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## **Cheryl K. Acton** proposes the following substitute bill:

### **Health and Human Services Amendments**

# 2025 GENERAL SESSION STATE OF UTAH

Chief Sponsor: Cheryl K. Acton

Senate Sponsor:

3	LONG '	TITLE

## **4** General Description:

This bill amends provisions related to the Department of Health and Human Services.

#### **6 Highlighted Provisions:**

- 7 This bill:
- 8 defines terms;
- 9 repeals outdated language;
- 10 ▶ updates code references;
- provides that the Department of Health and Human Services (department) may examine
- and audit the expenditures of public funds provided to a local health department;
- 13 addresses the required qualifications for the department's executive director and deputy
- 14 directors;

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- updates the name of a division and an office within the department;
- provides that the executive director of the department may create committees within the department, subject to certain conditions and requirements;
- authorizes the department to access certain records of individuals licensed or certified by
   the Division of Professional Licensing for specific purposes;
- 20 adds additional items to the list of duties of the department;
- 21 updates language to be consistent with the transfer of certain emergency medical services
- 22 responsibilities from the department to the Department of Public Safety;
- ≥ addresses the administration of stock albuterol by a qualified adult;
- ▶ updates references from "targeted case management" to "case managers";
- 25 allows the Office of Public Guardian to have access to certain documents and
- information, including private, controlled, or protected information, when reasonably
- 27 necessary to fulfill the office's duties and responsibilities;
  - provides that the Division of Services for People with Disabilities must determine the

- 29 most appropriate, least restrictive setting for an individual with an intellectual disability
- within the division's system;
- 31 amends provisions regarding fetal death certificates and certificates of early term stillbirth;
- 32 updates code references to reflect the current name of the Office of Substance Use and
- 33 Mental Health within the department;
- requires the Office of Recovery Services to review child support guidelines and submit a
- 35 summary of the review to the Judiciary Interim Committee; and
- makes technical and conforming changes.
- 37 Money Appropriated in this Bill:
- 38 None
- 39 Other Special Clauses:
- 40 None
- 41 Utah Code Sections Affected:
- 42 AMENDS:
- 43 **26B-1-201**, as last amended by Laws of Utah 2022, Chapter 255
- **26B-1-202**, as last amended by Laws of Utah 2024, Chapter 506
- 45 **26B-1-203**, as renumbered and amended by Laws of Utah 2022, Chapter 255
- 46 **26B-1-204**, as last amended by Laws of Utah 2024, Chapters 240, 404 and 506
- 47 **26B-1-211**, as renumbered and amended by Laws of Utah 2022, Chapter 255
- 48 **26B-1-213**, as renumbered and amended by Laws of Utah 2022, Chapter 255
- 49 **26B-1-216**, as last amended by Laws of Utah 2024, Chapter 106
- **26B-1-219**, as last amended by Laws of Utah 2024, Chapter 178
- 51 **26B-1-235**, as renumbered and amended by Laws of Utah 2023, Chapter 305
- 52 **26B-1-334**, as enacted by Laws of Utah 2023, Chapter 325
- 53 **26B-3-804**, as renumbered and amended by Laws of Utah 2023, Chapter 306
- **26B-4-301**, as last amended by Laws of Utah 2024, Chapter 261
- **26B-4-406**, as renumbered and amended by Laws of Utah 2023, Chapter 307
- **26B-4-409**, as last amended by Laws of Utah 2024, Chapter 311
- 57 **26B-4-501**, as last amended by Laws of Utah 2024, Chapter 257
- **26B-5-101**, as last amended by Laws of Utah 2024, Chapters 240, 420
- 59 **26B-5-102**, as last amended by Laws of Utah 2024, Chapters 250, 420
- **26B-5-315**, as renumbered and amended by Laws of Utah 2023, Chapter 308
- 61 **26B-5-319**, as renumbered and amended by Laws of Utah 2023, Chapter 308
- 62 **26B-5-331**, as last amended by Laws of Utah 2024, Chapter 299

(e) public health;

63 **26B-5-609**, as last amended by Laws of Utah 2024, Third Special Session, Chapter 5 64 **26B-6-210**, as last amended by Laws of Utah 2024, Chapter 147 65 **26B-6-304**, as last amended by Laws of Utah 2024, Chapter 250 66 **26B-6-602**, as renumbered and amended by Laws of Utah 2023, Chapter 308 **26B-7-301**, as last amended by Laws of Utah 2024, Chapters 152, 283 67 68 **26B-8-115**, as last amended by Laws of Utah 2024, Chapters 113, 295 69 **26B-8-118**, as last amended by Laws of Utah 2024, Chapter 113 70 **26B-9-104**, as last amended by Laws of Utah 2024, Chapter 366 71 **53-22-102**, as last amended by Laws of Utah 2024, Chapter 21 72 **53-22-104.2**, as enacted by Laws of Utah 2024, Chapter 21 73 **53-22-105**, as enacted by Laws of Utah 2024, Chapter 21 74 **53G-8-701.6**, as enacted by Laws of Utah 2024, Chapter 21 75 **63I-1-281**, as enacted by Laws of Utah 2024, Chapter 366 76 80-2-709, as renumbered and amended by Laws of Utah 2022, Chapter 334 77 **REPEALS:** 78 **26B-7-102**, as renumbered and amended by Laws of Utah 2023, Chapter 308 79 80 Be it enacted by the Legislature of the state of Utah: 81 Section 1. Section **26B-1-201** is amended to read: 82 26B-1-201. Department of Health and Human Services -- Creation -- Duties. 83 (1) There is created within state government the Department of Health and Human 84 Services, which has all of the policymaking functions, regulatory and enforcement 85 powers, rights, duties, and responsibilities outlined in this title and previously vested in the Department of Health and the Department of Human Services. 86 87 (2) Subject to the limitation and grants of authority in state law, the department shall serve 88 as the health, health planning, medical assistance, and social services authority of the 89 state, and for administration of federally assisted state programs or plans is designated as 90 the sole state agency for: 91 (a) social service block grants; 92 (b) alcohol, drug, and mental health programs, including block grants; 93 (c) child welfare; 94 (d) state programs supported under the Older Americans Act, 42 U.S.C. Sec. 3001, et 95 seq.;

97	(f) health planning;
98	(g) maternal and child health;
99	(h) services for individuals with a disability; and
100	(i) medical assistance.
101	(3) A state plan or program administered by the department:
102	(a) shall be developed in the appropriate divisions or offices of the department in
103	accordance with applicable requirements of state and federal law; and
104	(b) may be amended by the executive director to achieve coordination, efficiency, or
105	economy.
106	[(4) In addition to Subsection (1), from July 1, 2022, through June 30, 2023, the
107	Department of Health and Human Services shall exercise the policymaking functions,
108	regulatory and enforcement powers, rights, duties, and responsibilities of the
109	Department of Health and the Department of Human Services under:]
110	[(a) Title 26, Utah Health Code; and]
111	[(b) Title 62A, Utah Human Services Code.]
112	Section 2. Section <b>26B-1-202</b> is amended to read:
113	26B-1-202 . Department authority and duties.
114	(1) As used in this section, "public funds" means the same as that term is defined in Section
115	26B-5-101.
116	(2) The department may, subject to applicable restrictions in state law and in addition
117	to all other authority and responsibility granted to the department by law:
118	[(1)] (a) adopt rules, in accordance with Title 63G, Chapter 3, Utah Administrative
119	Rulemaking Act, and not inconsistent with law, as the department may consider
120	necessary or desirable for providing health and social services to the people of this
121	state;
122	[(2)] (b) establish and manage client trust accounts in the department's institutions and
123	community programs, at the request of the client or the client's legal guardian or
124	representative, or in accordance with federal law;
125	[(3)] (c) purchase, as authorized or required by law, services that the department is
126	responsible to provide for legally eligible persons;
127	[(4)] (d) conduct adjudicative proceedings for clients and providers in accordance with
128	the procedures of Title 63G, Chapter 4, Administrative Procedures Act;
129	[(5)] (e) establish eligibility standards for the department's programs, not inconsistent
130	with state or federal law or regulations;

131	[(6)] (f) take necessary steps, including legal action, to recover money or the monetary
132	value of services provided to a recipient who was not eligible;
133	[(7)] (g) set and collect fees for the department's services;
134	[(8)] (h) license agencies, facilities, and programs, except as otherwise allowed,
135	prohibited, or limited by law;
136	[(9)] (i) acquire, manage, and dispose of any real or personal property needed or owned
137	by the department, not inconsistent with state law;
138	[(10)] (j) receive gifts, grants, devises, and donations; gifts, grants, devises, donations, or
139	the proceeds thereof, may be credited to the program designated by the donor, and
140	may be used for the purposes requested by the donor, as long as the request conforms
141	to state and federal policy; all donated funds shall be considered private, nonlapsing
142	funds and may be invested under guidelines established by the state treasurer;
143	[(11)] (k) accept and employ volunteer labor or services; the department is authorized to
144	reimburse volunteers for necessary expenses, when the department considers that
145	reimbursement to be appropriate;
146	[(12)] (1) carry out the responsibility assigned in the workforce services plan by the State
147	Workforce Development Board;
148	[(13)] (m) carry out the responsibility assigned by Section 26B-1-430 with respect to
149	coordination of services for students with a disability;
150	[(14)] (n) provide training and educational opportunities for the department's staff;
151	[(15)] (o) collect child support payments and any other money due to the department;
152	[(16)] (p) apply the provisions of Title 81, Chapter 6, Child Support, to parents whose
153	child lives out of the home in a department licensed or certified setting;
154	[(17)] (q) establish policy and procedures, within appropriations authorized by the
155	Legislature, in cases where the Division of Child and Family Services or the Division
156	of Juvenile Justice and Youth Services is given custody of a minor by the juvenile
157	court under Title 80, Utah Juvenile Code, or the department is ordered to prepare an
158	attainment plan for a minor found not competent to proceed under Section 80-6-403,
159	including:
160	[(a)] (i) designation of interagency teams for each juvenile court district in the state;
161	[(b)] (ii) delineation of assessment criteria and procedures;
162	[(e)] (iii) minimum requirements, and timeframes, for the development and
163	implementation of a collaborative service plan for each minor placed in
164	department custody: and

165	[(d)] (iv) provisions for submittal of the plan and periodic progress reports to the court;
166	[(18)] (r) carry out the responsibilities assigned to the department by statute;
167	[(19)] (s) as further provided in Subsection (3), examine and audit the expenditures of
168	any public funds provided to a local health department, a local substance abuse
169	authority, a local mental health authority, a local area agency on aging, and any
170	person, agency, or organization that contracts with or receives funds from those
171	authorities or agencies[. Those local authorities, area agencies, and any person or
172	entity that contracts with or receives funds from those authorities or area agencies,
173	shall provide the department with any information the department considers
174	necessary. The department is further authorized to issue directives resulting from any
175	examination or audit to a local authority, an area agency, and persons or entities that
176	contract with or receive funds from those authorities with regard to any public funds.
177	If the department determines that it is necessary to withhold funds from a local
178	mental health authority or local substance abuse authority based on failure to comply
179	with state or federal law, policy, or contract provisions, the department may take
180	steps necessary to ensure continuity of services. For purposes of this Subsection (19)
181	"public funds" means the same as that term is defined in Section 26B-5-101];
182	[(20)] (t) in accordance with Subsection 26B-2-104(1)(d), accredit one or more agencies
183	and persons to provide intercountry adoption services;
184	[(21)] (u) within legislative appropriations, promote and develop a system of care and
185	stabilization services:
186	[(a)] (i) in compliance with Title 63G, Chapter 6a, Utah Procurement Code; and
187	[(b)] (ii) that encompasses the department, department contractors, and the divisions,
188	offices, or institutions within the department, to:
189	[(i)] (A) navigate services, funding resources, and relationships to the benefit of
190	the children and families whom the department serves;
191	[(ii)] (B) centralize department operations, including procurement and contracting;
192	[(iii)] (C) develop policies that govern business operations and that facilitate a
193	system of care approach to service delivery;
194	[(iv)] (D) allocate resources that may be used for the children and families served
195	by the department or the divisions, offices, or institutions within the
196	department, subject to the restrictions in Section 63J-1-206;
197	[(v)] (E) create performance-based measures for the provision of services; and
198	[(vi)] (F) centralize other business operations, including data matching and sharing

199	among the department's divisions, offices, and institutions;
200	[(22)] (v) ensure that any training or certification required of a public official or public
201	employee, as those terms are defined in Section 63G-22-102, complies with Title
202	63G, Chapter 22, State Training and Certification Requirements, if the training or
203	certification is required:
204	[(a)] (i) under this title;
205	[(b)] (ii) by the department; or
206	[(e)] (iii) by an agency or division within the department;
207	[(23)] (w) enter into cooperative agreements with the Department of Environmental
208	Quality to delineate specific responsibilities to assure that assessment and
209	management of risk to human health from the environment are properly administered;
210	[(24)] (x) consult with the Department of Environmental Quality and enter into
211	cooperative agreements, as needed, to ensure efficient use of resources and effective
212	response to potential health and safety threats from the environment, and to prevent
213	gaps in protection from potential risks from the environment to specific individuals
214	or population groups;
215	[(25)] (y) to the extent authorized under state law or required by federal law, promote and
216	protect the health and wellness of the people within the state;
217	[(26)] (z) establish, maintain, and enforce rules authorized under state law or required by
218	federal law to promote and protect the public health or to prevent disease and illness;
219	[(27)] (aa) investigate the causes of epidemic, infectious, communicable, and other
220	diseases affecting the public health;
221	[(28)] (bb) provide for the detection and reporting of communicable, infectious, acute,
222	chronic, or any other disease or health hazard which the department considers to be
223	dangerous, important, or likely to affect the public health;
224	[(29)] (cc) collect and report information on causes of injury, sickness, death, and
225	disability and the risk factors that contribute to the causes of injury, sickness, death,
226	and disability within the state;
227	[(30)] (dd) collect, prepare, publish, and disseminate information to inform the public
228	concerning the health and wellness of the population, specific hazards, and risks that
229	may affect the health and wellness of the population and specific activities which
230	may promote and protect the health and wellness of the population;
231	[(31)] (ee) abate nuisances when necessary to eliminate sources of filth and infectious
232	and communicable diseases affecting the public health;

