a police officer shall seek a search warrant for a urine, blood, or other  
9 appropriate test for the person who was responsible for the supervision  
10 of the child when the controlled substance was ingested or inhaled;

11 and

12 2. Any test sought under subparagraph 1. of this paragraph shall test for  
13 the presence of a wide range of substances that are commonly abused,  
14 including but not limited to:

15 a. Buprenorphine;

16 b. Cocaine;

17 c. Fentanyl;

18 d. Marijuana;

19 e. Methadone

20 f. Methamphetamine;

21 g. Tetrahydrocannabinol;

22 h. Xylazine; and

23 i. Any salt, compound, or derivative of any substance listed in  
24 subdivisions a. to h. of this subparagraph.

25 (2) A unit of government which meets the criteria of this section shall be eligible to  
26 continue sharing in the distribution of funds from the Law Enforcement Foundation  
27 Program fund only if the police department of the unit of government remains in

1 compliance with the requirements of this section.

2 (3) Deputies employed by a sheriff's office shall be eligible to participate in the  
3 distribution of funds from the Law Enforcement Foundation Program fund  
4 regardless of participation by the sheriff.

5 (4) Failure to meet a deadline established in a policy adopted pursuant to subsection  
6 (1)(i) of this section for the retrieval or submission of evidence shall not be a basis  
7 for a dismissal of a criminal action or a bar to the admissibility of the evidence in a  
8 criminal action.

9 ➔Section 16. KRS 15.334 is amended to read as follows:

10 (1) The Kentucky Law Enforcement Council shall approve mandatory training subjects  
11 to be taught to all students attending a law enforcement basic training course that  
12 include but are not limited to:

13 (a) Abuse, neglect, and exploitation of the elderly and other crimes against the  
14 elderly, including the use of multidisciplinary teams in the investigation and  
15 prosecution of crimes against the elderly;

16 (b) The dynamics of domestic violence, pediatric abusive head trauma, as defined  
17 in KRS 620.020, child physical and sexual abuse, and rape; child  
18 development; the effects of abuse and crime on adult and child victims,  
19 including the impact of abuse and violence on child development; legal  
20 remedies for protection; lethality and risk issues; profiles of offenders and  
21 offender treatment; model protocols for addressing domestic violence, rape,  
22 pediatric abusive head trauma, as defined in KRS 620.020, and child abuse;  
23 available community resources and victim services; and reporting  
24 requirements. This training shall be developed in consultation with legal,  
25 victim services, victim advocacy, and mental health professionals with  
26 expertise in domestic violence, child abuse, and rape. Training in recognizing  
27 pediatric abusive head trauma may be designed in collaboration with

- 1 organizations and agencies that specialize in the prevention and recognition of  
 2 pediatric abusive head trauma approved by the secretary of the Cabinet for  
 3 Health and Family Services;
- 4 (c) Human immunodeficiency virus infection and acquired immunodeficiency  
 5 virus syndrome;
- 6 (d) Identification and investigation of, responding to, and reporting bias-related  
 7 crime, victimization, or intimidation that is a result of or reasonably related to  
 8 race, color, religion, sex, or national origin;
- 9 (e) The characteristics and dynamics of human trafficking, state and federal laws  
 10 relating to human trafficking, the investigation of cases involving human  
 11 trafficking, including but not limited to screening for human trafficking, and  
 12 resources for assistance to the victims of human trafficking;
- 13 (f) ~~Beginning January 1, 2017, the council shall require that a law enforcement~~  
 14 ~~basic training course include~~ At least eight (8) hours of training relevant to  
 15 sexual assault; ~~and~~
- 16 (g) Education on female genital mutilation as defined in KRS 508.125, including  
 17 the risk factors associated with female genital mutilation, the criminal  
 18 penalties for committing female genital mutilation, and the psychological and  
 19 health effects on a victim of female genital mutilation; ***and***
- 20 ***(h) The characteristics, dynamics, and investigation of pediatric ingestion or***  
 21 ***inhalation of controlled substances.***
- 22 (2) (a) The council shall develop and approve mandatory in-service training courses  
 23 to be presented to all certified peace officers. The council may promulgate  
 24 administrative regulations in accordance with KRS Chapter 13A setting forth  
 25 the deadlines by which all certified peace officers shall attend the mandatory  
 26 in-service training courses.
- 27 (b) ~~Beginning January 1, 2017,~~ The council shall establish a forty (40) hour

1 sexual assault investigation training course. ~~[After January 1, 2019, ]~~Agencies  
2 shall maintain officers on staff who have completed the forty (40) hour sexual  
3 assault investigation training course in accordance with the following:

- 4 1. Agencies with more than ten (10) but fewer than twenty-one (21) full-  
5 time officers shall maintain one (1) officer who has completed the forty  
6 (40) hour sexual assault investigation training course;
- 7 2. Agencies with twenty-one (21) or more but fewer than fifty-one (51)  
8 full-time officers shall maintain at least two (2) officers who have  
9 completed the forty (40) hour sexual assault investigation training  
10 course; and
- 11 3. Agencies with fifty-one (51) or more full-time officers shall maintain at  
12 least four (4) officers who have completed the sexual assault  
13 investigation course.

14 (c) An agency shall not make an officer directly responsible for the investigation  
15 or processing of sexual assault offenses unless that officer has completed the  
16 forty (40) hour sexual assault investigation training course.

17 (d) The council may, upon application by any agency, grant an exemption from  
18 the training requirements set forth in paragraph (b) of this subsection if that  
19 agency, by limitations arising from its scope of authority, does not conduct  
20 sexual assault investigations.

21 (e) Any agency failing to comply with paragraph (b) or (c) of this subsection  
22 shall, from the date the noncompliance commences, have one (1) year to  
23 reestablish the minimum number of trained officers required.

24 (3) (a) The Justice and Public Safety Cabinet shall provide training on the subjects  
25 of:

26 1. Domestic violence and abuse~~[and may do so utilizing currently~~  
27 ~~available technology]~~. All certified peace officers shall be required to

1 complete this training at least once every two (2) years; and

2 2. Pediatric ingestion or inhalation of controlled substances. All certified  
 3 peace officers shall be required to complete this training at least once  
 4 every three (3) years.

5 (b) Training required under paragraph (a) of this subsection may be completed  
 6 utilizing currently available technology.

