



114th MAINE LEGISLATURE

SECOND REGULAR SESSION - 1990

Legislative Document

No. 2122

H.P. 1537

House of Representatives, January 5, 1990

Submitted by the Department of Mental Health and Mental Retardation pursuant to Joint Rule 24.

Reference to the Committee on Human Resources suggested and ordered printed.

EDWIN H. PERT, Clerk

Presented by Representative DELLERT of Gardiner. Cosponsored by Senator GILL of Cumberland, Senator BRANNIGAN of Cumberland and Representative BURKE of Vassalboro.

STATE OF MAINE

IN THE YEAR OF OUR LORD NINETEEN HUNDRED AND NINETY

An Act to Establish the Advisory Board on Rights of Children in Need of Treatment.

	Be it enacted by the People of the State of Maine as follows:
2	Sec.1. 5 MRSA §12004-I, sub-§59-A is enacted to read:
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	59-A. Advisory Board Expenses 34-B MRSA
6	Mental Health on Rights of Only §1209-B
	and Mental Children in Need
8	Retardation of Treatment
-	
10	Sec. 2. 34-B MRSA §1209-B is enacted to read:
12	<u>\$1209-B. Advisory Board on Rights of Children in Need of</u>
	Treatment
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	 Establishment. The Advisory Board on Rights of Children
16	in Need of Treatment, established pursuant to Title 5, section
	12004-I, subsection 59-A, shall consist of 7 members as follows:
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	A. One person who is a parent of a child in need of
20	treatment as defined by section 6201, subsection 2;
22	B. One person who has demonstrated experience as a provider
2.2	of services to children in a hospital or residential care
24	facility pursuant to section 6201, subsection 3;
24	racificy pursuant to section ozor, subsection 3;
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26	C. One person who is a psychiatrist or a licensed clinical
• •	psychologist whose primary practice consists of treating
28	children in need of services;
30	D. One person who is a primary consumer of mental health
	services;
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	E. One person who is certified to teach special education;
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	F. One person who has professional experience as an
36	advocate for children; and
38	G. One person of the public at large who has demonstrated
00	interest in the rights of children with special needs.
40	Interest in the rights of children with special needs.
-10	Newborn shall be apprinted by the commissioner for staggered
4.0	Members shall be appointed by the commissioner for staggered
42	terms not to exceed 2 years.
44	2. Chair. The members of the board shall elect a chair.
	an a
46	3. Meetings. The board shall meet at least quarterly. A
	<u>representative of the Department of Mental Health and Mental</u>
48	Retardation shall act as liaison between the board and the
	<u>department and shall have the right to attend all meetings of the</u>
50	board.

4. Functions. The primary function of the board is to advise the department on the implementation of the rights of children in need of treatment who are receiving mental health services.

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 5. Responsibilities. The board's responsibilities include monitoring the implementation of the rights pertaining to children in need of treatment who are receiving mental health services and making recommendations about improving the
 substantive content and implementations of the rules. Board members shall have access to all living areas and program areas
 and to all grievance records and other records directly relevant to monitoring the implementation of the rules, provided that the
 access is in conformity with the laws regarding confidentiality of mental health information.

6. Duties. The board shall prepare a yearly report for the commissioner and the joint standing committee of the Legislature having jurisdiction over human resource matters regarding the implementation of the rights of children in need of treatment who are receiving mental health services.

STATEMENT OF FACT

Currently, the Mental Health Rights Advisory Board works in conjunction with the Bureau of Mental Health and focuses on 28 rights of adults. This bill creates a similar advisory board, 30 the Advisory Board on Rights of Children in Need of Treatment, to work with the Bureau of Children with Special Needs and child-serving agencies on the rights of children in need of 32 treatment who are receiving mental health services. This distinction reflects differences in the legal status of children, 34 the current system of services and the expertise required to advise on the children's rights. 36