233	[(32)] (ff) make necessary sanitary and health investigations and inspections in
234	cooperation with local health departments as to any matters affecting the public
235	health;
236	[(33)] (gg) establish laboratory services necessary to support public health programs and
237	medical services in the state;
238	[(34)] (hh) establish and enforce standards for laboratory services which are provided by
239	any laboratory in the state when the purpose of the services is to protect the public
240	health;
241	[(35)] (ii) cooperate with the Labor Commission to conduct studies of occupational
242	health hazards and occupational diseases arising in and out of employment in
243	industry, and make recommendations for elimination or reduction of the hazards;
244	[(36)] (jj) cooperate with the local health departments, the Department of Corrections,
245	the Administrative Office of the Courts, the Division of Juvenile Justice and Youth
246	Services, and the Utah Office for Victims of Crime to conduct testing for HIV
247	infection of alleged sexual offenders, convicted sexual offenders, and any victims of
248	a sexual offense;
249	[(37)] (kk) investigate the causes of maternal and infant mortality;
250	[(38)] (11) establish, maintain, and enforce a procedure requiring the blood of adult
251	pedestrians and drivers of motor vehicles killed in highway accidents be examined
252	for the presence and concentration of alcohol, and provide the Commissioner of
253	Public Safety with monthly statistics reflecting the results of these examinations, with
254	necessary safeguards so that information derived from the examinations is not used
255	for a purpose other than the compilation of these statistics;
256	[(39)] (mm) establish qualifications for individuals permitted to draw blood under
257	Subsection 41-6a-523(1)(a)(vi), 53-10-405(2)(a)(vi), 72-10-502(5)(a)(vi), or
258	77-23-213(3)(a)(vi), and to issue permits to individuals the department finds
259	qualified, which permits may be terminated or revoked by the department;
260	[(40)] (nn) establish a uniform public health program throughout the state which includes
261	continuous service, employment of qualified employees, and a basic program of
262	disease control, vital and health statistics, sanitation, public health nursing, and other
263	preventive health programs necessary or desirable for the protection of public health;
264	[(41)] (oo) conduct health planning for the state;
265	[(42)] (pp) monitor the costs of health care in the state and foster price competition in the
266	health care delivery system;

267	[(43)] (qq) establish methods or measures for health care providers, public health entities
268	and health care insurers to coordinate among themselves to verify the identity of the
269	individuals the providers serve;
270	[(44)] (rr) designate Alzheimer's disease and related dementia as a public health issue
271	and, within budgetary limitations, implement a state plan for Alzheimer's disease and
272	related dementia by incorporating the plan into the department's strategic planning
273	and budgetary process;
274	[(45)] (ss) coordinate with other state agencies and other organizations to implement the
275	state plan for Alzheimer's disease and related dementia;
276	[(46)] (tt) ensure that any training or certification required of a public official or public
277	employee, as those terms are defined in Section 63G-22-102, complies with Title
278	63G, Chapter 22, State Training and Certification Requirements, if the training or
279	certification is required by the agency or under this Title 26B, Utah Health and
280	Human Services Code;
281	[(47)] (uu) oversee public education vision screening as described in Section 53G-9-404;
282	[(48)] (vv) issue code blue alerts in accordance with Title 35A, Chapter 16, Part 7, Code
283	Blue Alert; and
284	[(49)] (ww) as allowed by state and federal law, share data with the Office of Families
285	that is relevant to the duties described in Subsection 26B-1-243(4), which may
286	include, to the extent available:
287	[(a)] (i) demographic data concerning family structures in the state; and
288	[(b)] (ii) data regarding the family structure associated with:
289	[(i)] (A) suicide, depression, or anxiety; and
290	[ <del>(ii)</del> ] (B) various health outcomes.
291	(3)(a) Under Subsection (2)(s), those local departments, local authorities, area agencies,
292	and any person or entity that contracts with or receives funds from those departments,
293	authorities, or area agencies, shall provide the department with any information the
294	department considers necessary.
295	(b) The department is further authorized to issue directives resulting from any
296	examination or audit to a local department, local authority, an area agency, and
297	persons or entities that contract with or receive funds from those departments,
298	authorities, or agencies with regard to any public funds.
299	(c) If the department determines that it is necessary to withhold funds from a local health
300	department, local mental health authority, or local substance abuse authority based on

301	failure to comply with state or federal law, policy, or contract provisions, the
302	department may take steps necessary to ensure continuity of services.
303	Section 3. Section 26B-1-203 is amended to read:
304	26B-1-203 . Executive director Appointment Compensation Qualifications
305	Deputy directors required Responsibilities.
306	(1)(a) The chief administrative officer of the department is the executive director, who
307	shall be appointed by the governor with the advice and consent of the Senate.
308	(b) The executive director may be removed at the will of the governor.
309	(c) The executive director shall receive a salary established by the governor within the
310	salary range fixed by the Legislature in Title 67, Chapter 22, State Officer
311	Compensation.
312	(2) The executive director shall be experienced in administration, management, and
313	coordination of complex organizations.
314	(3) [If the executive director is not a physician, the] The executive director or a deputy
315	director shall:
316	(a) be informed and experienced in public health;
317	(b) have successfully completed at least a master's degree of public health or public
318	administration from an accredited school of public health or from an accredited
319	program of public health or public administration; and
320	(c)(i) have at least five years of professional full-time experience, of which at least
321	two years have been in public health in a senior level administrative capacity; or
322	(ii) have at least five years of professional full-time experience in public health
323	programs, of which at least three years have been in a senior level administrative
324	capacity.
325	(4) [The] If the executive director is not a physician, the executive director shall appoint a
326	deputy director of the department who[±]
327	[(a) shall have successfully completed at least one year's graduate work in an accredited
328	school of public health or an accredited program of public health;]
329	[(b) shall have at least five years of professional full-time experience in public health
330	programs; and]
331	[(e)] _is a physician licensed to practice medicine in the state with experience in public
332	health.
333	(5) The executive director is responsible for:
334	(a) administration and supervision of the department;

335	(b) coordination of policies and program activities conducted through the boards,
336	divisions, and offices of the department;
337	(c) approval of the proposed budget of each board, division, and office within the
338	department; and
339	(d) other duties as the Legislature or governor shall assign to the executive director.
340	(6) The executive director may appoint deputy or assistant directors to assist the executive
341	director in carrying out the department's responsibilities.
342	Section 4. Section <b>26B-1-204</b> is amended to read:
343	26B-1-204 . Creation of boards, divisions, and offices Power to establish
344	committees.
345	(1) The executive director shall make rules in accordance with Title 63G, Chapter 3, Utah
346	Administrative Rulemaking Act, and not inconsistent with law for:
347	(a) the administration and government of the department;
348	(b) the conduct of the department's employees; and
349	(c) the custody, use, and preservation of the records, papers, books, documents, and
350	property of the department.
351	(2) The following policymaking boards, councils, and committees are created within the
352	Department of Health and Human Services:
353	(a) Board of Aging and Adult Services;
354	(b) Utah State Developmental Center Board;
355	(c) Health Facility Committee;
356	(d) Health Data Committee;
357	(e) Child Care Provider Licensing Committee;
358	(f) Adult Autism Treatment Program Advisory Committee;
359	(g) Youth Electronic Cigarette, Marijuana, and Other Drug Prevention Committee; an
360	(h) any boards, councils, or committees that are created by statute in this title.
361	(3) The following divisions and offices are created within the Department of Health and
362	Human Services:
363	(a) relating to operations:
364	(i) the Division of Finance and Administration;
365	(ii) the Division of Licensing and Background Checks;
366	(iii) the Division of Customer Experience;
367	(iv) the Division of Data, Systems, and Evaluation; and
368	(v) the Division of Continuous Quality and Improvement;

369	(b) relating to healthcare administration:
370	(i) the Division of Integrated Healthcare, which shall include responsibility for:
371	(A) the state's medical assistance programs; and
372	(B) behavioral health programs described in Chapter 5, Health Care - Substance
373	Use and Mental Health;
374	(ii) the Division of Aging and Adult Services; and
375	(iii) the Division of Services for People with Disabilities;
376	(c) relating to community health and well-being:
377	(i) the Division of Child and Family Services;
378	(ii) the Division of Family Health;
379	(iii) the Division of Population Health;
380	(iv) the Division of Juvenile Justice and Youth Services;
381	(v) the Office of Families; and
382	(vi) the Office of Recovery Services; and
383	(d) relating to clinical services[, the Division of Health Access.] :
384	(i) the Division of Correctional Health Services; and
385	(ii) the Office of the Medical Examiner.
386	(4)(a) The executive director may:
387	(i) establish offices to facilitate management of the department as required by, and in
388	accordance with this title[-] ; or
389	(ii) establish one or more committees within the department if each established
390	committee is:
391	(A) essential to the operation of the department; or
392	(B) required to review or discuss protected health information or other similarly
393	sensitive materials to accomplish the committee's responsibilities.
394	(b) If the executive director creates a committee under Subsection (4)(a)(ii), within six
395	months after the executive director creates the committee, the executive director shall
396	notify the Health and Human Services Interim Committee, in writing, of:
397	(i) the creation of the committee;
398	(ii) the committee's responsibilities; and
399	(iii) the membership of the committee.
400	(c) The executive director shall provide a report to the Health and Human Services
401	Interim Committee on or before August 1 each year that describes each ongoing,
402	operational committee created by the executive director under Subsection (4)(a)(ii).

403	[(5) From July 1, 2022, through June 30, 2023, the executive director may adjust the
404	organizational structure relating to the department, including the organization of the
405	department's divisions and offices, notwithstanding the organizational structure
406	described in this title.]
407	Section 5. Section 26B-1-211 is amended to read:
408	26B-1-211 . Background checks for employees Access to abuse and neglect
409	information to screen employees and volunteers.
410	(1) As used in this section, "bureau" means the Bureau of Criminal Identification created in
411	Section 53-10-201.
412	(2) Beginning July 1, 2018, the department may require a fingerprint-based local, regional,
413	and national criminal history background check and ongoing monitoring of:
414	(a) all staff, contracted employees, and volunteers who:
415	(i) have access to protected health information or personal identifying information;
416	(ii) have direct access to patients, children, or vulnerable adults as defined in Section
417	26B-2-101;
418	(iii) work in areas of privacy and data security;
419	(iv) handle financial information, including receipt of funds, reviewing invoices,
420	making payments, and other types of financial information; and
421	(v) perform audit functions, whether internal or external, on behalf of the department;
422	and
423	(b) job applicants who have been offered a position with the department and the job
424	requirements include those described in Subsection (2)(a).
425	(3) Beginning July 1, 2022, for the purposes described in Subsection (2), the department
426	may also access:
427	(a) the department's Management Information System created in Section 80-2-1001;
428	(b) the department's Licensing Information System created in Section 80-2-1002;
429	(c) the statewide database of the Division of Aging and Adult Services created by
430	Section 26B-6-210;[ <del>-and</del> ]
431	(d) juvenile court records under Subsection 80-3-404(4)[-] ; and
432	(e) licensing and certification records of individuals licensed or certified by the Division
433	of Professional Licensing under Title 58, Occupations and Professions.
434	(4) Each individual in a position listed in Subsection (2) shall provide a completed
435	fingerprint card to the department upon request.
436	(5) The department shall require that an individual required to submit to a background

437	check under Subsection (4) provide a signed waiver on a form provided by the
438	department that meets the requirements of Subsection 53-10-108(4).
439	(6) For a noncriminal justice background search and registration in accordance with
440	Subsection 53-10-108(13), the department shall submit to the bureau:
441	(a) the applicant's personal identifying information and fingerprints for a criminal
442	history search of applicable local, regional, and national databases; and
443	(b) a request for all information received as a result of the local, regional, and
444	nationwide background check.
445	(7) The department is responsible for the payment of all fees required by Subsection
446	53-10-108(15) and any fees required to be submitted to the Federal Bureau of
447	Investigation by the bureau.
448	(8) The department may make rules in accordance with Title 63G, Chapter 3, Utah
449	Administrative Rulemaking Act, that:
450	(a) determine how the department will assess the employment status of an individual
451	upon receipt of background information;
452	(b) determine when an individual would be disqualified from holding a position based
453	on:
454	(i) the type of crimes and the severity of those crimes; or
455	(ii) one or more substantiated or supported findings of abuse, neglect, or exploitation
456	and
457	(c) identify the appropriate privacy risk mitigation strategy to be used in accordance
458	with Subsection 53-10-108(13)(b).
459	Section 6. Section <b>26B-1-213</b> is amended to read:
460	26B-1-213. Department and committee rules and proceedings.
461	(1)(a) Except in areas [-]subject to concurrence between the department and a committee
462	created under this title[ , Title 26, Utah Health Code, or Title 62A, Utah Human
463	Services Code], the department shall have the power to adopt, amend, or rescind
464	rules necessary to carry out the provisions of this title.
465	(b) If the adoption of rules under a provision of this title is subject to concurrence
466	between the department and a committee created under this title and no concurrence
467	can be reached, the department has final authority to adopt, amend, or rescind rules
468	necessary to carry out the provisions of this title.
469	(c) When the provisions of this title require concurrence between the department and a
470	committee created under this title:

471	(i) the department shall report to and update the committee on a regular basis related
472	to matters requiring concurrence; and
473	(ii) the committee shall review the report submitted by the department under this
474	Subsection (1)(c) and shall:
475	(A) concur with the report; or
476	(B) provide a reason for not concurring with the report and provide an alternative
477	recommendation to the department.
478	(2) Rules shall have the force and effect of law and may deal with matters which materially
479	affect the security of health or the preservation and improvement of public health in the
480	state, and any matters as to which jurisdiction is conferred upon the department by this
481	title.
482	(3) Every rule adopted by the department, or by the concurrence of the department and a
483	committee established under Section 26B-1-204, is subject to Title 63G, Chapter 3, Utah
484	Administrative Rulemaking Act, and is effective at the time and in the manner provided
485	in that act.
486	(4) If, at the next general session of the Legislature following the filing of a rule with the
487	legislative research director, the Legislature passes a bill disapproving such rule, the rule
488	shall be null and void.
489	(5) The department, or the department in concurrence with a committee created under
490	Section 26B-1-204, may not adopt a rule identical to a rule disapproved under
491	Subsection (4) of this section before the beginning of the next general session of the
492	Legislature following the general session at which the rule was disapproved.
493	(6) The department and all committees, boards, divisions, and offices created under this title[,
494	Title 26, Utah Health Code, or Title 62A, Utah Human Services Code,] shall comply
495	with the procedures and requirements of Title 63G, Chapter 4, Administrative
496	Procedures Act, in any adjudicative proceedings.
497	(7)(a) The department may hold hearings, administer oaths, subpoena witnesses, and
498	take testimony in matters relating to the exercise and performance of the powers and
499	duties vested in or imposed upon the department.
500	(b) The department may, at the department's sole discretion, contract with any other
501	agency or department of the state to conduct hearings in the name of the department.
502	Section 7. Section <b>26B-1-216</b> is amended to read:
503	26B-1-216. Powers and duties of the department Quality and design.
504	The department shall:

505	(1) monitor and evaluate the quality of services provided by the department including:
506	(a) in accordance with Part 5, Fatality Review, monitoring, reviewing, and making
507	recommendations relating to a fatality review;
508	(b) overseeing the duties of the child protection ombudsman appointed under Section
509	80-2-1104; and
510	(c) conducting internal evaluations of the quality of services provided by the department
511	and service providers contracted with the department;
512	(2) conduct investigations described in Section 80-2-703;
513	(3) develop an integrated human services system and implement a system of care by:
514	(a) designing and implementing a comprehensive continuum of services for individuals
515	who receive services from the department or a service provider contracted with the
516	department;
517	(b) establishing and maintaining department contracts with public and private service
518	providers;
519	(c) establishing standards for the use of service providers who contract with the
520	department;
521	(d) coordinating a service provider network to be used within the department to ensure
522	individuals receive the appropriate type of services;
523	(e) centralizing the department's administrative operations; and
524	(f) integrating, analyzing, and applying department-wide data and research to monitor
525	the quality, effectiveness, and outcomes of services provided by the department;[-and]
526	(4)(a) coordinate with the Driver License Division, the Department of Public Safety, and
527	any other law enforcement agency to test and provide results of blood or urine
528	samples submitted to the department as part of an investigation for a driving offense
529	that may have occurred and there is reason to believe the individual's blood or urine
530	may contain:
531	(i) alcohol; or
532	(ii) other drugs or substances that the department reasonably determines could impair
533	an individual or that is illegal for the individual to possess or consume; and
534	(b) ensure that the results of the test described in Subsection (4)(a) are provided through
535	a secure medium and in a timely manner[-];
536	(5) use available data to structure programs and activities to ensure populations have access
537	to health and wellness education, information, resources, and services;
538	(6) efficiently use funding and resources to promote health and safety; and

539	(7) include an understanding of the impacted populations and supporting data in staff
540	training.
541	Section 8. Section 26B-1-219 is amended to read:
542	26B-1-219. Requirements for issuing, recommending, or facilitating rationing
543	criteria.
544	(1) As used in this section:
545	(a) "Health care resource" means:
546	(i) health care as defined in Section 78B-3-403;
547	(ii) a prescription drug as defined in Section 58-17b-102;
548	(iii) a prescription device as defined in Section 58-17b-102;
549	(iv) a nonprescription drug as defined in Section 58-17b-102; or
550	(v) any supply or treatment that is intended for use in the course of providing health
551	care as defined in Section 78B-3-403.
552	(b)(i) "Rationing criteria" means any requirement, guideline, process, or
553	recommendation regarding:
554	(A) the distribution of a scarce health care resource; or
555	(B) qualifications or criteria for a person to receive a scarce health care resource.
556	(ii) "Rationing criteria" includes crisis standards of care with respect to any health
557	care resource.
558	(c) "Scarce health care resource" means a health care resource:
559	(i) for which the need for the health care resource in the state or region significantly
560	exceeds the available supply of that health care resource in that state or region;
561	(ii) that, based on the circumstances described in Subsection (1)(c)(i), is distributed
562	or provided using written requirements, guidelines, processes, or
563	recommendations as a factor in the decision to distribute or provide the health care
564	resource; and
565	(iii) that the federal government has allocated to the state to distribute.
566	(2)(a) On or before July 1, 2022, the department shall make rules in accordance with
567	Title 63G, Chapter 3, Utah Administrative Rulemaking Act, to establish a procedure
568	that the department will follow to adopt, modify, require, facilitate, or recommend
569	rationing criteria.
570	(b) Beginning July 1, 2022, the department may not adopt, modify, require, facilitate, or
571	recommend rationing criteria unless the department follows the procedure established
572	by the department under Subsection (2)(a).

5/3	(3) The procedures developed by the department under Subsection (2) shall include, at a
574	minimum:
575	(a) a requirement that the department notify the following individuals in writing before
576	rationing criteria are issued, are recommended, or take effect:
577	(i) the Rules Review and General Oversight Committee created in Section 36-35-102;
578	(ii) the governor or the governor's designee;
579	(iii) the president of the Senate or the president's designee;
580	(iv) the speaker of the House of Representatives or the speaker's designee;
581	(v) the executive director or the executive director's designee; and
582	(vi) if rationing criteria affect hospitals in the state, a representative of an association
583	representing hospitals throughout the state, as designated by the executive
584	director; and
585	(b) procedures for an emergency circumstance which shall include, at a minimum:
586	(i) a description of the circumstances under which emergency procedures described
587	in this Subsection (3)(b) may be used; and
588	(ii) a requirement that the department notify the individuals described in Subsections
589	(3)(a)(i) through (vi) as soon as practicable, but no later than 48 hours after the
590	rationing criteria take effect.
591	[(4)(a) Within 30 days after March 22, 2022, the department shall send to the Rules
592	Review and General Oversight Committee all rationing criteria that:]
593	[(i) were adopted, modified, required, facilitated, or recommended by the department
594	prior to March 22, 2022; and]
595	[(ii) on March 22, 2022, were in effect and in use to distribute or qualify a person to
596	receive scarce health care resources.]
597	[(b) During the 2022 interim, the Rules Review and General Oversight Committee shall,
598	under Subsection 36-35-102(3)(c), review each of the rationing criteria submitted by
599	the department under this Subsection (4).]
600	[(5)] (4) The requirements described in this section and rules made under this section shall
601	apply regardless of whether rationing criteria:
602	(a) have the force and effect of law, or is solely advisory, informative, or descriptive;
603	(b) are carried out or implemented directly or indirectly by the department or by other
604	individuals or entities; or
605	(c) are developed solely by the department or in collaboration with other individuals or
606	entities

607	$\left[\frac{(6)}{(5)}\right]$ This section:
608	(a) may not be suspended under Section 53-2a-209 or any other provision of state law
609	relating to a state of emergency;
610	(b) does not limit a private entity from developing or implementing rationing criteria; and
611	(c) does not require the department to adopt, modify, require, facilitate, or recommend
612	rationing criteria that the department does not determine to be necessary or
613	appropriate.
614	[(7)] (6) Subsection (2) does not apply to rationing criteria that are adopted, modified,
615	required, facilitated, or recommended by the department:
616	(a) through the regular, non-emergency rulemaking procedure described in Section
617	63G-3-301;
618	(b) if the modification is solely to correct a technical error in rationing criteria such as
619	correcting obvious errors and inconsistencies including those involving punctuation,
620	capitalization, cross references, numbering, and wording;
621	(c) to the extent that compliance with this section would result in a direct violation of
622	federal law;
623	(d) that are necessary for administration of the Medicaid program;
624	(e) if state law explicitly authorizes the department to engage in rulemaking to establish
625	rationing criteria; or
626	(f) if rationing criteria are authorized directly through a general appropriation bill that is
627	validly enacted.
628	Section 9. Section <b>26B-1-235</b> is amended to read:
629	26B-1-235. Request for proposal required for non-state supplied services.
630	[(1) As used in this section:]
631	[(a) "AED" means the same as that term is defined in Section 26B-4-325.]
632	[(b) "Office" means the Office of Emergency Medical Services and Preparedness within
633	the department.]
634	[(c) "Sudden cardiac arrest" means the same as that term is defined in Section 26B-4-325.]
635	[(2)] (1) Funds provided to the department through Sections 51-9-201 and 59-14-204 to be
636	used to provide services, shall be awarded to non-governmental entities based on a
637	competitive process consistent with Title 63G, Chapter 6a, Utah Procurement Code.
638	[(3)] (2) Beginning July 1, 2010, and not more than every five years thereafter, the
639	department shall issue requests for proposals for new or renewing contracts to award
640	funding for programs under Subsection (1).

641	Section 10. Section <b>26B-1-334</b> is amended to read:
642	26B-1-334 . Licensed Provider Assessment Fund Creation Deposits Uses.
643	(1) There is created an expendable special revenue fund known as the "Licensed Provider
644	Assessment Fund" consisting of:
645	(a) the assessments collected under, and any interest and penalties levied with the
646	administration of:
647	(i) [Title 26B, Chapter 2, Part 2, Health Care Facility Licensing and Inspection Act]
648	Chapter 2, Part 2, Health Care Facility Licensing and Inspection;
649	(ii) [Title 26B, Chapter 1, Part 4, Child Care Licensing] Chapter 2, Part 1, Human
650	Services Programs and Facilities; and
651	(iii) [Title 26B, Chapter 2, Part 1, Human Services Programs and Facilities] Chapter
652	2, Part 4, Child Care Licensing;
653	(b) money appropriated or otherwise made available by the Legislature; and
654	(c) any interest earned on the fund.
655	(2) Money in the fund may only be used by the department:
656	(a) for upgrades to and maintenance of licensing databases and applications;
657	(b) for training for providers and staff;
658	(c) to assist individuals during a facility shutdown; or
659	(d) for administrative expenses, if the administrative expenses for the fiscal year do not
660	exceed 3% of the money deposited into the fund during the fiscal year.
661	Section 11. Section <b>26B-3-804</b> is amended to read:
662	26B-3-804 . Medicaid ambulance service provider adjustment under
663	fee-for-service rates.
664	The division shall, if the assessment imposed by this part is approved by the Centers for
665	Medicare and Medicaid Services, for fee-for-service rates effective on or after July 1, 2015,
666	reimburse an ambulance service provider in an amount up to the Emergency Medical Services
667	Ambulance Rates adopted annually by the [department] Department of Public Safety.
668	Section 12. Section <b>26B-4-301</b> is amended to read:
669	26B-4-301 . Definitions.
670	As used in this part:
671	(1) "Committee" means the Primary Care Grant Committee described in Section 26B-1-410.
672	(2) "Community based organization":
673	(a) means a private entity; and
674	(b) includes for profit and not for profit entities.

675	(3) "Cultural competence" means a set of congruent behaviors, attitudes, and policies that
676	come together in a system, agency, or profession and enables that system, agency, or
677	profession to work effectively in cross-cultural situations.

- [(4) "Emergency medical dispatch center" means a public safety answering point, as
   defined in Section 63H-7a-103, that is designated as an emergency medical dispatch
   center by the office.]
- 681 [(5)] (4) "Health literacy" means the degree to which an individual has the capacity to obtain, process, and understand health information and services needed to make appropriate health decisions.
- [(6)] (5) "Institutional capacity" means the ability of a community based organization to implement public and private contracts.
- 686 [(7)] (6) "Medically underserved population" means the population of an urban or rural area 687 or a population group that the committee determines has a shortage of primary health 688 care.
- [(8) "Office" means the Office of Emergency Medical Services and Preparedness within the department.]
- 691 [(9)] (7) "Pregnancy support services" means services that:
- (a) encourage childbirth instead of voluntary termination of pregnancy; and
- (b) assist pregnant women, or women who may become pregnant, to choose childbirth whether they intend to parent or select adoption for the child.
- [(10)] (8) "Primary care grant" means a grant awarded by the department under Subsection 26B-4-310(1).
- 697 [(11)] (9)(a) "Primary health care" means:
- (i) basic and general health care services given when a person seeks assistance to screen for or to prevent illness and disease, or for simple and common illnesses and injuries; and
- 701 (ii) care given for the management of chronic diseases.
- 702 (b) "Primary health care" includes:

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- (i) services of physicians, nurses, physician's assistants, and dentists licensed to practice in this state under Title 58, Occupations and Professions;
- 705 (ii) diagnostic and radiologic services;
- 706 (iii) preventive health services including perinatal services, well-child services, and 707 other services that seek to prevent disease or its consequences;
- 708 (iv) emergency medical services;

709	(v) preventive dental services; and
710	(vi) pharmaceutical services.
711	Section 13. Section <b>26B-4-406</b> is amended to read:
712	26B-4-406 . Voluntary participation.
713	(1) Sections 26B-4-406 through 26B-4-411 do not create a duty or standard of care for:
714	(a) a person to be trained in the use and storage of epinephrine auto-injectors or stock
715	albuterol; or
716	(b) except as provided in Subsection (5), a qualified epinephrine auto-injector entity to
717	store epinephrine auto-injectors or a qualified stock albuterol entity to store stock
718	albuterol on its premises.
719	(2) Except as provided in Subsections (3) and (5), a decision by a person to successfully
720	complete a training program under Section 26B-4-407 or 26B-4-408 and to make
721	emergency epinephrine auto-injectors or stock albuterol available under the provisions
722	of Sections 26B-4-406 through 26B-4-411 is voluntary.
723	(3) A school, school board, or school official may not prohibit or dissuade a teacher or
724	other school employee at a primary or secondary school in the state, either public or
725	private, from:
726	(a) completing a training program under Section 26B-4-407 or 26B-4-408;
727	(b) possessing or storing an epinephrine auto-injector or stock albuterol on school
728	property if:
729	(i) the teacher or school employee is a qualified adult; and
730	(ii) the possession and storage is in accordance with the training received under
731	Section 26B-4-407 or 26B-4-408; or
732	(c) administering an epinephrine auto-injector or stock albuterol to any person, if:
733	(i) the teacher or school employee is a qualified adult; and
734	(ii) the administration is in accordance with the training received under Section
735	26B-4-407 or 26B-4-408.
736	(4) A school, school board, or school official may encourage a teacher or other school
737	employee to volunteer to become a qualified adult.
738	(5)(a) Each primary or secondary school in the state, both public and private, shall make
739	an emergency epinephrine auto-injector available to any teacher or other school
740	employee who:
741	(i) is employed at the school; and
742	(ii) is a qualified adult.