7 (4) The council shall promulgate administrative regulations in accordance with KRS  
 8 Chapter 13A to establish mandatory basic training and in-service training courses.

9 ➔Section 17. KRS 194A.545 is amended to read as follows:

10 (1) The secretary for health and family services shall develop an initial training course  
 11 and continuing education courses for employees of the Department for Community  
 12 Based Services concerning the:

13 (a) Dynamics of domestic violence and elder abuse, neglect, and exploitation;  
 14 effects of domestic violence and elder abuse, neglect, and exploitation on  
 15 adult and child victims;

16 (b) Legal remedies for protection;

17 (c) Lethality and risk issues;

18 (d) Model protocols for addressing domestic violence; and

19 (e) Available community resources and victim services; and reporting  
 20 requirements.

21 The training shall be developed in consultation with legal, victim services, victim  
 22 advocacy, and mental health professionals with an expertise in domestic violence.

23 (2) Each person employed by the Department for Community Based Services who  
 24 provides supervisory or direct service at the local, district, or state level shall  
 25 successfully complete the initial training course and, at least once every two (2)  
 26 years, the continuing education course developed under subsection (1) of this  
 27 section.

1 (3) The secretary is encouraged to include an educational component covering the  
2 recognition and prevention of:

3 (a) Pediatric abusive head trauma, as defined in KRS 620.020; ~~and~~;

4 (b) **Pediatric ingestion or inhalation of controlled substances;**

5 as part of the initial training and continuing education for Department for  
6 Community Based Services front-line child protection staff.

7 ➔Section 18. KRS 199.896 is amended to read as follows:

8 (1) ~~A~~~~No~~ person, association, or organization shall ***not*** conduct, operate, maintain, or  
9 advertise any child-care center without obtaining a license as provided in KRS  
10 199.892 to 199.896.

11 (2) The cabinet may promulgate administrative regulations pursuant to KRS Chapter  
12 13A relating to license fees and may, in the administrative regulations, establish  
13 standards of care and service for a child-care center, criteria for the denial of a  
14 license if criminal records indicate convictions that may impact the safety and  
15 security of children in care, and procedures for enforcement of penalties which are  
16 not in contravention of this section.

17 (3) Each initial application for a license shall be made to the cabinet and shall be  
18 accompanied by a fee that shall not exceed administrative costs of the program to  
19 the cabinet and shall be renewable annually upon expiration and reapplication when  
20 accompanied by a renewal fee that shall not exceed administrative costs of the  
21 program to the cabinet. Regular licenses and renewals thereof shall expire one (1)  
22 year from their effective date.

23 (4) ~~A~~~~No~~ child-care center shall ***not*** be refused a license or have its license revoked for  
24 failure to meet standards set by the secretary until after the expiration of a period  
25 not to exceed six (6) months from the date of the first official notice that the  
26 standards have not been met. ~~If, however,~~ the cabinet has probable cause to  
27 believe that an immediate threat to the public health, safety, or welfare exists, the

1 cabinet may take emergency action pursuant to KRS 13B.125. All administrative  
2 hearings conducted under authority of KRS 199.892 to 199.896 shall be conducted  
3 in accordance with KRS Chapter 13B.

4 (5) If, upon inspection or investigation, the inspector general finds that a child-care  
5 center licensed under this section has violated the administrative regulations,  
6 standards, or requirements of the cabinet, the inspector general shall issue a  
7 statement of deficiency to the center containing:

8 (a) A statement of fact;

9 (b) A statement of how an administrative regulation, standard, or requirement of  
10 the cabinet was violated; and

11 (c) The timeframe, negotiated with the child-care center, within which a violation  
12 is to be corrected, except that a violation that poses an immediate threat to the  
13 health, safety, or welfare of children in the center shall be corrected in no  
14 event later than five (5) working days from the date of the statement of  
15 deficiency.

16 (6) The Cabinet for Health and Family Services, in consultation with the Office of the  
17 Inspector General, shall establish by administrative regulations promulgated in  
18 accordance with KRS Chapter 13A an informal dispute resolution process through  
19 which a child-care provider may dispute licensure deficiencies that have an adverse  
20 effect on the child-care provider's license.

21 (7) A child-care center shall have the right to appeal to the Cabinet for Health and  
22 Family Services under KRS Chapter 13B any action adverse to its license or the  
23 assessment of a civil penalty issued by the inspector general as the result of a  
24 violation contained in a statement of deficiency within twenty (20) days of the  
25 issuance of the action or assessment of the civil penalty. An appeal shall not act to  
26 stay the correction of a violation.

27 (8) In assessing the civil penalty to be levied against a child-care center for a violation

1 contained in a statement of deficiency issued under this section, the inspector  
2 general or the inspector general's designee shall take into consideration the  
3 following factors:

- 4 (a) The gravity of the threat to the health, safety, or welfare of children posed by  
5 the violation;
- 6 (b) The number and type of previous violations of the child-care center;
- 7 (c) The reasonable diligence exercised by the child-care center and efforts to  
8 correct the violation; and
- 9 (d) The amount of assessment necessary to assure immediate and continued  
10 compliance.

11 (9) Upon a child-care center's failure to take action to correct a violation of the  
12 administrative regulations, standards, or requirements of the cabinet contained in a  
13 statement of deficiency, or at any time when the operation of a child-care center  
14 poses an immediate threat to the health, safety, or welfare of children in the center,  
15 and the child-care center continues to operate after the cabinet has taken emergency  
16 action to deny, suspend, or revoke its license, the cabinet or the cabinet's designee  
17 shall take at least one (1) of the following actions against the center:

- 18 (a) Institute proceedings to obtain an order compelling compliance with the  
19 administrative regulations, standards, and requirements of the cabinet;
- 20 (b) Institute injunctive proceedings in Circuit Court to terminate the operation of  
21 the center;
- 22 (c) Institute action to discontinue payment of child-care subsidies; or
- 23 (d) Suspend or revoke the license or impose other penalties provided by law.

24 (10) Upon request of any person, the cabinet shall provide information regarding the  
25 denial, revocation, suspension, or violation of any type of child-care center license  
26 of the operator. Identifying information regarding children and their families shall  
27 remain confidential.

