

Montana Code Annotated 2014

52-2-303. Children's system of care planning committee -- membership -- administration.

- (1) There is a children's system of care planning committee.
- (2) The committee is composed of the following members:
 - (a) an appointee of the director of the department of public health and human services representing the mental health program;
 - (b) an appointee of the director of the department of public health and human services representing child protective services;
 - (c) an appointee of the director of the department of public health and human services representing the developmental disability program;
 - (d) an appointee of the director of the department of public health and human services representing the chemical dependency treatment program;
 - (e) other appointees considered appropriate by the director of the department of public health and human services who may be representatives of families of high-risk children with multiagency service needs, service providers, or other interested persons or governmental agencies;
 - (f) an appointee of the superintendent of public instruction representing education;
 - (g) an appointee of the director of the department of corrections;
 - (h) an appointee of the youth justice council of the board of crime control; and
 - (i) an appointee of the supreme court representing the youth courts.
- (3) The committee is attached to the department of public health and human services for administrative purposes only as provided in [2-15-121](#).
- (4) Except as provided in this section, the committee must be administered in accordance with [2-15-122](#).

History: En. Sec. 3, Ch. 324, L. 1993; amd. Sec. 148, Ch. 418, L. 1995; amd. Sec. 342, Ch. 546, L. 1995; amd. Sec. 3, Ch. 118, L. 2003.

52-2-304. Committee duties. (1) The committee established in [52-2-303](#) shall, to the extent possible within existing resources:

- (a) develop policies aimed at eliminating or reducing barriers to the implementation of a system of care;
- (b) promote the development of an in-state quality array of core services in order to assist in returning high-risk children with multiagency service needs from out-of-state placements, limiting and preventing the placement of high-risk children with multiagency service needs out of state, and maintaining high-risk children with multiagency service needs within the least restrictive and most appropriate setting;
- (c) advise local agencies to ensure that the agencies comply with applicable statutes, administrative rules, and department policy in committing funds and resources for the implementation of unified plans of care for high-risk children with multiagency service needs and in making any determination that a high-risk child with multiagency service needs cannot be served by an in-state provider;
- (d) encourage the development of local interagency teams with participation from representatives from child serving agencies who are authorized to commit resources and make decisions on behalf of the agency represented;
- (e) specify outcome indicators and measures to evaluate the effectiveness of the system of care;

(f) develop mechanisms to elicit meaningful participation from parents, family members, and youth who are currently being served or who have been served in the children's system of care; and

(g) take into consideration the policies, plans, and budget developed by any service area authority provided for in [53-21-1006](#).

(2) The committee shall coordinate responsibility for the development of a stable system of care for high-risk children with multiagency service needs that may include, as appropriate within existing resources:

(a) pooling funding from federal, state, and local sources to maximize the most cost-effective use of funds to provide services in the least restrictive and most appropriate setting to high-risk children with multiagency service needs;

(b) applying for federal waivers and grants to improve the delivery of integrated services to high-risk children with multiagency service needs;

(c) providing for multiagency data collection and for analysis relevant to the creation of an accurate profile of the state's high-risk children with multiagency service needs in order to provide for the use of services based on client needs and outcomes and use of the analysis in the decisionmaking process;

(d) developing mechanisms for the pooling of human and fiscal resources; and

(e) providing training and technical assistance, as funds permit, at the local level regarding governance, development of a system of care, and delivery of integrated multiagency children's services.

(3) (a) In order to maximize integration and minimize duplication, the local interagency team, provided for in subsection (1)(d), may be facilitated in conjunction with an existing statutory team for providing youth services, including:

(i) a child protective team as provided for in [41-3-108](#);

(ii) a youth placement committee as provided for in [41-5-121](#) and [41-5-122](#);

(iii) a county interdisciplinary child information and school safety team or an auxiliary team as provided for in [52-2-211](#);

(iv) a foster care review committee as provided for in [41-3-115](#);

(v) a local citizen review board as provided for in [41-3-1003](#); and

(vi) a local advisory council as provided for in [53-21-702](#).

(b) If the local interagency team decides to coordinate and consolidate statutory teams, it shall ensure that all state and federal rules, laws, and policies required of the individual statutory teams are fulfilled.

History: En. Sec. 4, Ch. 324, L. 1993; amd. Sec. 4, Ch. 118, L. 2003; amd. Sec. 63, Ch. 130, L. 2005; amd. Sec. 1, Ch. 200, L. 2005; amd. Sec. 8, Ch. 364, L. 2013.