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the state, or a school nurse:

743	(b) This section does not require a school described in Subsection (5)(a) to keep more
744	than one emergency epinephrine auto-injector on the school premises, so long as it
745	may be quickly accessed by a teacher or other school employee, who is a qualified
746	adult, in the event of an emergency.
747	(6)(a) Each primary or secondary school in the state, both public and private, may make
748	stock albuterol available to any school employee who:
749	(i) is employed at the school; and
750	(ii) is a qualified adult.
751	(b) A qualified adult may administer stock albuterol to a student who:
752	(i) has a diagnosis of asthma by a health care provider;
753	(ii) except as provided in Subsection (6)(d), has a current asthma action plan on file
754	with the school; and
755	(iii) except as provided in Subsection (6)(d), is showing symptoms of an asthma
756	emergency as described in the student's asthma action plan.
757	(c) This Subsection (6) may not be interpreted to relieve a student's parent or guardian of
758	providing a student's medication or create an expectation that a school will have stock
759	albuterol available.
760	(d) A qualified adult may administer stock albuterol to any student who appears to be
761	experiencing respiratory distress or an asthma emergency on the qualified adult's
762	training under Section 26-4-408 and regardless of whether a current asthma plan is on
763	<u>file.</u>
764	(7) No school, school board, or school official shall retaliate or otherwise take adverse
765	action against a teacher or other school employee for:
766	(a) volunteering under Subsection (2);
767	(b) engaging in conduct described in Subsection (3); or
768	(c) failing or refusing to become a qualified adult.
769	Section 14. Section <b>26B-4-409</b> is amended to read:
770	26B-4-409. Authority to obtain and use an epinephrine auto-injector or stock
771	albuterol.
772	(1) The school district physician, a department health care provider, the medical director of
773	the local health department, or the local emergency medical services director may
774	provide a prescription for the following if requested by a qualified adult, who is a

teacher or other school employee at a public or private primary or secondary school in

777	(a) epinephrine auto-injectors for use in accordance with this part; or
778	(b) stock albuterol for use in accordance with this part.
779	(2)(a) A qualified adult may obtain an epinephrine auto-injector for use in accordance
780	with this part that is dispensed by:
781	(i) a pharmacist as provided under Section 58-17b-1004; or
782	(ii) a pharmacy intern as provided under Section 58-17b-1004.
783	(b) A qualified adult may obtain stock albuterol for use in accordance with this part that
784	is dispensed by:
785	(i) a pharmacist as provided under Section 58-17b-1004; or
786	(ii) a pharmacy intern as provided under Section 58-17b-1004.
787	(3) A qualified adult:
788	(a) may immediately administer an epinephrine auto-injector to a person exhibiting
789	potentially life-threatening symptoms of anaphylaxis when a physician or physician
790	assistant is not immediately available; and
791	(b) shall initiate emergency medical services or other appropriate medical follow-up in
792	accordance with the training materials retained under Section 26B-4-407 after
793	administering an epinephrine auto-injector.
794	(4)(a) If a school nurse is not immediately available, a qualified adult[÷]
795	[(a)] _may immediately administer stock albuterol to an individual who:
796	(i) has a diagnosis of asthma by a health care provider;
797	(ii) has a current asthma action plan on file with the school; and
798	(iii) is showing symptoms of an asthma emergency as described in the student's
799	asthma action plan[; and] .
800	(b) If a school nurse is not immediately available and an individual does not have a current asthma
	action plan described in Subsection (4)(a), a qualified adult may administer stock albuterol
	to the individual if the qualified adult identifies, based on the training received under Section
	26B-4-408, that the individual is experiencing an asthma emergency.
801	(c) A qualified adult that administers stock albuterol under this Subsection (4) shall
802	initiate appropriate medical follow-up in accordance with the training materials
803	retained under Section 26B-4-408 after administering stock albuterol.
804	(5)(a) A qualified entity that complies with Subsection (5)(b) or (c), may obtain a supply
805	of epinephrine auto-injectors or stock albuterol, respectively, from a pharmacist
806	under Section 58-17b-1004, or a pharmacy intern under Section 58-17b-1004 for:
807	(i) storing:

808	(A) the epinephrine auto-injectors on the qualified epinephrine auto-injector
809	entity's premises; and
810	(B) stock albuterol on the qualified stock albuterol entity's premises; and
811	(ii) use by a qualified adult in accordance with Subsection (3) or (4).
812	(b) A qualified epinephrine auto-injector entity shall:
813	(i) designate an individual to complete an initial and annual refresher training
814	program regarding the proper storage and emergency use of an epinephrine
815	auto-injector available to a qualified adult; and
816	(ii) store epinephrine auto-injectors in accordance with the standards established by
817	the department in Section 26B-4-411.
818	(c) A qualified stock albuterol entity shall:
819	(i) designate an individual to complete an initial and annual refresher training
820	program regarding the proper storage and emergency use of stock albuterol
821	available to a qualified adult; and
822	(ii) store stock albuterol in accordance with the standards established by the
823	department in Section 26B-4-411.
824	Section 15. Section <b>26B-4-501</b> is amended to read:
825	26B-4-501 . Definitions.
826	As used in this part:
826 827	As used in this part:  (1) "Controlled substance" means the same as that term is defined in Title 58, Chapter 37,
	•
827	(1) "Controlled substance" means the same as that term is defined in Title 58, Chapter 37,
827 828	(1) "Controlled substance" means the same as that term is defined in Title 58, Chapter 37, Utah Controlled Substances Act.
827 828 829	<ul> <li>(1) "Controlled substance" means the same as that term is defined in Title 58, Chapter 37, Utah Controlled Substances Act.</li> <li>(2) "Critical access hospital" means a critical access hospital that meets the criteria of 42</li> </ul>
827 828 829 830	<ol> <li>"Controlled substance" means the same as that term is defined in Title 58, Chapter 37, Utah Controlled Substances Act.</li> <li>"Critical access hospital" means a critical access hospital that meets the criteria of 42 U.S.C. Sec. 1395i-4(c)(2)[-(1998)].</li> </ol>
827 828 829 830 831	<ol> <li>"Controlled substance" means the same as that term is defined in Title 58, Chapter 37, Utah Controlled Substances Act.</li> <li>"Critical access hospital" means a critical access hospital that meets the criteria of 42 U.S.C. Sec. 1395i-4(c)(2)[-(1998)].</li> <li>"Designated facility" means:</li> </ol>
827 828 829 830 831 832	<ol> <li>"Controlled substance" means the same as that term is defined in Title 58, Chapter 37, Utah Controlled Substances Act.</li> <li>"Critical access hospital" means a critical access hospital that meets the criteria of 42 U.S.C. Sec. 1395i-4(c)(2)[-(1998)].</li> <li>"Designated facility" means:         <ul> <li>(a) a freestanding urgent care center;</li> </ul> </li> </ol>
827 828 829 830 831 832 833	<ul> <li>(1) "Controlled substance" means the same as that term is defined in Title 58, Chapter 37, Utah Controlled Substances Act.</li> <li>(2) "Critical access hospital" means a critical access hospital that meets the criteria of 42 U.S.C. Sec. 1395i-4(c)(2)[-(1998)].</li> <li>(3) "Designated facility" means: <ul> <li>(a) a freestanding urgent care center;</li> <li>(b) a general acute hospital; or</li> </ul> </li> </ul>
827 828 829 830 831 832 833 834	<ul> <li>(1) "Controlled substance" means the same as that term is defined in Title 58, Chapter 37, Utah Controlled Substances Act.</li> <li>(2) "Critical access hospital" means a critical access hospital that meets the criteria of 42 U.S.C. Sec. 1395i-4(c)(2)[-(1998)].</li> <li>(3) "Designated facility" means: <ul> <li>(a) a freestanding urgent care center;</li> <li>(b) a general acute hospital; or</li> <li>(c) a critical access hospital.</li> </ul> </li> </ul>
827 828 829 830 831 832 833 834 835	<ul> <li>(1) "Controlled substance" means the same as that term is defined in Title 58, Chapter 37, Utah Controlled Substances Act.</li> <li>(2) "Critical access hospital" means a critical access hospital that meets the criteria of 42 U.S.C. Sec. 1395i-4(c)(2)[-(1998)].</li> <li>(3) "Designated facility" means: <ul> <li>(a) a freestanding urgent care center;</li> <li>(b) a general acute hospital; or</li> <li>(c) a critical access hospital.</li> </ul> </li> <li>(4) "Dispense" means the same as that term is defined in Section 58-17b-102.</li> </ul>
827 828 829 830 831 832 833 834 835 836	<ol> <li>"Controlled substance" means the same as that term is defined in Title 58, Chapter 37,         Utah Controlled Substances Act.</li> <li>"Critical access hospital" means a critical access hospital that meets the criteria of 42         U.S.C. Sec. 1395i-4(c)(2)[-(1998)].</li> <li>"Designated facility" means:         <ul> <li>(a) a freestanding urgent care center;</li> <li>(b) a general acute hospital; or</li> <li>(c) a critical access hospital.</li> </ul> </li> <li>"Dispense" means the same as that term is defined in Section 58-17b-102.</li> <li>"Division" means the Division of Professional Licensing created in Section 58-1-103.</li> </ol>
827 828 829 830 831 832 833 834 835 836 837	<ol> <li>"Controlled substance" means the same as that term is defined in Title 58, Chapter 37,         Utah Controlled Substances Act.</li> <li>"Critical access hospital" means a critical access hospital that meets the criteria of 42         U.S.C. Sec. 1395i-4(c)(2)[-(1998)].</li> <li>"Designated facility" means:         <ul> <li>(a) a freestanding urgent care center;</li> <li>(b) a general acute hospital; or</li> <li>(c) a critical access hospital.</li> </ul> </li> <li>"Dispense" means the same as that term is defined in Section 58-17b-102.</li> <li>"Division" means the Division of Professional Licensing created in Section 58-1-103.</li> <li>"Emergency contraception" means the use of a substance, approved by the United States</li> </ol>
827 828 829 830 831 832 833 834 835 836 837	<ol> <li>"Controlled substance" means the same as that term is defined in Title 58, Chapter 37, Utah Controlled Substances Act.</li> <li>"Critical access hospital" means a critical access hospital that meets the criteria of 42 U.S.C. Sec. 1395i-4(c)(2)[-(1998)].</li> <li>"Designated facility" means:         <ul> <li>(a) a freestanding urgent care center;</li> <li>(b) a general acute hospital; or</li> <li>(c) a critical access hospital.</li> </ul> </li> <li>"Dispense" means the same as that term is defined in Section 58-17b-102.</li> <li>"Division" means the Division of Professional Licensing created in Section 58-1-103.</li> <li>"Emergency contraception" means the use of a substance, approved by the United States Food and Drug Administration, to prevent pregnancy after sexual intercourse.</li> </ol>

- 842 (9) "Health care facility" means a hospital, a hospice inpatient residence, a nursing facility,
- a dialysis treatment facility, an assisted living residence, an entity that provides home-
- and community-based services, a hospice or home health care agency, or another facility
- that provides or contracts to provide health care services, which facility is licensed under
- Chapter 2, Part 2, Health Care Facility Licensing and Inspection.
- 847 (10) "Health care provider" means:
- 848 (a) a physician, as defined in Section 58-67-102;
- (b) an advanced practice registered nurse, as defined in Section 58-31b-102;
- 850 (c) a physician assistant, as defined in Section 58-70a-102; or
- 851 (d) an individual licensed to engage in the practice of dentistry, as defined in Section
- 852 58-69-102.
- 853 (11) "Increased risk" means risk exceeding the risk typically experienced by an individual
- who is not using, and is not likely to use, an opiate.
- 855 (12) "Opiate" means the same as that term is defined in Section 58-37-2.
- 856 (13) "Opiate antagonist" means naloxone hydrochloride or any similarly acting drug that is
- not a controlled substance and that is approved by the federal Food and Drug
- Administration for the diagnosis or treatment of an opiate-related drug overdose.
- 859 (14) "Opiate-related drug overdose event" means an acute condition, including a decreased
- level of consciousness or respiratory depression resulting from the consumption or use
- of a controlled substance, or another substance with which a controlled substance was
- combined, and that a person would reasonably believe to require medical assistance.
- 863 (15) "Overdose outreach provider" means:
- (a) a law enforcement agency;
- (b) a fire department;
- 866 (c) an emergency medical service provider, as defined in Section [26B-4-101] 53-2d-101;
- (d) emergency medical service personnel, as defined in Section [26B-4-101] 53-2d-101;
- 868 (e) an organization providing treatment or recovery services for drug or alcohol use;
- 869 (f) an organization providing support services for an individual, or a family of an individual, with a substance use disorder;
- (g) a certified peer support specialist, as defined in Section 26B-5-610;
- (h) an organization providing substance use or mental health services under contract
- with a local substance abuse authority, as defined in Section 26B-5-101, or a local
- mental health authority, as defined in Section 26B-5-101;
- (i) an organization providing services to the homeless;

- (j) a local health department;
- (k) an individual licensed to practice under:
- (i) Title 58, Chapter 17b, Pharmacy Practice Act;
- 879 (ii) Title 58, Chapter 60, Part 2, Social Worker Licensing Act; or
- (iii) Title 58, Chapter 60, Part 5, Substance Use Disorder Counselor Act; or
- 881 (l) an individual.
- 882 (16) "Patient counseling" means the same as that term is defined in Section 58-17b-102.
- 883 (17) "Pharmacist" means the same as that term is defined in Section 58-17b-102.
- 884 (18) "Pharmacy intern" means the same as that term is defined in Section 58-17b-102.
- 885 (19) "Physician" means the same as that term is defined in Section 58-67-102.
- 886 (20) "Practitioner" means:
- 887 (a) a physician; or
- (b) any other person who is permitted by law to prescribe emergency contraception.
- 889 (21) "Prescribe" means the same as that term is defined in Section 58-17b-102.
- 890 (22)(a) "Self-administered hormonal contraceptive" means a self-administered hormonal
- contraceptive that is approved by the United States Food and Drug Administration to
- prevent pregnancy.
- (b) "Self-administered hormonal contraceptive" includes an oral hormonal contraceptive,
- a hormonal vaginal ring, and a hormonal contraceptive patch.
- 895 (c) "Self-administered hormonal contraceptive" does not include any drug intended to
- induce an abortion, as that term is defined in Section 76-7-301.
- 897 (23) "Sexual assault" means any criminal conduct described in Title 76, Chapter 5, Part 4,
- Sexual Offenses, that may result in a pregnancy.
- 899 (24) "Victim of sexual assault" means any person who presents to receive, or receives,
- medical care in consequence of being subjected to sexual assault.
- 901 Section 16. Section **26B-5-101** is amended to read:
- 902 **26B-5-101**. Chapter definitions.
- 903 As used in this chapter:
- 904 (1) "Criminal risk factors" means a person's characteristics and behaviors that:
- 905 (a) affect the person's risk of engaging in criminal behavior; and
- 906 (b) are diminished when addressed by effective treatment, supervision, and other support resources, resulting in reduced risk of criminal behavior.
- 908 (2) "Director" means the director appointed under Section 26B-5-103.
- 909 (3) "Division" means the Division of Integrated Healthcare created in Section [26B-1-1202]