- 1 (11) The cabinet shall provide, upon request, public information regarding the  
2 inspections of and the plans of correction for the child-care center within the past  
3 year. All information distributed by the cabinet under this subsection shall include a  
4 statement indicating that the reports as provided under this subsection from the past  
5 five (5) years are available from the child-care center upon the parent's, custodian's,  
6 guardian's, or other interested person's request.
- 7 (12) All fees collected under the provisions of KRS 199.892 to 199.896 for license and  
8 certification applications shall be paid into the State Treasury and credited to a  
9 special fund for the purpose of administering KRS 199.892 to 199.896 including the  
10 payment of expenses of and to the participants in child-care workshops. The funds  
11 collected are hereby appropriated for the use of the cabinet. The balance of the  
12 special fund shall lapse to the general fund at the end of each biennium.
- 13 (13) Any advertisement for child-care services shall include the address of where the  
14 service is being provided.
- 15 (14) All inspections of licensed and unlicensed child-care centers by the Cabinet for  
16 Health and Family Services shall be unannounced.
- 17 (15) All employees and owners of a child-care center who provide care to children shall  
18 demonstrate within the first three (3) months of employment completion of at least  
19 a total of six (6) hours of orientation in the following areas:
- 20 (a) Basic health, safety, and sanitation;
- 21 (b) Recognizing and reporting child abuse; and
- 22 (c) Developmentally appropriate child-care practice.
- 23 (16) All employees and owners of a child-care center who provide care to children shall  
24 annually demonstrate to the department completion of at least six (6) hours of  
25 training in child development. These hours shall include but are not limited to:
- 26 (a) One and one-half (1.5) hours one (1) time every five (5) years of continuing  
27 education in the recognition and prevention of pediatric abusive head trauma,

1 as defined in KRS 620.020. Training in recognizing pediatric abusive head  
 2 trauma may be designed in collaboration with organizations and agencies that  
 3 specialize in the prevention and recognition of pediatric head trauma approved  
 4 by the secretary of the Cabinet for Health and Family Services; and

5 *(b) One (1) hour one (1) time every three (3) years of continuing education in*  
 6 *the recognition and prevention of pediatric ingestion or inhalation of*  
 7 *controlled substances.*

8 The continuing education~~[one and one half (1.5) hours]~~ required under this  
 9 subsection~~[section]~~ shall be included in the current number of required continuing  
 10 education hours.

11 (17) The Cabinet for Health and Family Services shall make available either through the  
 12 development or approval of a model training curriculum and training materials,  
 13 including video instructional materials, to cover the areas specified in subsection  
 14 (15) of this section. The cabinet shall develop or approve the model training  
 15 curriculum and training materials to cover the areas specified in subsection (15) of  
 16 this section.

17 (18) Child-care centers licensed pursuant to this section and family child-care homes  
 18 certified pursuant to KRS 199.8982 shall not use corporal physical discipline,  
 19 including the use of spanking, shaking, or paddling, as a means of punishment,  
 20 discipline, behavior modification, or for any other reason. For the purposes of this  
 21 section, "corporal physical discipline" means the deliberate infliction of physical  
 22 pain and does not include spontaneous physical contact that is intended to protect a  
 23 child from immediate danger.

24 (19) Child-care centers that provide instructional and educational programs for  
 25 preschool-aged children that operate for a maximum of twenty (20) hours per week  
 26 and that a child attends for no more than fifteen (15) hours per week shall:

27 (a) Notify the cabinet in writing that the center is operating;

- 1 (b) Meet all child-care center licensure requirements and administrative  
2 regulations related to employee background checks;
- 3 (c) Meet all child-care center licensure requirements and administrative  
4 regulations related to tuberculosis screenings; and
- 5 (d) Be exempt from all other child-care center licensure requirements and  
6 administrative regulations.
- 7 (20) Child-care centers that provide instructional and educational programs for  
8 preschool-aged children that operate for a maximum of twenty (20) hours per week  
9 and that a child attends for no more than ten (10) hours per week shall be exempt  
10 from all child-care licensure requirements and administrative regulations.
- 11 (21) Instructional programs for school-age children that offer, whether free or for a fee,  
12 recreational, educational, sports training, or vacation programs that include but are  
13 not limited to martial arts and dance programs to children under eighteen (18) years  
14 of age, that a child attends outside the presence of his or her parent or legal  
15 guardian, shall be exempt from all child-care licensure administrative regulations if  
16 the following criteria are met:
- 17 (a) The program provides primary instruction in a skill, talent, ability, expertise,  
18 or proficiency;
- 19 (b) The program operates outside the time period when school is in session,  
20 including before or after school hours, holidays, school breaks, teaching  
21 planning days, or summer vacation;
- 22 (c) The program does not advertise or otherwise represent that the program is a  
23 licensed child-care center or that the program offers child-care services;
- 24 (d) The program informs the parent or guardian:
- 25 1. That the program is not licensed by the cabinet; and  
26 2. About the physical risks a child may face while participating in the  
27 program; and

1 (e) The program conducts the following background checks for all program  
2 employees and volunteers who work with children:

- 3 1. Check of the child abuse and neglect records maintained by the cabinet;  
4 and
- 5 2. In-state criminal background information check from the Justice and  
6 Public Safety Cabinet or Administrative Office of the Courts.

7 (22) Directors and employees of child-care centers in a position that involves  
8 supervisory or disciplinary power over a minor, or direct contact with a minor, shall  
9 submit to a criminal record check in accordance with KRS 199.8965.

10 (23) A director or employee of a child-care center may be employed on a probationary  
11 status pending receipt of the criminal background check. Application for the  
12 criminal record of a probationary employee shall be made no later than the date  
13 probationary employment begins.

14 (24) The cabinet shall promulgate administrative regulations to identify emergency care  
15 providers who provide essential child-care services during an identified state of  
16 emergency.

17 (25) Notwithstanding any state law, administrative regulation, executive order, or  
18 executive directive to the contrary, during the 2020 or 2021 state of emergency  
19 declared by the Governor in response to COVID-19, including but not limited to  
20 any mutated strain of the COVID-19 virus, the cabinet shall not establish any  
21 restrictions on capacity for class or group size or the ability to combine classes and  
22 groups for capacity limits in the morning or afternoon that is below the number that  
23 was in effect on February 1, 2020.

24 ➔Section 19. KRS 199.8982 is amended to read as follows:

25 (1) (a) The cabinet shall establish a family child-care home certification program  
26 which shall be administered by the department. A family child-care provider  
27 shall apply for certification of the provider's home if the provider is caring for

1 four (4) to six (6) children unrelated to the provider. A family child-care  
2 provider caring for three (3) or fewer children may apply for certification of  
3 the provider's home at the discretion of the provider. Applicants for  
4 certification shall not have been found by the cabinet or a court to have  
5 abused or neglected a child, and shall meet the following minimum  
6 requirements:

- 7 1. Submit two (2) written character references;
- 8 2. Provide a written statement from a physician or advanced practice  
9 registered nurse that the applicant is in good health;
- 10 3. Submit to a criminal record check in accordance with KRS 199.8965;
- 11 4. Provide smoke detectors, a telephone, an adequate water supply,  
12 sufficient lighting and space, and a safe environment in the residence in  
13 which care is provided;
- 14 5. Provide a copy of the results of a tuberculosis risk assessment and the  
15 results of any appropriate follow-up with skin testing or chest X-ray for  
16 applicants who are determined to be at risk for developing tuberculosis  
17 in accordance with the recommendations of the Centers for Disease  
18 Control and Prevention within thirty (30) days of the date of application  
19 for certification; and
- 20 6. Demonstrate completion of a total of at least six (6) hours of training in  
21 the following areas within three (3) months of application for  
22 certification:
  - 23 a. Basic health, safety, and sanitation;
  - 24 b. Recognizing and reporting child abuse; and
  - 25 c. Developmentally appropriate child-care practice.

- 26 (b) Initial applications for certification shall be made to the department. The  
27 cabinet may promulgate administrative regulations to establish fees that shall

1 not exceed costs of the program to the cabinet, for proper administration of  
2 the certification. The department shall issue a certificate of operation upon  
3 inspecting the family child-care home and determining the provider's  
4 compliance with the provisions of this section. The inspection shall be  
5 unannounced. A certificate of operation issued pursuant to this section shall  
6 not be transferable and shall be renewed every two (2) years for a fee that  
7 shall not exceed costs of the program to the cabinet for renewal.

8 (c) A certified family child-care provider shall display the certificate of operation  
9 in a prominent place within the residence in which care is provided. The  
10 cabinet shall provide the certified family child-care provider with written  
11 information explaining the requirements for a family day-care provider and  
12 instructions on the method of reporting violations of the requirements which  
13 the provider shall distribute to parents.

14 (d) Upon request of any person, the cabinet shall provide information regarding  
15 the denial, revocation, suspension, or violation of any type of day-care license  
16 of the family child-care provider. Identifying information regarding children  
17 and their families shall remain confidential.

18 (e) The cabinet shall provide, upon request, public information regarding the  
19 inspections of and the plans of correction for the family child-care home  
20 within the past year. All information distributed by the cabinet under this  
21 paragraph shall include a statement indicating that the reports as provided  
22 under this paragraph from the past five (5) years are available from the family  
23 child-care home upon the parent's, custodian's, guardian's, or other interested  
24 person's request.

25 (f) The cabinet shall promulgate administrative regulations in accordance with  
26 KRS Chapter 13A which establish standards for the issuance, monitoring,  
27 release of information under this section and KRS 199.896 and 199.898,

1 renewal, denial, revocation, and suspension of a certificate of operation for a  
2 family child-care home and establish criteria for the denial of certification if  
3 criminal records indicate convictions that may impact the safety and security  
4 of children in care. A denial, suspension, or revocation of a certificate may be  
5 appealed, and upon appeal an administrative hearing shall be conducted in  
6 accordance with KRS Chapter 13B. If the cabinet has probable cause to  
7 believe that there is an immediate threat to the public health, safety, or  
8 welfare, the cabinet may take emergency action to suspend a certificate  
9 pursuant to KRS 13B.125. The cabinet shall promulgate administrative  
10 regulations to impose minimum staff-to-child ratios. The cabinet may  
11 promulgate administrative regulations relating to other requirements  
12 necessary to ensure minimum safety in family child-care homes. The cabinet  
13 shall develop and provide an ~~["]easy-to-read["]~~ guide containing the following  
14 information to a family child-care provider seeking certification of his or her  
15 home:

- 16 1. Certification requirements and procedures;
- 17 2. Information about available child-care training; and
- 18 3. Child-care food sponsoring organizations.

19 (2) Family child-care providers shall annually demonstrate to the department  
20 completion of at least six (6) hours of training in child development. These hours  
21 shall include but are not limited to:

- 22 (a) One and one-half (1.5) hours one (1) time every five (5) years of continuing  
23 education in the recognition and prevention of pediatric abusive head trauma,  
24 as defined in KRS 620.020. Training in recognizing pediatric abusive head  
25 trauma may be designed in collaboration with organizations and agencies that  
26 specialize in the prevention and recognition of pediatric abusive head trauma  
27 approved by the secretary of the Cabinet for Health and Family Services; and

1       **(b) One (1) hour one (1) time every three (3) years of continuing education in**  
 2       **the recognition and prevention of pediatric ingestion or inhalation of**  
 3       **controlled substances.**

4       The ~~one and one-half (1.5) hours of~~ continuing education required under this  
 5       **subsection**~~[section]~~ shall be included in the current number of required continuing  
 6       education hours.

7       (3) The cabinet shall, either through the development of or approval of, make available  
 8       a model training curriculum and training materials, including video instructional  
 9       materials, to cover the areas specified in subsection (1)(a)6. of this section. The  
 10       cabinet shall develop or approve the model training curriculum and training  
 11       materials to cover the areas specified in subsection (1)(a)6. of this section.

12       (4) (a) As used in this subsection "local government" means a city, county, charter  
 13       county, urban-county government, consolidated local government, or unified  
 14       local government.

15       (b) The provisions of this section shall supersede all local government ordinances  
 16       or regulations pertaining to the certification, licensure, and training  
 17       requirements related to the operation of family child-care homes and ~~a[n]o~~  
 18       local government shall ***not*** adopt or enforce any additional licensure,  
 19       certification, or training requirements specifically applicable to family child-  
 20       care homes in addition to those provided in this section. This subsection shall  
 21       not be interpreted or construed to exempt family child-care homes from  
 22       compliance with local government ordinances and regulations that apply  
 23       generally within the jurisdiction.