910 26B-3-102. 911 (4) "Local mental health authority" means a county legislative body. 912 (5) "Local substance abuse authority" means a county legislative body. 913 (6) "Mental health crisis" means: 914 (a) a mental health condition that manifests in an individual by symptoms of sufficient severity that a prudent layperson who possesses an average knowledge of mental 915 916 health issues could reasonably expect the absence of immediate attention or 917 intervention to result in: 918 (i) serious danger to the individual's health or well-being; or 919 (ii) a danger to the health or well-being of others; or 920 (b) a mental health condition that, in the opinion of a mental health therapist or the 921 therapist's designee, requires direct professional observation or intervention. 922 (7) "Mental health crisis response training" means community-based training that educates 923 laypersons and professionals on the warning signs of a mental health crisis and how to 924 respond. 925 (8) "Mental health crisis services" means an array of services provided to an individual who 926 experiences a mental health crisis, which may include: 927 (a) direct mental health services; 928 (b) on-site intervention provided by a mobile crisis outreach team; 929 (c) the provision of safety and care plans; 930 (d) prolonged mental health services for up to 90 days after the day on which an 931 individual experiences a mental health crisis; 932 (e) referrals to other community resources; 933 (f) local mental health crisis lines; and 934 (g) the statewide mental health crisis line. 935 (9) "Mental health therapist" means the same as that term is defined in Section 58-60-102. 936 (10) "Mobile crisis outreach team" or "MCOT" means a mobile team of medical and mental 937 health professionals that, in coordination with local law enforcement and emergency 938 medical service personnel, provides mental health crisis services. 939 (11) "Office" means the Office of Substance Use and Mental Health created in Section 940 26B-5-102. 941 (12)(a) "Public funds" means federal money received from the department, and state 942 money appropriated by the Legislature to the department, a county governing body,

or a local substance abuse authority, or a local mental health authority for the

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- purposes of providing substance abuse or mental health programs or services.
- 945 (b) "Public funds" include federal and state money that has been transferred by a local 946 substance abuse authority or a local mental health authority to a private provider 947 under an annual or otherwise ongoing contract to provide comprehensive substance 948 abuse or mental health programs or services for the local substance abuse authority or 949 local mental health authority. The money maintains the nature of "public funds" 950 while in the possession of the private entity that has an annual or otherwise ongoing 951 contract with a local substance abuse authority or a local mental health authority to 952 provide comprehensive substance use or mental health programs or services for the 953 local substance abuse authority or local mental health authority.
  - (c) Public funds received for the provision of services under substance use or mental health service plans may not be used for any other purpose except those authorized in the contract between the local mental health or substance abuse authority and provider for the provision of plan services.
- 958 (13) "Severe mental disorder" means schizophrenia, major depression, bipolar disorders, 959 delusional disorders, psychotic disorders, and other mental disorders as defined by the 960 division.
- 961 (14) "Stabilization services" means in-home services provided to a child with, or who is at 962 risk for, complex emotional and behavioral needs, including teaching the child's parent 963 or guardian skills to improve family functioning.
- 964 (15) "Statewide mental health crisis line" means the same as that term is defined in Section 26B-5-610.
- 966 (16) "System of care" means a broad, flexible array of services and supports that:
  - (a) serve a child with or who is at risk for complex emotional and behavioral needs;
- 968 (b) are community based;
- 969 (c) are informed about trauma;
- 970 (d) build meaningful partnerships with families and children;
- 971 (e) integrate service planning, service coordination, and management across state and local entities;
- 973 (f) include individualized case planning;
- 974 (g) provide management and policy infrastructure that supports a coordinated network of 975 interdepartmental service providers, contractors, and service providers who are 976 outside of the department; and
  - (h) are guided by the type and variety of services needed by a child with or who is at risk

978	for complex emotional and behavioral needs and by the child's family.
979	[(17) "Targeted case management" means a service that assists Medicaid recipients in a
980	target group to gain access to needed medical, social, educational, and other services.]
981	Section 17. Section 26B-5-102 is amended to read:
982	26B-5-102. Division of Integrated Healthcare Office of Substance Use and
983	Mental Health Creation Responsibilities.
984	(1)(a) The Division of Integrated Healthcare shall exercise responsibility over the
985	policymaking functions, regulatory and enforcement powers, rights, duties, and
986	responsibilities outlined in state law that were previously vested in the Division of
987	Substance Abuse and Mental Health within the department, under the administration
988	and general supervision of the executive director.
989	(b) The division is the substance abuse authority and the mental health authority for this
990	state.
991	(c) There is created the Office of Substance Use and Mental Health within the division.
992	(d) The office shall exercise the responsibilities, powers, rights, duties, and
993	responsibilities assigned to the office by the executive director.
994	(2) The division shall:
995	(a)(i) educate the general public regarding the nature and consequences of substance
996	use by promoting school and community-based prevention programs;
997	(ii) render support and assistance to public schools through approved school-based
998	substance abuse education programs aimed at prevention of substance use;
999	(iii) promote or establish programs for the prevention of substance use within the
1000	community setting through community-based prevention programs;
1001	(iv) cooperate with and assist treatment centers, recovery residences, and other
1002	organizations that provide services to individuals recovering from a substance use
1003	disorder, by identifying and disseminating information about effective practices
1004	and programs;
1005	(v) promote integrated programs that address an individual's substance use, mental
1006	health, and physical health;
1007	(vi) establish and promote an evidence-based continuum of screening, assessment,
1008	prevention, treatment, and recovery support services in the community for
1009	individuals with a substance use disorder or mental illness;
1010	(vii) evaluate the effectiveness of programs described in this Subsection (2);
1011	(viii) consider the impact of the programs described in this Subsection (2) on:

1012	(A) emergency department utilization;
1013	(B) jail and prison populations;
1014	(C) the homeless population; and
1015	(D) the child welfare system; and
1016	(ix) promote or establish programs for education and certification of instructors to
1017	educate individuals convicted of driving under the influence of alcohol or drugs or
1018	driving with any measurable controlled substance in the body;
1019	(b)(i) collect and disseminate information pertaining to mental health;
1020	(ii) provide direction over the state hospital including approval of the state hospital's
1021	budget, administrative policy, and coordination of services with local service
1022	plans;
1023	(iii) make rules in accordance with Title 63G, Chapter 3, Utah Administrative
1024	Rulemaking Act, to educate families concerning mental illness and promote
1025	family involvement, when appropriate, and with patient consent, in the treatment
1026	program of a family member;
1027	(iv) make rules in accordance with Title 63G, Chapter 3, Utah Administrative
1028	Rulemaking Act, to direct that an individual receiving services through a local
1029	mental health authority or the Utah State Hospital be informed about and, if
1030	desired by the individual, provided assistance in the completion of a declaration
1031	for mental health treatment in accordance with Section 26B-5-313; and
1032	(v) to the extent authorized and in accordance with statute, make rules in accordance
1033	with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, that:
1034	(A) create a certification for [targeted case management] case managers;
1035	(B) establish training and certification requirements;
1036	(C) specify the types of services each certificate holder is qualified to provide;
1037	(D) specify the type of supervision under which a certificate holder is required to
1038	operate; and
1039	(E) specify continuing education and other requirements for maintaining or
1040	renewing certification;
1041	(c)(i) consult and coordinate with local substance abuse authorities and local mental
1042	health authorities regarding programs and services;
1043	(ii) provide consultation and other assistance to public and private agencies and
1044	groups working on substance use and mental health issues;
1045	(iii) promote and establish cooperative relationships with courts, hospitals, clinics,

1046	medical and social agencies, public health authorities, law enforcement agencies,
1047	education and research organizations, and other related groups;
1048	(iv) promote or conduct research on substance use and mental health issues, and
1049	submit to the governor and the Legislature recommendations for changes in policy
1050	and legislation;
1051	(v) receive, distribute, and provide direction over public funds for substance use and
1052	mental health services;
1053	(vi) monitor and evaluate programs provided by local substance abuse authorities and
1054	local mental health authorities;
1055	(vii) examine expenditures of local, state, and federal funds;
1056	(viii) monitor the expenditure of public funds by:
1057	(A) local substance abuse authorities;
1058	(B) local mental health authorities; and
1059	(C) in counties where they exist, a private contract provider that has an annual or
1060	otherwise ongoing contract to provide comprehensive substance abuse or
1061	mental health programs or services for the local substance abuse authority or
1062	local mental health authority;
1063	(ix) contract with local substance abuse authorities and local mental health authorities
1064	to provide a comprehensive continuum of services that include community-based
1065	services for individuals involved in the criminal justice system, in accordance with
1066	division policy, contract provisions, and the local plan;
1067	(x) contract with private and public entities for special statewide or nonclinical
1068	services, or services for individuals involved in the criminal justice system,
1069	according to division rules;
1070	(xi) review and approve each local substance abuse authority's plan and each local
1071	mental health authority's plan in order to ensure:
1072	(A) a statewide comprehensive continuum of substance use services;
1073	(B) a statewide comprehensive continuum of mental health services;
1074	(C) services result in improved overall health and functioning;
1075	(D) a statewide comprehensive continuum of community-based services designed
1076	to reduce criminal risk factors for individuals who are determined to have
1077	substance use or mental illness conditions or both, and who are involved in the
1078	criminal justice system;
1079	(E) compliance, where appropriate, with the certification requirements in

1080	Subsection (2)(h); and
1081	(F) appropriate expenditure of public funds;
1082	(xii) review and make recommendations regarding each local substance abuse
1083	authority's contract with the local substance abuse authority's provider of
1084	substance use programs and services and each local mental health authority's
1085	contract with the local mental health authority's provider of mental health
1086	programs and services to ensure compliance with state and federal law and policy;
1087	(xiii) monitor and ensure compliance with division rules and contract requirements;
1088	and
1089	(xiv) withhold funds from local substance abuse authorities, local mental health
1090	authorities, and public and private providers for contract noncompliance, failure to
1091	comply with division directives regarding the use of public funds, or for misuse of
1092	public funds or money;
1093	(d) ensure that the requirements of this part are met and applied uniformly by local
1094	substance abuse authorities and local mental health authorities across the state;
1095	(e) require each local substance abuse authority and each local mental health authority,
1096	in accordance with Subsections 17-43-201(5)(b) and 17-43-301(6)(a)(ii), to submit a
1097	plan to the division on or before May 15 of each year;
1098	(f) conduct an annual program audit and review of each local substance abuse authority
1099	and each local substance abuse authority's contract provider, and each local mental
1100	health authority and each local mental health authority's contract provider, including:
1101	(i) a review and determination regarding whether:
1102	(A) public funds allocated to the local substance abuse authority or the local
1103	mental health authorities are consistent with services rendered by the authority
1104	or the authority's contract provider, and with outcomes reported by the
1105	authority's contract provider; and
1106	(B) each local substance abuse authority and each local mental health authority is
1107	exercising sufficient oversight and control over public funds allocated for
1108	substance use disorder and mental health programs and services; and
1109	(ii) items determined by the division to be necessary and appropriate;
1110	(g) define "prevention" by rule as required under Title 32B, Chapter 2, Part 4, Alcoholic
1111	Beverage and Substance Abuse Enforcement and Treatment Restricted Account Act;
1112	(h)(i) train and certify an adult as a peer support specialist, qualified to provide peer
1113	supports services to an individual with:

1114	(A) a substance use disorder;
1115	(B) a mental health disorder; or
1116	(C) a substance use disorder and a mental health disorder;
1117	(ii) certify a person to carry out, as needed, the division's duty to train and certify an
1118	adult as a peer support specialist;
1119	(iii) make rules in accordance with Title 63G, Chapter 3, Utah Administrative
1120	Rulemaking Act, that:
1121	(A) establish training and certification requirements for a peer support specialist;
1122	(B) specify the types of services a peer support specialist is qualified to provide;
1123	(C) specify the type of supervision under which a peer support specialist is
1124	required to operate; and
1125	(D) specify continuing education and other requirements for maintaining or
1126	renewing certification as a peer support specialist; and
1127	(iv) make rules in accordance with Title 63G, Chapter 3, Utah Administrative
1128	Rulemaking Act, that:
1129	(A) establish the requirements for a person to be certified to carry out, as needed,
1130	the division's duty to train and certify an adult as a peer support specialist; and
1131	(B) specify how the division shall provide oversight of a person certified to train
1132	and certify a peer support specialist;
1133	(i) collaborate with the State Commission on Criminal and Juvenile Justice to analyze
1134	and provide recommendations to the Legislature regarding:
1135	(i) pretrial services and the resources needed to reduce recidivism;
1136	(ii) county jail and county behavioral health early-assessment resources needed for an
1137	individual convicted of a class A or class B misdemeanor; and
1138	(iii) the replacement of federal dollars associated with drug interdiction law
1139	enforcement task forces that are reduced;
1140	(j) establish performance goals and outcome measurements for a mental health or
1141	substance use treatment program that is licensed under Chapter 2, Part 1, Human
1142	Services Programs and Facilities, and contracts with the department, including goals
1143	and measurements related to employment and reducing recidivism of individuals
1144	receiving mental health or substance use treatment who are involved with the
1145	criminal justice system;
1146	(k) annually, on or before November 30, submit a written report to the Judiciary Interim
1147	Committee, the Health and Human Services Interim Committee, and the Law

1148	Enforcement and Criminal Justice Interim Committee, that includes:
1149	(i) a description of the performance goals and outcome measurements described in
1150	Subsection (2)(j); and
1151	(ii) information on the effectiveness of the goals and measurements in ensuring
1152	appropriate and adequate mental health or substance use treatment is provided in a
1153	treatment program described in Subsection (2)(j);
1154	(l) collaborate with the Administrative Office of the Courts, the Department of
1155	Corrections, the Department of Workforce Services, and the Board of Pardons and
1156	Parole to collect data on recidivism in accordance with the metrics and requirements
1157	described in Section 63M-7-102;
1158	(m) at the division's discretion, use the data described in Subsection (2)(1) to make
1159	decisions regarding the use of funds allocated to the division to provide treatment;
1160	(n) annually, on or before August 31, submit the data collected under Subsection (2)(1)
1161	and any recommendations to improve the data collection to the State Commission on
1162	Criminal and Juvenile Justice to be included in the report described in Subsection
1163	63M-7-204(1)(x);
1164	(o) publish the following on the division's website:
1165	(i) the performance goals and outcome measurements described in Subsection (2)(j);
1166	and
1167	(ii) a description of the services provided and the contact information for the mental
1168	health and substance use treatment programs described in Subsection (2)(j) and
1169	residential, vocational and life skills programs, as defined in Section 13-53-102;
1170	and
1171	(p) consult and coordinate with the Division of Child and Family Services to develop
1172	and manage the operation of a program designed to reduce substance use during
1173	pregnancy and by parents of a newborn child that includes:
1174	(i) providing education and resources to health care providers and individuals in the
1175	state regarding prevention of substance use during pregnancy;
1176	(ii) providing training to health care providers in the state regarding screening of a
1177	pregnant woman or pregnant minor to identify a substance use disorder; and
1178	(iii) providing referrals to pregnant women, pregnant minors, or parents of a newborn
1179	child in need of substance use treatment services to a facility that has the capacity
1180	to provide the treatment services.
1181	(3) In addition to the responsibilities described in Subsection (2), the division shall, within

1182	funds appropriated by the Legislature for this purpose, implement and manage the
1183	operation of a firearm safety and suicide prevention program, in consultation with the
1184	Bureau of Criminal Identification created in Section 53-10-201, including:
1185	(a) coordinating with local mental health and substance abuse authorities, a nonprofit
1186	behavioral health advocacy group, and a representative from a Utah-based nonprofit
1187	organization with expertise in the field of firearm use and safety that represents
1188	firearm owners, to:
1189	(i) produce and periodically review and update a firearm safety brochure and other
1190	educational materials with information about the safe handling and use of firearms
1191	that includes:
1192	(A) information on safe handling, storage, and use of firearms in a home
1193	environment;
1194	(B) information about at-risk individuals and individuals who are legally
1195	prohibited from possessing firearms;
1196	(C) information about suicide prevention awareness; and
1197	(D) information about the availability of firearm safety packets;
1198	(ii) procure cable-style gun locks for distribution under this section;
1199	(iii) produce a firearm safety packet that includes the firearm safety brochure and the
1200	cable-style gun lock described in this Subsection (3); and
1201	(iv) create a suicide prevention education course that:
1202	(A) provides information for distribution regarding firearm safety education;
1203	(B) incorporates current information on how to recognize suicidal behaviors and
1204	identify individuals who may be suicidal; and
1205	(C) provides information regarding crisis intervention resources;
1206	(b) distributing, free of charge, the firearm safety packet to the following persons, who
1207	shall make the firearm safety packet available free of charge:
1208	(i) health care providers, including emergency rooms;
1209	(ii) mobile crisis outreach teams;
1210	(iii) mental health practitioners;
1211	(iv) other public health suicide prevention organizations;
1212	(v) entities that teach firearm safety courses;
1213	(vi) school districts for use in the seminar, described in Section [ <del>53G-9-702</del> ]
1214	53G-9-703, for parents of students in the school district; and
1215	(vii) firearm dealers to be distributed in accordance with Section 76-10-526;

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the donor.