24       (c) Because the availability of adequate child-care as an essential business is vital  
 25       to the Commonwealth's state and local economies,~~[ by January 1, 2022,]~~ a  
 26       local government that has adopted land use regulations pursuant to KRS  
 27       Chapter 100 shall specifically name family child-care homes in the text of its

1 zoning regulations to authorize the board of adjustments to separately  
2 consider the applications of proposed family child-care homes for conditional  
3 use permits within the residential zones of the planning unit where they are  
4 not a fully permitted use pursuant to KRS 100.237.

5 ➔Section 20. KRS 216B.405 is amended to read as follows:

- 6 (1) As used in this section, "urgent treatment facility" or "urgent care facility" means a  
7 facility that delivers medically necessary ambulatory medical care apart from a  
8 hospital emergency department setting usually on a walk-in basis.
- 9 (2) All urgent treatment or urgent care facilities shall make available at least:
- 10 (a) One (1) time every two (2) years a continuing education course relating to the  
11 recognition and prevention of pediatric abusive head trauma, as defined in  
12 KRS 620.020. Training in recognizing pediatric abusive head trauma may be  
13 designed in collaboration with organizations and agencies that specialize in  
14 the prevention and recognition of pediatric abusive head trauma approved by  
15 the secretary of the Cabinet for Health and Family Services; and
- 16 (b) *One (1) hour one (1) time every three (3) years of continuing education in*  
17 *the recognition and prevention of pediatric ingestion or inhalation of*  
18 *controlled substances.*

19 ➔Section 21. KRS 311.601 is amended to read as follows:

- 20 (1) The board may adopt reasonable rules and regulations to effectuate and implement  
21 the provisions of KRS 311.550 to 311.620, including but not limited to regulations  
22 designed to ensure the continuing professional competency of present and future  
23 licensees. As an adjunct to the power conferred upon the board by this section, the  
24 board may require licensees to submit to interrogation as to the nature and extent of  
25 their postgraduate medical education and to require licensees found to be deficient  
26 in their efforts to keep abreast of new methods and technology~~[,]~~ to obtain  
27 additional instruction and training~~[therein]~~.

1 (2) As part of the continuing medical education which the board adopts to ensure  
2 continuing professional competency of present and future licensees, the board shall  
3 ensure that:

4 (a) Current practicing pediatricians, including those certified in medicine and  
5 pediatrics, radiologists, family practitioners, and those physicians practicing  
6 in an emergency medicine or urgent care setting, demonstrate completion of:

7 1. A one (1) time course of at least one (1) hour of continuing medical  
8 education approved by the board and covering the recognition and  
9 prevention of:

10 a. Pediatric abusive head trauma, as defined in KRS 620.020; ~~and~~,  
11 ~~prior to December 31, 2017~~

12 b. *Pediatric ingestion or inhalation of controlled substances.*

13 *The continuing education required under this subparagraph shall be*  
14 *included in the current number of required continuing education*  
15 *hours; and*

16 *2. At least one (1) hour of the required four and one-half (4.5) hours of*  
17 *approved continuing education relating to the use of the Kentucky All*  
18 *Schedule Prescription Electronic Reporting system, pain management,*  
19 *and addiction disorders shall include educating clients on safe*  
20 *storage, recognizing signs and symptoms of occult pediatric*  
21 *ingestions, and proper toxicology screening for commonly ingested*  
22 *controlled substances in pediatric patients; and*

23 (b) Future practicing pediatricians, including those certified in medicine and  
24 pediatrics, radiologists, family practitioners, and those physicians who will  
25 practice in an emergency medicine or urgent care setting, demonstrate  
26 completion of a:

27 1. One (1) time course of at least one (1) hour of continuing medical

1 education, or its equivalent, approved by the board and covering the  
2 recognition and prevention of:

3 a. Pediatric abusive head trauma, as defined in KRS 620.020; ~~and~~[-]

4 b. **Pediatric ingestion or inhalation of controlled substances;**

5 within five (5) years of licensure.

6 2. Future practicing pediatricians, including those certified in medicine and  
7 pediatrics, radiologists, family practitioners, and those physicians who  
8 will practice in an emergency medicine or urgent care setting may apply  
9 pediatric abusive head trauma **or pediatric ingestion or inhalation of**  
10 **controlled substances** curriculum taught in their medical school  
11 education to count towards the required one (1) hour of continuing  
12 medical education.

13 ➔Section 22. KRS 311.844 is amended to read as follows:

14 (1) To be licensed by the board as a physician assistant, an applicant shall:

15 (a) Submit a completed application form with the required fee;

16 (b) Be of good character and reputation;

17 (c) Be a graduate of an approved program; and

18 (d) Have passed an examination approved by the board within three (3) attempts.

19 (2) A physician assistant who is authorized to practice in another state and who is in  
20 good standing may apply for licensure by endorsement from the state of his or her  
21 credentialing if that state has standards substantially equivalent to those of this  
22 Commonwealth.

23 (3) A physician assistant's license shall be valid for two (2) years and shall be renewed  
24 by the board upon fulfillment of the following requirements:

25 (a) The holder shall be of good character and reputation;

26 (b) The holder shall provide evidence of completion, during the previous two (2)  
27 years, of a minimum of one hundred (100) hours of continuing education

1 approved by the American Medical Association, the American Osteopathic  
2 Association, the American Academy of Family Physicians, the American  
3 Academy of Physician Assistants, or by another entity approved by the board.  
4 The one hundred (100) hours of continuing education required by this  
5 paragraph shall include:

6 1. During the first two (2) years of licensure or prior to the first licensure  
7 renewal:

8 a. One and one-half (1.5) hours of continuing education in the  
9 prevention and recognition of pediatric abusive head trauma, as  
10 defined in KRS 620.020, except that graduating physician assistant  
11 students may apply pediatric abusive head trauma curriculum  
12 taught in their physician assistant graduate education to count  
13 towards the required one and one-half (1.5) hours; and

14 b. As a part of the continuing education requirements that the board  
15 adopts to ensure continuing competency of present and future  
16 licensees and the evolving needs of the growing senior population,  
17 the board shall ensure physician assistants licensed under KRS  
18 Chapter 311 complete a one (1) time course of one (1) hour of  
19 continuing education approved by the board. The course shall be  
20 completed one (1) time and count towards the current number of  
21 required continuing education hours, except that graduating  
22 student physician assistants may submit Alzheimer's and other  
23 forms of dementia course curriculum taught in their programs of  
24 study towards the required one (1) hour for approval. The course  
25 topics shall include but not be limited to:

26 i. The warning signs and symptoms of Alzheimer's disease and  
27 other forms of dementia;

- 1                   ii. The importance of early detection, diagnosis, and appropriate  
2                   communication techniques for discussion of memory  
3                   concerns with the patient and his or her caregiver;
- 4                   iii. Cognitive assessment and care planning billing codes;
- 5                   iv. The variety of tools used to assess a patient's cognition; and
- 6                   v. Current treatments that may be available to the patient;~~and~~
- 7                   2. If the license holder is authorized, pursuant to KRS 311.858(5), to  
8                   prescribe and administer Schedule III, IV, or V controlled substances, a  
9                   minimum of seven and one-half (7.5) hours of approved continuing  
10                  education relating to controlled substance diversion, pain management,  
11                  addiction disorders, use of the electronic system for monitoring  
12                  controlled substances established in KRS 218A.202, or any combination  
13                  of two (2) or more of these subjects; and
- 14                  3. At least one (1) hour one (1) time every three (3) years in the  
15                  recognition and prevention of pediatric ingestion or inhalation of  
16                  controlled substances; and
- 17                  (c) The holder shall provide proof of current certification with the National  
18                  Commission on Certification of Physician Assistants.
- 19                  ➔Section 23. KRS 311A.120 is amended to read as follows:
- 20                  (1) As a condition of being issued a certificate or license as an emergency medical  
21                  technician, advanced emergency medical technician, emergency medical responder,  
22                  or paramedic, the applicant shall have completed a Kentucky Board of Emergency  
23                  Medical Services-approved educational course on the transmission, control,  
24                  treatment, and prevention of the human immunodeficiency virus and acquired  
25                  immunodeficiency syndrome with an emphasis on appropriate behavior and attitude  
26                  change.
- 27                  (2) The board shall promulgate administrative regulations to require continuing

1 education for emergency medical technicians, advanced emergency medical  
 2 technicians, emergency medical responders, or paramedics that includes the  
 3 completion of:

4 (a) One (1) hour of board-approved continuing education covering the  
 5 recognition and prevention of pediatric abusive head trauma, as defined in  
 6 KRS 620.020, at least one (1) time every two (2) year renewal cycle; and

7 (b) One (1) hour one (1) time every three (3) years of board-approved  
 8 continuing education covering the recognition and prevention of pediatric  
 9 ingestion or inhalation of controlled substances.

10 The continuing education~~[one (1) hour]~~ required under this subsection~~[section]~~  
 11 shall be included in the current number of required continuing education hours.

12 (3) The board shall promulgate administrative regulations to require continuing  
 13 education for emergency medical technicians or first responders which includes the  
 14 completion of a training course of at least one (1) hour covering awareness of  
 15 sexual violence, including reporting options, care options, pre-hospital treatment  
 16 considerations, knowledge of regional rape crisis centers, and how to access the  
 17 SANE-ready list, at least one (1) time every two (2) year renewal cycle. The one (1)  
 18 hour of continuing education required under this subsection shall be included in the  
 19 current number of required continuing education hours.

20 ➔Section 24. KRS 314.073 is amended to read as follows:

21 (1) As a prerequisite for license renewal, all individuals licensed under provisions of  
 22 this chapter shall be required to document continuing competency during the  
 23 immediate past licensure period as prescribed in regulations promulgated by the  
 24 board.

25 (2) The continuing competency requirement shall be documented and reported as set  
 26 forth by the board in administrative regulations promulgated in accordance with  
 27 KRS Chapter 13A.

- 1 (3) The board shall approve providers of continuing education. The approval may  
 2 include recognition of providers approved by national organizations and state  
 3 boards of nursing with comparable standards. Standards for these approvals shall be  
 4 set by the board in administrative regulations promulgated in accordance with the  
 5 provisions of KRS Chapter 13A.
- 6 (4) The board shall work cooperatively with professional nursing organizations,  
 7 approved nursing schools, and other potential sources of continuing education  
 8 programs to ensure that adequate continuing education offerings are available  
 9 statewide. The board may enter into contractual agreements to implement the  
 10 provisions of this section.
- 11 (5) The board shall be responsible for notifying applicants for licensure and licensees  
 12 applying for license renewal, of continuing competency requirements.
- 13 (6) As a part of the continuing education requirements that the board adopts to ensure  
 14 continuing competency of present and future licensees, the board shall ensure  
 15 practitioners licensed under KRS Chapter 314 complete:
- 16 (a) A one-time training course of at least one and one-half (1.5) hours covering  
 17 the recognition and prevention of pediatric abusive head trauma, as defined in  
 18 KRS 620.020; and
- 19 (b) *One (1) hour one (1) time every three (3) years covering the recognition and*  
 20 *prevention of pediatric ingestion or inhalation of controlled substances.*
- 21 The continuing education~~[one and one half (1.5) hours]~~ required under this  
 22 subsection~~[section]~~ shall be included in the current number of required continuing  
 23 education hours.
- 24 (7) As a part of the continuing education requirements that the board adopts to ensure  
 25 continuing competency of present and future licensees and the evolving needs of  
 26 the growing senior population, the board shall ensure practitioners licensed under  
 27 KRS Chapter 314 complete a one (1) time course of one (1) hour of continuing

1 education approved by the board. The course shall be completed one (1) time and  
2 count towards the current number of required continuing education hours, except  
3 that graduating student practitioners may submit Alzheimer's and other forms of  
4 dementia course curriculum taught in their programs of study towards the required  
5 one (1) hour for approval. The course topics shall include but not be limited to:

- 6 (a) The warning signs and symptoms of Alzheimer's disease and other forms of  
7 dementia;
- 8 (b) The importance of early detection, diagnosis, and appropriate communication  
9 techniques for discussion of memory concerns with the patient and his or her  
10 caregiver;
- 11 (c) Cognitive assessment and care planning billing codes;
- 12 (d) The variety of tools used to assess a patient's cognition; and
- 13 (e) Current treatments that may be available to the patient.

14 (8) In order to offset administrative costs incurred in the implementation of the  
15 mandatory continuing competency requirements, the board may charge reasonable  
16 fees as established by regulation in accordance with the provisions of KRS Chapter  
17 13A.

18 (9) The continuing competency requirements shall include at least five (5) contact  
19 hours in pharmacology continuing education for any person licensed as an  
20 advanced practice registered nurse.