1216	(c) creating and administering a rebate program that includes a rebate that offers
1217	between \$10 and \$200 off the purchase price of a firearm safe from a participating
1218	firearms dealer or a person engaged in the business of selling firearm safes in Utah,
1219	by a Utah resident; and
1220	(d) in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act,
1221	making rules that establish procedures for:
1222	(i) producing and distributing the suicide prevention education course and the firearm
1223	safety brochures and packets;
1224	(ii) procuring the cable-style gun locks for distribution; and
1225	(iii) administering the rebate program.
1226	(4)(a) The division may refuse to contract with and may pursue legal remedies against
1227	any local substance abuse authority or local mental health authority that fails, or has
1228	failed, to expend public funds in accordance with state law, division policy, contract
1229	provisions, or directives issued in accordance with state law.
1230	(b) The division may withhold funds from a local substance abuse authority or local
1231	mental health authority if the authority's contract provider of substance use or mental
1232	health programs or services fails to comply with state and federal law or policy.
1233	(5)(a) Before reissuing or renewing a contract with any local substance abuse authority
1234	or local mental health authority, the division shall review and determine whether the
1235	local substance abuse authority or local mental health authority is complying with the
1236	oversight and management responsibilities described in Sections 17-43-201,
1237	17-43-203, 17-43-303, and 17-43-309.
1238	(b) Nothing in this Subsection (5) may be used as a defense to the responsibility and
1239	liability described in Section 17-43-303 and to the responsibility and liability
1240	described in Section 17-43-203.
1241	(6) In carrying out the division's duties and responsibilities, the division may not duplicate
1242	treatment or educational facilities that exist in other divisions or departments of the state,
1243	but shall work in conjunction with those divisions and departments in rendering the
1244	treatment or educational services that those divisions and departments are competent and
1245	able to provide.
1246	(7) The division may accept in the name of and on behalf of the state donations, gifts,
1247	devises, or bequests of real or personal property or services to be used as specified by

(8) The division shall annually review with each local substance abuse authority and each

1250	local mental health authority the authority's statutory and contract responsibilities
1251	regarding:
1252	(a) use of public funds;
1253	(b) oversight of public funds; and
1254	(c) governance of substance use disorder and mental health programs and services.
1255	(9) The Legislature may refuse to appropriate funds to the division upon the division's
1256	failure to comply with the provisions of this part.
1257	(10) If a local substance abuse authority contacts the division under Subsection 17-43-201
1258	(10) for assistance in providing treatment services to a pregnant woman or pregnant
1259	minor, the division shall:
1260	(a) refer the pregnant woman or pregnant minor to a treatment facility that has the
1261	capacity to provide the treatment services; or
1262	(b) otherwise ensure that treatment services are made available to the pregnant woman
1263	or pregnant minor.
1264	(11) The division shall employ a school-based mental health specialist to be housed at the
1265	State Board of Education who shall work with the State Board of Education to:
1266	(a) provide coordination between a local education agency and local mental health
1267	authority;
1268	(b) recommend evidence-based and evidence informed mental health screenings and
1269	intervention assessments for a local education agency; and
1270	(c) coordinate with the local community, including local departments of health, to
1271	enhance and expand mental health related resources for a local education agency.
1272	Section 18. Section <b>26B-5-315</b> is amended to read:
1273	26B-5-315 . Declaration for mental health treatment Form.
1274	A declaration for mental health treatment shall be in substantially the following form:
1275	DECLARATION FOR MENTAL HEALTH TREATMENT
1276	I,, being an adult of sound mind, willfully and
1277	voluntarily make this declaration for mental health treatment, to be followed if it is determined
1278	by a court or by two physicians that my ability to receive and evaluate information effectively
1279	or to communicate my decisions is impaired to such an extent that I lack the capacity to refuse
1280	or consent to mental health treatment. "Mental health treatment" means convulsive treatment,
1281	treatment with psychoactive medication, and admission to and retention in a mental health
1282	facility for a period up to 17 days.
1283	I understand that I may become incapable of giving or withholding informed consent for

	PSYCHOACTIVE MEDICATIONS
If I beco	ome incapable of giving or withholding informed consent for mental health
reatment, n	ny wishes regarding psychoactive medications are as follows:
	I consent to the administration of the following medications:
n the dosag	es:
	considered appropriate by my attending physician.
	approved by
	as I hereby direct:
	I do not consent to the administration of the following medications:
TC T 1	ma incomphic of giving on withholding informed consent for montal health
reatment, m	ome incapable of giving or withholding informed consent for mental health my wishes regarding convulsive treatment are as follows:  _ I consent to the administration of convulsive treatment of the following type:
reatment, m	ny wishes regarding convulsive treatment are as follows:  I consent to the administration of convulsive treatment of the following type:
reatment, m	ny wishes regarding convulsive treatment are as follows:  I consent to the administration of convulsive treatment of the following type:
reatment, m	ny wishes regarding convulsive treatment are as follows:  _ I consent to the administration of convulsive treatment of the following type:
reatment, m	ny wishes regarding convulsive treatment are as follows:  _ I consent to the administration of convulsive treatment of the following type:
reatment, m	ny wishes regarding convulsive treatment are as follows:  _ I consent to the administration of convulsive treatment of the following type:
My reaso	ny wishes regarding convulsive treatment are as follows:  _ I consent to the administration of convulsive treatment of the following type:
My reaso	ny wishes regarding convulsive treatment are as follows:
My reaso	y wishes regarding convulsive treatment are as follows:

I consent to being admitted to the following mental health facilities:
I may be retained in the facility for a period of time:
determined by my attending physician.
approved by
no longer than
This directive cannot, by law, provide consent to retain me in a facility for more than 17
days.
ADDITIONAL REFERENCES OR INSTRUCTIONS
ATTORNEY-IN-FACT
I hereby appoint:
NAME
ADDRESS
TELEPHONE #
to act as my attorney-in-fact to make decisions regarding my mental health treatment if I
become incapable of giving or withholding informed consent for that treatment.
If the person named above refuses or is unable to act on my behalf, or if I revoke that
person's authority to act as my attorney-in-fact, I authorize the following person to act as my
alternative attorney-in-fact:
NAME
ADDRESS
TELEPHONE #
My attorney-in-fact is authorized to make decisions which are consistent with the wishes
I have expressed in this declaration. If my wishes are not expressed, my attorney-in-fact is to
act in good faith according to what he or she believes to be in my best interest.
(Signature of Declarant/Date)
AFFIRMATION OF WITNESSES
We affirm that the declarant is personally known to us, that the declarant signed or
acknowledged the declarant's signature on this declaration for mental health treatment in our
presence, that the declarant appears to be of sound mind and does not appear to be under

duress, fraud, or undu	ie influence. Neithe	r of us is the person appointed as attorney-in-fact by
this document, the att	tending physician, a	n employee of the attending physician, an employee
of the Office of Subs	tance [ <del>Abuse</del> ] <u>Use</u> a	and Mental Health within the Department of Health
and Human Services,	an employee of a lo	ocal mental health authority, or an employee of any
organization that con	tracts with a local m	nental health authority.
Witnessed By:		
(Signature of Witness	s/Date)	(Printed Name of Witness)
	s/Date)	(Printed Name of Witness)
A	CCEPTANCE OF A	APPOINTMENT AS ATTORNEY-IN-FACT
I accept this appo	intment and agree to	o serve as attorney-in-fact to make decisions about
mental health treatme	ent for the declarant	. I understand that I have a duty to act consistently
with the desires of the	e declarant as expre	ssed in the declaration. I understand that this
document gives me a	uthority to make de	cisions about mental health treatment only while the
declarant is incapable	e as determined by a	a court or two physicians. I understand that the
declarant may revoke	this appointment, c	or the declaration, in whole or in part, at any time and
in any manner, when	the declarant is not	
(Signature of Attorne	y-in-fact/Date)	
(Signature of Alterna	te Attorney-in-fact/	Date) (Printed name)
	NOTIO	CE TO PERSON MAKING A
	DECLARATION !	FOR MENTAL HEALTH TREATMENT
This is an importa	ant legal document.	It is a declaration that allows, or disallows, mental
health treatment. Bet	fore signing this doc	cument, you should know that:
(1) this document all	ows you to make de	ecisions in advance about three types of mental
health treatment:	psychoactive medic	cation, convulsive therapy, and short-term (up to 17
days) admission	to a mental health fa	acility;
(2) the instructions the	hat you include in th	nis declaration will be followed only if a court or

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- two physicians believe that you are incapable of otherwise making treatment decisions.

  Otherwise, you will be considered capable to give or withhold consent for treatment;
- 1388 (3) you may also appoint a person as your attorney-in-fact to make these treatment
  1389 decisions for you if you become incapable. The person you appoint has a duty to act
  1390 consistently with your desires as stated in this document or, if not stated, to make
  1391 decisions in accordance with what that person believes, in good faith, to be in your best
  1392 interest. For the appointment to be effective, the person you appoint must accept the
  1393 appointment in writing. The person also has the right to withdraw from acting as your
  1394 attorney-in-fact at any time;
- 1395 (4) this document will continue in effect for a period of three years unless you become 1396 incapable of participating in mental health treatment decisions. If this occurs, the 1397 directive will continue in effect until you are no longer incapable;
- (5) you have the right to revoke this document in whole or in part, or the appointment of an attorney-in-fact, at any time you have not been determined to be incapable. YOU MAY
   NOT REVOKE THE DECLARATION OR APPOINTMENT WHEN YOU ARE
   CONSIDERED INCAPABLE BY A COURT OR TWO PHYSICIANS. A revocation is effective when it is communicated to your attending physician or other provider; and
  - (6) if there is anything in this document that you do not understand, you should ask an attorney to explain it to you. This declaration is not valid unless it is signed by two qualified witnesses who are personally known to you and who are present when you sign or acknowledge your signature.
    - Section 19. Section **26B-5-319** is amended to read:

## 26B-5-319. Receipt of gift and personal property related to the transfer of persons from other institutions.

- (1) The division may take and hold by gift, devise, or bequest real and personal property required for the use of the state hospital. With the approval of the governor the division may convert that property that is not suitable for the state hospital's use into money or property that is suitable for the state hospital's use.
- 1414 (2) The state hospital is authorized to receive from any other institution within the
  1415 department an individual committed to that institution, when a careful evaluation of the
  1416 treatment needs of the individual and of the treatment programs available at the state
  1417 hospital indicates that the transfer would be in the interest of that individual.
- 1418 (3)(a) For the purposes of this Subsection (3), "contributions" means gifts, grants, devises, and donations.

1420	(b) Notwithstanding the provisions of Subsection [26B-1-202(10)] 26B-1-202(2)(j), the
1421	state hospital is authorized to receive contributions and deposit the contributions into
1422	an interest-bearing restricted special revenue fund. The state treasurer may invest the
1423	fund, and all interest will remain in the fund.
1424	(c)(i) Single expenditures from the fund in amounts of \$5,000 or less shall be
1425	approved by the superintendent.
1426	(ii) Single expenditures exceeding \$5,000 must be preapproved by the superintendent
1427	and the division director.
1428	(iii) Expenditures described in this Subsection (3) shall be used for the benefit of
1429	patients at the state hospital.
1430	(d) Money and interest in the fund may not be used for items normally paid for by
1431	operating revenues or for items related to personnel costs without specific legislative
1432	authorization.
1433	Section 20. Section <b>26B-5-331</b> is amended to read:
1434	26B-5-331 . Temporary commitment Requirements and procedures Rights.
1435	(1) An adult shall be temporarily, involuntarily committed to a local mental health authority
1436	upon:
1437	(a) a written application that:
1438	(i) is completed by a responsible individual who has reason to know, stating a belief
1439	that the adult, due to mental illness, is likely to pose substantial danger to self or
1440	others if not restrained and stating the personal knowledge of the adult's condition
1441	or circumstances that lead to the individual's belief; and
1442	(ii) includes a certification by a licensed physician, licensed physician assistant,
1443	licensed nurse practitioner, or designated examiner stating that the physician,
1444	physician assistant, nurse practitioner, or designated examiner has examined the
1445	adult within a three-day period immediately preceding the certification, and that
1446	the physician, physician assistant, nurse practitioner, or designated examiner is of
1447	the opinion that, due to mental illness, the adult poses a substantial danger to self
1448	or others; or
1449	(b) a peace officer or a mental health officer:
1450	(i) observing an adult's conduct that gives the peace officer or mental health officer
1451	probable cause to believe that:
1452	(A) the adult has a mental illness; and
1453	(B) because of the adult's mental illness and conduct, the adult poses a substantial

1454	danger to self or others; and
1455	(ii) completing a temporary commitment application that:
1456	(A) is on a form prescribed by the division;
1457	(B) states the peace officer's or mental health officer's belief that the adult poses a
1458	substantial danger to self or others;
1459	(C) states the specific nature of the danger;
1460	(D) provides a summary of the observations upon which the statement of danger is
1461	based; and
1462	(E) provides a statement of the facts that called the adult to the peace officer's or
1463	mental health officer's attention.
1464	(2) If at any time a patient committed under this section no longer meets the commitment
1465	criteria described in Subsection (1), the local mental health authority or the local mental
1466	health authority's designee shall:
1467	(a) document the change and release the patient; and
1468	(b) if the patient was admitted under Subsection (1)(b), notify the peace officer or
1469	mental health officer of the patient's release.
1470	(3) A patient committed under this section may be held for a maximum of 72 hours after
1471	commitment, excluding Saturdays, Sundays, and legal holidays, unless:
1472	(a) as described in Section 26B-5-332, an application for involuntary commitment is
1473	commenced, which may be accompanied by an order of detention described in
1474	Subsection 26B-5-332(4); or
1475	(b) the patient makes a voluntary application for admission.
1476	(4) Upon a written application described in Subsection (1)(a) or the observation and belief
1477	described in Subsection (1)(b)(i), the adult shall be:
1478	(a) taken into a peace officer's protective custody, by reasonable means, if necessary for
1479	public safety; and
1480	(b) transported for temporary commitment to a facility designated by the local mental
1481	health authority, by means of:
1482	(i) an ambulance, if the adult meets any of the criteria described in Section [
1483	<del>26B-4-119</del> ] <u>53-2d-405</u> ;
1484	(ii) an ambulance, if a peace officer is not necessary for public safety, and
1485	transportation arrangements are made by a physician, physician assistant, nurse
1486	practitioner, designated examiner, or mental health officer;
1487	(iii) the city, town, or municipal law enforcement authority with jurisdiction over the