21 ➔Section 25. KRS 335.130 is amended to read as follows:

22 (1) Each certified social worker, licensed social worker and licensed clinical social  
23 worker shall renew his or her license every three (3) years, and shall pay the board  
24 a renewal fee as established by the board by promulgation of an administrative  
25 regulation.

26 (2) Licensees whose licenses are renewed by the board shall be issued a renewal  
27 license.

1 (3) Renewal fees shall be waived for any licensee actually serving in the Armed Forces  
 2 of the United States. The waiver shall be effective for six (6) months following  
 3 honorable discharge, separation, or release from the Armed Forces, after which  
 4 period a license shall be considered lapsed.

5 (4) The board may, at its discretion, require continuing education as a condition of  
 6 license renewal.

7 (5) If the board requires continuing education as authorized in subsection (4), the  
 8 continuing education requirements for each licensed social worker and each  
 9 licensed clinical social worker shall include:

10 (a) One and one-half (1.5) hours of continuing education approved by the board  
 11 and covering the recognition and prevention of pediatric abusive head trauma,  
 12 as defined in KRS 620.020, at least one (1) time every six (6) years; and

13 (b) *One (1) hour one (1) time every three (3) years of continuing education*  
 14 *approved by the board and covering the recognition and prevention of*  
 15 *pediatric ingestion or inhalation of controlled substances.*

16 The ~~one and one half (1.5) hours of~~ continuing education required under this  
 17 subsection~~section~~ shall be included in the current number of required continuing  
 18 education hours.

19 ➔Section 26. KRS 216B.305 is amended to read as follows:

20 (1) ~~A~~No person, association, business entity, or organization shall ***not*** advertise,  
 21 solicit boarders, or operate a boarding home without registering, on an annual basis,  
 22 in a manner and form prescribed by the secretary. ~~A~~No person who has been  
 23 convicted of a crime of abuse ***or neglect*** under KRS 508.100 to 508.120 or who has  
 24 had a report of abuse substantiated by the cabinet shall ***not*** be registered to operate  
 25 a boarding home. The secretary shall impose a fee, not to exceed one hundred  
 26 dollars (\$100), for this registration.

27 (2) The secretary shall adopt standards, by administrative regulation pursuant to KRS

- 1 Chapter 13A, for the operation of boarding homes. The administrative regulations  
2 shall include minimum requirements in the following areas:
- 3 (a) Minimum room sizes for rooms occupied for sleeping purposes. Rooms  
4 occupied by one (1) boarding home resident shall contain at least sixty (60)  
5 square feet of floor space. Rooms occupied by more than one (1) occupant  
6 shall contain at least forty (40) square feet of floor space for each occupant;
  - 7 (b) Bedding, linens, and laundry services provided to residents;
  - 8 (c) Sanitary and plumbing fixtures, water supply, sewage disposal, and sanitation  
9 of the premises;
  - 10 (d) Heating, lighting, and fire prevention, including the installation and  
11 maintenance of smoke detectors;
  - 12 (e) Maintenance of the building;
  - 13 (f) Food handling, preparation, and storage, and kitchen sanitation;
  - 14 (g) Nutritional standards sufficient to meet the boarder's need;
  - 15 (h) Complaint procedures whereby residents may lodge complaints with the  
16 cabinet concerning the operation of the boarding home; and
  - 17 (i) Initial and periodic screening procedures to ensure that individuals meet the  
18 definition of "boarder" under KRS 216B.300(3).
- 19 (3) Prior to the initial or annual registration of a boarding home, the cabinet shall cause  
20 an unannounced inspection to be made of the boarding home, either by cabinet  
21 personnel or through the local health department acting on behalf of the cabinet, to  
22 determine if the boarding home is in compliance with:
- 23 (a) Standards established in subsections (1) and (2) of this section;
  - 24 (b) Administrative regulations relating to the operation of boarding homes  
25 promulgated pursuant to subsection (2) of this section; and
  - 26 (c) All applicable local health, fire, building, and safety codes and zoning  
27 ordinances.

- 1 (4) (a) A boarding home shall not be registered to any person, association, business  
2 entity, or organization that has been previously penalized for operating a  
3 boarding home without a registration or that has had a previously denied or  
4 revoked registration to operate a boarding home, for a period of five (5) years  
5 following the date of imposition of the previous penalty or denial or  
6 revocation of registration.
- 7 (b) A boarding home operator may appeal the cabinet's denial of initial or annual  
8 registration, and an administrative hearing shall be conducted in accordance  
9 with KRS Chapter 13B. A hearing held for a summary suspension shall be  
10 expedited and shall be in accordance with administrative regulations  
11 promulgated by the cabinet. If a boarding home continues to operate in  
12 violation of administrative regulations promulgated pursuant to subsection (2)  
13 of this section, the cabinet shall institute injunctive proceedings in Circuit  
14 Court to terminate the operation of the boarding home.
- 15 (5) Any person, association, business entity, or organization that submits an application  
16 to register a boarding home that conceals a previously denied or revoked  
17 application or conceals a penalty received for operating a boarding home without a  
18 registration shall be liable for a civil penalty of at least one thousand dollars  
19 (\$1,000) but not more than five thousand dollars (\$5,000). Any registration issued  
20 in reliance upon the application concealing information shall be immediately  
21 revoked.
- 22 (6) Initial and annual registration may be denied and existing registration may be  
23 revoked for any of the following:
- 24 (a) The boarding home fails to achieve or maintain substantial and continuing  
25 compliance with administrative regulations promulgated pursuant to  
26 subsection (2) of this section;
- 27 (b) The boarding home fails or refuses to correct violations within a reasonable

1 time as specified by the cabinet; or

2 (c) The applicant for registration or the registrant has been convicted of a crime  
3 related to abuse, neglect, or exploitation of an adult or has had an incident of  
4 adult abuse, neglect, or exploitation as defined in KRS 209.020, substantiated  
5 by the cabinet.

6 (7) Employees or designated agents of the cabinet shall have the authority to enter at  
7 any time a boarding home or any premises suspected of operating as an  
8 unregistered boarding home for the purpose of conducting an inspection or  
9 investigating a complaint.

10 (8) A boarding home shall not handle, store, dispense, or assist with the dispensing of a  
11 boarder's prescription or non-prescription medications.

12 (9) Upon request of the boarder, the boarding home shall provide access to a lockable  
13 compartment for use by a resident who requests secure storage for prescription  
14 medication.