1488	location where the adult is present, if the adult is not transported by ambulance;
1489	(iv) the county sheriff, if the designated facility is outside of the jurisdiction of the
1490	law enforcement authority described in Subsection (4)(b)(iii) and the adult is not
1491	transported by ambulance; or
1492	(v) nonemergency secured behavioral health transport as that term is defined in
1493	Section 53-2d-101.
1494	(5) Notwithstanding Subsection (4):
1495	(a) an individual shall be transported by ambulance to an appropriate medical facility for
1496	treatment if the individual requires physical medical attention;
1497	(b) if an officer has probable cause to believe, based on the officer's experience and
1498	de-escalation training that taking an individual into protective custody or transporting
1499	an individual for temporary commitment would increase the risk of substantial
1500	danger to the individual or others, a peace officer may exercise discretion to not take
1501	the individual into custody or transport the individual, as permitted by policies and
1502	procedures established by the officer's law enforcement agency and any applicable
1503	federal or state statute, or case law; and
1504	(c) if an officer exercises discretion under Subsection (4)(b) to not take an individual
1505	into protective custody or transport an individual, the officer shall document in the
1506	officer's report the details and circumstances that led to the officer's decision.
1507	(6)(a) The local mental health authority shall inform an adult patient committed under
1508	this section of the reason for commitment.
1509	(b) An adult patient committed under this section has the right to:
1510	(i) within three hours after arrival at the local mental health authority, make a
1511	telephone call, at the expense of the local mental health authority, to an individual
1512	of the patient's choice; and
1513	(ii) see and communicate with an attorney.
1514	(7)(a) Title 63G, Chapter 7, Governmental Immunity Act of Utah, applies to this section.
1515	(b) This section does not create a special duty of care.
1516	(8)(a) A local mental health authority shall provide discharge instructions to each
1517	individual committed under this section at or before the time the individual is
1518	discharged from the local mental health authority's custody, regardless of whether the
1519	individual is discharged by being released, taken into a peace officer's protective
1520	custody, transported to a medical facility or other facility, or other circumstances.
1521	(b) Discharge instructions provided under Subsection (8)(a) shall include:

1522	(i) a summary of why the individual was committed to the local mental health
1523	authority;
1524	(ii) detailed information about why the individual is being discharged from the local
1525	mental health authority's custody;
1526	(iii) a safety plan for the individual based on the individual's mental illness or mental
1527	or emotional state;
1528	(iv) notification to the individual's primary care provider, if applicable;
1529	(v) if the individual is discharged without food, housing, or economic security, a
1530	referral to appropriate services, if such services exist in the individual's
1531	community;
1532	(vi) the phone number to call or text for a crisis services hotline, and information
1533	about the availability of peer support services;
1534	(vii) a copy of any psychiatric advance directive presented to the local mental health
1535	authority, if applicable;
1536	(viii) information about how to establish a psychiatric advance directive if one was
1537	not presented to the local mental health authority;
1538	(ix) as applicable, information about medications that were changed or discontinued
1539	during the commitment;
1540	(x) a list of any screening or diagnostic tests conducted during the commitment;
1541	(xi) a summary of therapeutic treatments provided during the commitment;
1542	(xii) any laboratory work, including blood samples or imaging, that was completed or
1543	attempted during the commitment; and
1544	(xiii) information about how to contact the local mental health authority if needed.
1545	(c) If an individual's medications were changed, or if an individual was prescribed new
1546	medications while committed under this section, discharge instructions provided
1547	under Subsection (8)(a) shall include a clinically appropriate supply of medications,
1548	as determined by a licensed health care provider, to allow the individual time to
1549	access another health care provider or follow-up appointment.
1550	(d) If an individual refuses to accept discharge instructions, the local mental health
1551	authority shall document the refusal in the individual's medical record.
1552	(e) If an individual's discharge instructions include referrals to services under Subsection
1553	(8)(b)(v), the local mental health authority shall document those referrals in the
1554	individual's medical record.
1555	(f) The local mental health authority shall attempt to follow up with a discharged

1556	individual at least 48 hours after discharge, and may use peer support professionals
1557	when performing follow-up care or developing a continuing care plan.
1558	Section 21. Section <b>26B-5-609</b> is amended to read:
1559	26B-5-609 . Department and division duties MCOT license creation.
1560	(1) As used in this section:
1561	(a) "Committee" means the Behavioral Health Crisis Response Committee created in
1562	Section 63C-18-202.
1563	(b) "Emergency medical service personnel" means the same as that term is defined in
1564	Section [ <del>26B-4-101</del> ] <u>53-2d-101</u> .
1565	(c) "Emergency medical services" means the same as that term is defined in Section [
1566	<del>26B-4-101</del> ] <u>53-2d-101</u> .
1567	(d) "MCOT certification" means the certification created in this part for MCOT
1568	personnel and mental health crisis outreach services.
1569	(e) "MCOT personnel" means a licensed mental health therapist or other mental health
1570	professional, as determined by the division, who is a part of a mobile crisis outreach
1571	team.
1572	(f) "Mental health crisis" means a mental health condition that manifests itself by
1573	symptoms of sufficient severity that a prudent layperson who possesses an average
1574	knowledge of mental health issues could reasonably expect the absence of immediate
1575	attention or intervention to result in:
1576	(i) serious jeopardy to the individual's health or well-being; or
1577	(ii) a danger to others.
1578	(g)(i) "Mental health crisis services" means mental health services and on-site
1579	intervention that a person renders to an individual suffering from a mental health
1580	crisis.
1581	(ii) "Mental health crisis services" includes the provision of safety and care plans,
1582	stabilization services offered for a minimum of 60 days, and referrals to other
1583	community resources.
1584	(h) "Mental health therapist" means the same as that term is defined in Section 58-60-102.
1585	(i) "Mobile crisis outreach team" or "MCOT" means a mobile team of medical and
1586	mental health professionals that provides mental health crisis services and, based on
1587	the individual circumstances of each case, coordinates with local law enforcement,
1588	emergency medical service personnel, and other appropriate state or local resources.
1589	(2) To promote the availability of comprehensive mental health crisis services throughout

1590	the state, the division shall make rules, in accordance with Title 63G, Chapter 3, Utah
1591	Administrative Rulemaking Act, that create a certificate for MCOT personnel and
1592	MCOTs, including:
1593	(a) the standards the division establishes under Subsection (3); and
1594	(b) guidelines for:
1595	(i) credit for training and experience; and
1596	(ii) the coordination of:
1597	(A) emergency medical services and mental health crisis services;
1598	(B) law enforcement, emergency medical service personnel, and mobile crisis
1599	outreach teams; and
1600	(C) temporary commitment in accordance with Section 26B-5-331.
1601	(3)(a) The division shall:
1602	(i) in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act,
1603	make rules that establish standards that an applicant is required to meet to qualify
1604	for the MCOT certification described in Subsection (2); and
1605	(ii) create a statewide MCOT plan that:
1606	(A) identifies statewide mental health crisis services needs, objectives, and
1607	priorities; and
1608	(B) identifies the equipment, facilities, personnel training, and other resources
1609	necessary to provide mental health crisis services.
1610	(b) The division shall take the action described in Subsection (3)(a) with
1611	recommendations from the committee.
1612	(c) The division may delegate the MCOT plan requirement described in Subsection
1613	(3)(a)(ii) to a contractor with which the division contracts to provide mental health
1614	crisis services.
1615	Section 22. Section <b>26B-6-210</b> is amended to read:
1616	26B-6-210 . Statewide database Restricted use and access.
1617	(1) The division shall maintain a database for reports of vulnerable adult abuse, neglect, or
1618	exploitation made pursuant to this part.
1619	(2) The database shall include:
1620	(a) the names and identifying data of the alleged abused, neglected, or exploited
1621	vulnerable adult and the alleged perpetrator;
1622	(b) information regarding whether or not the allegation of abuse, neglect, or exploitation
1623	was found to be:

1624	(i) supported;
1625	(ii) inconclusive;
1626	(iii) without merit; or
1627	(iv) for reports for which the finding is made before May 5, 2008:
1628	(A) substantiated; or
1629	(B) unsubstantiated; and
1630	(c) any other information that may be helpful in furthering the purposes of this part, as
1631	determined by the division.
1632	(3) Information obtained from the database may be used only:
1633	(a) for statistical summaries compiled by the department that do not include names or
1634	other identifying data;
1635	(b) where identification of an individual as a perpetrator may be relevant in a
1636	determination regarding whether to grant or deny a license, privilege, or approval
1637	made by:
1638	(i) the department;
1639	(ii) the Division of Professional Licensing;
1640	(iii) the Division of Licensing and Background Checks within the department;
1641	(iv) the Bureau of Emergency Medical Services[-], within the Department of Public
1642	Safety;
1643	(v) any government agency specifically authorized by statute to access or use the
1644	information in the database; or
1645	(vi) an agency of another state that performs a similar function to an agency
1646	described in Subsections (3)(b)(i) through (iv); or
1647	(c) as otherwise specifically provided by law.
1648	Section 23. Section <b>26B-6-304</b> is amended to read:
1649	26B-6-304 . Powers and duties of the office.
1650	(1) The office shall:
1651	(a) develop and operate a statewide program to:
1652	(i) educate the public about the role and function of guardians and conservators;
1653	(ii) educate guardians and conservators on:
1654	(A) the duties of a guardian and a conservator; and
1655	(B) standards set by the National Guardianship Association for guardians and
1656	conservators; and
1657	(iii) serve as a guardian, conservator, or both for a ward upon appointment by a cour

1658			when no other person is able and willing to do so and the office petitioned for or
1659			agreed in advance to the appointment;
1660		(b)	possess and exercise all the powers and duties specifically given to the office by
1661			virtue of being appointed as guardian or conservator of a ward, including the power
1662			to access a ward's records;
1663		(c)	review and monitor the personal and, if appropriate, financial status of each ward for
1664			whom the office has been appointed to serve as guardian or conservator;
1665		(d)	train and monitor each employee and volunteer, and monitor each contract provider
1666			to whom the office has delegated a responsibility for a ward;
1667		(e)	retain all court-delegated powers and duties for a ward;
1668		(f)	report on the personal and financial status of a ward as required by a court in
1669			accordance with Title 75, Chapter 5, Protection of Persons Under Disability and
1670			Their Property;
1671		(g)	handle a ward's funds in accordance with the department's trust account system;
1672		(h)	request that the department's audit plan, established pursuant to Section 63I-5-401,
1673			include the requirement of an annual audit of all funds and property held by the office
1674			on behalf of wards;
1675		(i)	maintain accurate records concerning each ward, the ward's property, and office
1676			services provided to the ward;
1677		(j)	make reasonable and continuous efforts to find a family member, friend, or other
1678			person to serve as a ward's guardian or conservator;[-and]
1679		(k)	after termination as guardian or conservator, distribute a ward's property in
1680			accordance with Title 75, Chapter 5, Protection of Persons Under Disability and
1681			Their Property[-] : and
1682		<u>(l)</u>	be given accesses to, or provided with, written statements, documents, exhibits, and
1683			other items related to an investigation, including private, controlled, or protected
1684			medical or financial records of an incapacitated person or a potentially incapacitated
1685			person when the records or other items sought are reasonably necessary for the office
1686			to conduct an assessment, make an inquiry or search, or reach a determination
1687			described in Section 26B-6-305, or to fulfill the office's other duties or
1688			responsibilities.
1689	(2)	The	e office may:
1690		(a)	petition a court pursuant to Title 75, Chapter 5, Protection of Persons Under
1691			Disability and Their Property, to be appointed an incapacitated person's guardian,

1692	conservator, or both after conducting a prepetition assessment under Section
1693	26B-6-305;
1694	(b) develop and operate a statewide program to recruit, train, supervise, and monitor
1695	volunteers to assist the office in providing guardian and conservator services;
1696	(c) delegate one or more responsibilities for a ward to an employee, volunteer, or
1697	contract provider, except as provided in Subsection 26B-6-305(1);
1698	(d) solicit and receive private donations to provide guardian and conservator services
1699	under this part; and
1700	(e) adopt rules, in accordance with Title 63G, Chapter 3, Utah Administrative
1701	Rulemaking Act, to:
1702	(i) effectuate policy; and
1703	(ii) carry out the office's role as guardian and conservator of wards as provided in this
1704	chapter.
1705	Section 24. Section <b>26B-6-602</b> is amended to read:
1706	26B-6-602 . Division responsibility.
1707	The division is responsible:
1708	(1) for the supervision, care, and treatment of persons with an intellectual disability in this
1709	state who are committed to the division's jurisdiction under the provisions of this part;
1710	and
1711	(2) to evaluate and determine the most appropriate, least restrictive setting for an individual
1712	with an intellectual disability within the division's system.
1713	Section 25. Section <b>26B-7-301</b> is amended to read:
1714	26B-7-301 . Definitions.
1715	As used in this part:
1716	(1) "Bioterrorism" means:
1717	(a) the intentional use of any microorganism, virus, infectious substance, or biological
1718	product to cause death, disease, or other biological malfunction in a human, an
1719	animal, a plant, or another living organism in order to influence, intimidate, or coerce
1720	the conduct of government or a civilian population; and
1721	(b) includes anthrax, botulism, small pox, plague, tularemia, and viral hemorrhagic
1722	fevers.
1723	(2) "Dangerous public health condition" means any of the following:
1724	(a) cholera;
1725	(b) pneumonic plague;

Section 53-2a-203.