15 (10) If a boarding home fails to meet a minimum standard established in subsection (2)  
16 or (3) of this section and is in such a condition that the cabinet determines that the  
17 boarding home's continued operation poses a significant risk to the health and  
18 safety of its residents, the cabinet may summarily suspend the registration of the  
19 boarding home by ordering that its operations cease until corrections are made or  
20 until a hearing is held on the appropriateness of the suspension.

21 (11) Nothing in this section or KRS 216B.303 shall be construed to prohibit local  
22 governments from imposing requirements on boarding homes that are stricter than  
23 those imposed by administrative regulations of the Cabinet for Health and Family  
24 Services.

25 ➔Section 27. KRS 439.3401 is amended to read as follows:

26 (1) As used in this section, "violent offender" means any person who has been  
27 convicted of or pled guilty to the:

- 1       (a) Commission or attempted commission of:
  - 2           1. A capital offense;
  - 3           2. A Class A felony; or
  - 4           3. A felony sexual offense described in KRS Chapter 510; or
- 5       (b) Commission of:
  - 6           1. A felony involving the death of the victim or serious physical injury to a
  - 7                 victim;
  - 8           2. Use of a minor in a sexual performance as described in KRS 531.310;
  - 9           3. Promoting a sexual performance by a minor as described in KRS
  - 10                 531.320;
  - 11           4. Unlawful transaction with a minor in the first degree as described in
  - 12                 KRS 530.064(1)(a);
  - 13           5. Human trafficking under KRS 529.100 involving commercial sexual
  - 14                 activity where the victim is a minor;
  - 15           6. Criminal abuse or neglect in the first degree as described in KRS
  - 16                 508.100;
  - 17           7. Burglary in the first degree accompanied by the commission or
  - 18                 attempted commission of an assault as described in KRS 508.010,
  - 19                 508.020, 508.032, or 508.060;
  - 20           8. Burglary in the first degree accompanied by commission or attempted
  - 21                 commission of kidnapping as described in KRS 509.040;
  - 22           9. Burglary in the first degree as described in KRS 511.020, if a person
  - 23                 other than a participant in the crime was present in the building during
  - 24                 the commission of the offense;
  - 25           10. Robbery in the first degree as described in KRS 515.020;
  - 26           11. Robbery in the second degree as described in KRS 515.030;
  - 27           12. Incest as described in KRS 530.020(2)(b) or (c);

- 1           13. Arson in the first degree as described in KRS 513.020;
- 2           14. Strangulation in the first degree as described in KRS 508.170;
- 3           15. Carjacking as described in KRS 515.040;
- 4           16. A Class C felony violation of promoting contraband in the first degree
- 5                 as described in KRS 520.050; or
- 6           17. Wanton endangerment in the first degree as described in KRS 508.060
- 7                 involving the discharge of a firearm.
- 8 (2) The court shall designate in its judgment if:
  - 9           (a) The victim suffered death or serious physical injury; and
  - 10           (b) A person other than a participant in the crime was present in the building
  - 11                 during the commission of burglary in the first degree.
- 12 (3) A violent offender who has been convicted of a capital offense and who has
- 13           received a life sentence and has not been sentenced to twenty-five (25) years
- 14           without parole or imprisonment for life without benefit of probation or parole, or a
- 15           Class A felony and receives a life sentence, or to death and his or her sentence is
- 16           commuted to a life sentence shall not be released on probation or parole until he or
- 17           she has served at least twenty (20) years in the penitentiary. Violent offenders may
- 18           have a greater minimum parole eligibility date than other offenders who receive
- 19           longer sentences, including a sentence of life imprisonment.
- 20 (4) A violent offender with a sentence of a term of years shall not be released on
- 21           probation, shock probation, parole, conditional discharge, or other form of early
- 22           release until he or she has served at least eighty-five percent (85%) of the sentence
- 23           imposed.
- 24 (5) A violent offender shall only be awarded credit on his or her sentence authorized by
- 25           KRS 197.045(1)(a)1.
- 26 (6) This section shall not apply to a person who has been determined by a court to have
- 27           been a victim of domestic violence or abuse pursuant to KRS 533.060 with regard

1 to the offenses involving the death of the victim or serious physical injury to the  
2 victim. The provisions of this subsection shall not extend to rape in the first degree  
3 or sodomy in the first degree by the defendant.

4 (7) This section shall apply only to those persons who commit offenses after July 15,  
5 1998.

6 (8) For offenses committed prior to July 15, 1998, the version of this statute in effect  
7 immediately prior to that date shall continue to apply.

8 (9) The provisions of subsection (1) of this section extending the definition of "violent  
9 offender" to persons convicted of or pleading guilty to robbery in the first degree  
10 shall apply only to persons whose crime was committed after July 15, 2002.

11 ➔Section 28. KRS 507.010 is amended to read as follows:

12 As used in this chapter:

13 (1) "Abuse *or neglect*" has the same meaning as in KRS 508.090;

14 (2) "Criminal homicide" means that a person is guilty of causing the death of another  
15 human being under circumstances which constitute murder, manslaughter in the  
16 first degree, manslaughter in the second degree, or reckless homicide; and

17 (3) "Physically helpless" and "mentally helpless" have the same meaning as in KRS  
18 508.090.

19 ➔Section 29. KRS 507.030 is amended to read as follows:

20 (1) A person is guilty of manslaughter in the first degree when:

21 (a) With intent to cause serious physical injury to another person, he or she  
22 causes the death of such person or of a third person;

23 (b) With intent to cause the death of another person, he or she causes the death of  
24 such person or of a third person under circumstances which do not constitute  
25 murder because he or she acts under the influence of extreme emotional  
26 disturbance, as defined in subsection (1)(a) of KRS 507.020;

27 (c) Through circumstances not otherwise constituting the offense of murder, he or

1 she intentionally abuses or neglects another person or knowingly permits  
2 another person of whom he or she has actual custody to be abused or  
3 neglected and thereby causes death to a person twelve (12) years of age or  
4 less, or who is physically helpless or mentally helpless; or

5 (d) He or she knowingly sells fentanyl or a fentanyl derivative to another person,  
6 and the injection, ingestion, inhalation, or other introduction of the fentanyl or  
7 fentanyl derivative causes the death of the person.

8 (2) Manslaughter in the first degree is a Class B felony.