1726 (c) severe acute respiratory syndrome; 1727 (d) smallpox; 1728 (e) tuberculosis; 1729 (f) any viral hemorrhagic fever; 1730 (g) measles; or 1731 (h) any infection: 1732 (i) that is new, drug resistant, or reemerging; 1733 (ii) that evidence suggests is likely to cause either high mortality or morbidity; and 1734 (iii) only if the relevant legislative body of the county where the infection is located 1735 approves as needing containment. 1736 (3) "Diagnostic information" means a clinical facility's record of individuals who present 1737 for treatment, including the reason for the visit, chief complaint, presenting diagnosis, 1738 final diagnosis, and any pertinent lab results. 1739 (4) "Epidemic or pandemic disease": 1740 (a) means the occurrence in a community or region of cases of an illness clearly in 1741 excess of normal expectancy; and 1742 (b) includes diseases designated by the department which have the potential to cause 1743 serious illness or death. (5) "Exigent circumstances" means a significant change in circumstances following the 1744 1745 expiration of a public health emergency declared in accordance with this title that: 1746 (a) substantially increases the danger to public safety or health relative to the 1747 circumstances in existence when the public health emergency expired; 1748 (b) poses an imminent danger to public safety or health; and 1749 (c) was not known or foreseen and could not have been known or foreseen at the time 1750 the public health emergency expired. 1751 (6) "First responder" means: 1752 (a) a law enforcement officer as defined in Section 53-13-103; (b) emergency medical service personnel as defined in Section [26B-4-101] 53-2d-101; 1753 1754 (c) firefighters; and 1755 (d) public health personnel having jurisdiction over the location where an individual 1756 subject to an order of restriction is found. 1757 (7) "Health care provider" means the same as that term is defined in Section 78B-3-403. 1758 (8) "Legislative emergency response committee" means the same as that term is defined in 1759

1793

1760 (9) "Local food" means the same as that term is defined in Section 4-1-109. 1761 (10)(a) "Order of constraint" means an order, rule, or regulation issued in response to a 1762 declared public health emergency under this part, that: 1763 (i) applies to all or substantially all: 1764 (A) individuals or a certain group of individuals; or 1765 (B) public places or certain types of public places; and 1766 (ii) for the protection of the public health and in response to the declared public 1767 health emergency: 1768 (A) establishes, maintains, or enforces isolation or quarantine; 1769 (B) establishes, maintains, or enforces a stay-at-home order; 1770 (C) exercises physical control over property or individuals; 1771 (D) requires an individual to perform a certain action or engage in certain 1772 behavior; or 1773 (E) closes theaters, schools, or other public places or prohibits gatherings of 1774 people to protect the public health. 1775 (b) "Order of constraint" includes a stay-at-home order. 1776 (11) "Order of restriction" means an order issued by a department or a district court which 1777 requires an individual or group of individuals who are subject to restriction to submit to 1778 an examination, treatment, isolation, or quarantine. 1779 (12)(a) "Public health emergency" means an occurrence or imminent credible threat of 1780 an illness or health condition, caused by bioterrorism, epidemic or pandemic disease, 1781 or novel and highly fatal infectious agent or biological toxin, that poses a substantial 1782 risk of a significant number of human fatalities or incidents of permanent or 1783 long-term disability. 1784 (b) "Public health emergency" includes an illness or health condition resulting from a 1785 natural disaster. 1786 (13) "Public health official" means: 1787 (a) the executive director or the executive director's authorized representative; or 1788 (b) the executive director of a local health department or the executive director's 1789 authorized representative. 1790 (14) "Reportable emergency illness and health condition" includes the diseases, conditions, 1791 or syndromes designated by the department. 1792 (15) "Stay-at-home order" means an order of constraint that:

(a) restricts movement of the general population to suppress or mitigate an epidemic or

1794	pandemic disease by directing individuals within a defined geographic area to remain
1795	in their respective residences; and
1796	(b) may include exceptions for certain essential tasks.
1797	(16) "Threat to public health" means a situation where a dangerous public health condition
1798	could spread to other individuals.
1799	(17) "Subject to restriction" as applied to an individual, or a group of individuals, means the
1800	individual or group of individuals could create a threat to public health.
1801	Section 26. Section 26B-8-115 is amended to read:
1802	26B-8-115. Fetal death certificate Filing and registration requirements.
1803	(1)(a) A fetal death certificate shall be filed for each fetal death which occurs in this
1804	state.
1805	(b) The certificate shall be filed within five days after delivery with the local registrar or
1806	as otherwise directed by the state registrar.
1807	(c) The certificate shall be registered if it is completed and filed in accordance with this
1808	part.
1809	(2)(a) When a dead fetus is delivered in an institution, the institution administrator or his
1810	designated representative shall prepare and file the fetal death certificate.
1811	(b) The attending [physician, physician assistant, or certified nurse midwife] health care
1812	professional shall state in the certificate the cause of death and sign the certificate.
1813	(3) When a dead fetus is delivered outside an institution, the [physician or certified nurse
1814	midwife] health care professional in attendance at or immediately after delivery shall
1815	complete, sign, and file the fetal death certificate.
1816	(4) When a fetal death occurs without medical attendance at or immediately after the
1817	delivery or when inquiry is required by Part 2, Utah Medical Examiner[-,] :
1818	(a) the medical examiner shall investigate the cause of death; and
1819	(b) the medical examiner or a certified pathologist who performed the fetal autopsy shall
1820	prepare and file the certificate of fetal death within five days after [taking] the medical
1821	<u>examiner takes</u> charge of the case.
1822	(5)(a) When a fetal death occurs in a moving conveyance and the dead fetus is first
1823	removed from the conveyance in this state or when a dead fetus is found in this state
1824	and the place of death is unknown, the death shall be registered in this state.
1825	(b) The place where the dead fetus was first removed from the conveyance or found
1826	shall be considered the place of death.
1827	(6) Final disposition of the dead fetus may not be made until the fetal death certificate has

1828	been registered.
1829	Section 27. Section <b>26B-8-118</b> is amended to read:
1830	26B-8-118. Certificate of early term stillbirth.
1831	(1) As used in this section, "early term stillborn child" means a product of human
1832	conception, other than in the circumstances described in Subsection 76-7-301(1), that:
1833	(a) is of at least 16 weeks' gestation but less than 20 weeks' gestation, calculated from
1834	the day on which the mother's last normal menstrual period began to the day of
1835	delivery; and
1836	(b) is not born alive.
1837	(2) The state registrar shall issue a certificate of early term stillbirth to a parent of an early
1838	term stillborn child if:
1839	(a) the parent requests, on a form created by the state registrar, that the state registrar
1840	register and issue a certificate of early term stillbirth for the early term stillborn child
1841	and
1842	(b) the parent files with the state registrar:
1843	(i)(A) a signed statement from a [physician, or physician assistant if a physician is
1844	not in attendance at the delivery,] health care professional confirming the
1845	delivery of the early term stillborn child; or
1846	(B) an accurate copy of the parent's medical records related to the early term
1847	stillborn child; and
1848	(ii) any other record the state registrar determines, by rule made in accordance with
1849	Title 63G, Chapter 3, Utah Administrative Rulemaking Act, is necessary for
1850	accurate recordkeeping.
1851	(3) The certificate of early term stillbirth described in Subsection (2) shall meet all of the
1852	format and filing requirements of Section 26B-8-103.
1853	(4) A person who prepares a certificate of early term stillbirth under this section shall leave
1854	blank any references to an early term stillborn child's name if the early term stillborn
1855	child's parent does not wish to provide a name for the early term stillborn child.
1856	Section 28. Section <b>26B-9-104</b> is amended to read:
1857	26B-9-104. Duties of the Office of Recovery Services.
1858	(1) The office has the following duties:
1859	(a) except as provided in Subsection (2), to provide child support services if:
1860	(i) the office has received an application for child support services;
1861	(ii) the state has provided public assistance; or

1862		(iii) a child lives out of the home in the protective custody, temporary custody, or
1863		custody or care of the state;
1864	(b)	for the purpose of collecting child support, to carry out the obligations of the
1865		department contained in:
1866		(i) this chapter;
1867		(ii) Title 78B, Chapter 14, Utah Uniform Interstate Family Support Act;
1868		(iii) Title 78B, Chapter 15, Utah Uniform Parentage Act; and
1869		(iv) Title 81, Chapter 6, Child Support;
1870	(c)	to collect money due the department which could act to offset expenditures by the
1871		state;
1872	(d)	to cooperate with the federal government in programs designed to recover health and
1873		social service funds;
1874	(e)	to collect civil or criminal assessments, fines, fees, amounts awarded as restitution,
1875		and reimbursable expenses owed to the state or any of its political subdivisions, if the
1876		office has contracted to provide collection services;
1877	(f)	to implement income withholding for collection of child support in accordance with
1878		Part 3, Income Withholding in IV-D Cases;
1879	(g)	to enter into agreements with financial institutions doing business in the state to
1880		develop and operate, in coordination with such financial institutions, a data match
1881		system in the manner provided for in Section 26B-9-208;
1882	(h)	to establish and maintain the state case registry in the manner required by the Social
1883		Security Act, 42 U.S.C. Sec. 654a, which shall include a record in each case of:
1884		(i) the amount of monthly or other periodic support owed under the order, and other
1885		amounts, including arrearages, interest, late payment penalties, or fees, due or
1886		overdue under the order;
1887		(ii) any amount described in Subsection (1)(h)(i) that has been collected;
1888		(iii) the distribution of collected amounts;
1889		(iv) the birth date of any child for whom the order requires the provision of support;
1890		and
1891		(v) the amount of any lien imposed with respect to the order pursuant to this part;
1892	(i)	to contract with the Department of Workforce Services to establish and maintain the
1893		new hire registry created under Section 35A-7-103;
1894	(j)	to determine whether an individual who has applied for or is receiving cash assistance
1895		or Medicaid is cooperating in good faith with the office as required by Section

1896		26B-9-213;
1897		(k) to finance any costs incurred from collections, fees, General Fund appropriation,
1898		contracts, and federal financial participation;[-and]
1899		(l) to provide notice to a noncustodial parent in accordance with Section 26B-9-207 of
1900		the opportunity to contest the accuracy of allegations by a custodial parent of
1901		nonpayment of past-due child support, prior to taking action against a noncustodial
1902		parent to collect the alleged past-due support[-];
1903		(m) to review the child support guidelines, as that term is defined in Section 81-6-101, to
1904		ensure the application of the guidelines results in the determination of appropriate
1905		child support award amounts; and
1906		(n) to submit to the Judiciary Interim Committee, in accordance with Section 68-3-14, a
1907		summary of the review described in Subsection (1)(m) on or before October 1, 2025,
1908		and every four years thereafter on or before October 1.
1909	(2)	The office may not provide child support services to the Division of Child and Family
1910		Services for a calendar month when the child to whom the child support services relate
1911		is:
1912		(a) in the custody of the Division of Child and Family Services; and
1913		(b) lives in the home of a custodial parent of the child for more than seven consecutive
1914		days, regardless of whether:
1915		(i) the greater than seven consecutive day period starts during one month and ends in
1916		the next month; and
1917		(ii) the child is living in the home on a trial basis.
1918	(3)	The Division of Child and Family Services is not entitled to child support, for a child to
1919		whom the child support relates, for a calendar month when child support services may
1920		not be provided under Subsection (2).
1921	<u>(4)</u>	To conduct the review described in Subsection (1)(m), the office may consider input
1922		from the Judicial Council, members of the Utah State Bar Association representing
1923		attorneys who practice family law, individuals with economic expertise, and other
1924		interested parties.
1925		Section 29. Section <b>53-22-102</b> is amended to read:
1926		53-22-102 . State security chief Creation Appointment.
1927	(1)	There is created within the department a state security chief.
1928	(2)	The state security chief:
1929		(a) is appointed by the commissioner with the approval of the governor;

1930	(b) is subject to the supervision and control of the commissioner;
1931	(c) may be removed at the will of the commissioner;
1932	(d) shall be qualified by experience and education to:
1933	(i) enforce the laws of this state relating to school safety;
1934	(ii) perform duties prescribed by the commissioner; and
1935	(iii) enforce rules made under this chapter.
1936	(3) The state security chief shall:
1937	(a) establish building and safety standards for all public and private schools, including:
1938	(i) coordinating with the State Board of Education to establish the required minimum
1939	safety and security standards for all public and private school facilities, including:
1940	(A) limited entry points, including, if applicable, secured entry points for specific
1941	student grades or groups;
1942	(B) video surveillance of entrances when school is in session;
1943	(C) ground level windows protected by security film or ballistic windows;
1944	(D) internal classroom door locks;
1945	(E) bleed kits and first aid kits;
1946	(F) exterior cameras on entrances, parking areas, and campus grounds; and
1947	(G) fencing around playgrounds;
1948	(ii) establishing a schedule or timeline for existing buildings to come into compliance
1949	with this section;
1950	(iii) creating a process to examine plans and specifications for construction or
1951	remodeling of a school building, in accordance with Section 53E-3-706;
1952	(iv) recommending to the commissioner the denial or revocation a public or private
1953	school's occupancy permit for a building if:
1954	(A) the building does not meet the standards established in this section; and
1955	(B) after consultation with the local governing board, the building remains
1956	non-compliant with the standards established in this section;
1957	(v) creating minimum standards for radio communication equipment in every school;
1958	and
1959	(vi) establishing a process to approve the safety and security criteria the state
1960	superintendent of public instruction establishes for building inspectors described
1961	in Section 53E-3-706;
1962	(b) oversee the implementation of the school safety personnel requirements described in
1963	Section 53G-8-701.5, including:

1964	(i) in consultation with a county security chief, overseeing the school guardian
1965	program described in Section 53-22-105, including approving and coordinating
1966	the relevant training programs;
1967	(ii) establishing an application process for approved alternatives to the school safety
1968	personnel requirements described in Section 53G-8-701.5;
1969	(iii) selecting training requirements for school safety and security specialists in
1970	consultation with the State Board of Education as described in Section
1971	53G-8-701.6;
1972	(iv) as required by Section 53G-8-701.8, tracking each school safety and security
1973	director for a local education agency and ensuring that the contact information for
1974	the school safety and security directors is readily available to the local law
1975	enforcement agency of relevant jurisdiction; and
1976	(v) reviewing and approving the State Board of Education's school resource officer
1977	training program as described in Section 53G-8-702;
1978	(c) oversee the creation of school safety trainings, protocols, and incident responses,
1979	including:
1980	(i) in consultation with the State Board of Education, defining what constitutes an
1981	"active threat" and "developmentally appropriate" for purposes of the emergency
1982	response training described in Section 53G-8-803;
1983	(ii) in consultation with the Office of Substance [Abuse] Use and Mental Health,
1984	establishing or selecting an adolescent mental health and de-escalation training for
1985	school safety personnel;
1986	(iii) consulting with the School Safety Center to develop the model critical incident
1987	response that all schools and law enforcement will use during a threat, including:
1988	(A) standardized response protocol terminology for use throughout the state,
1989	including what constitutes a threat;
1990	(B) protocols for planning and safety drills, including drills required in a school
1991	before the school year begins;
1992	(C) integration and appropriate use of a panic alert device described in Subsection
1993	53G-8-805;
1994	(D) the establishment of incident command for a threat or safety incident,
1995	including which entity and individual runs the incident command;
1996	(E) the required components for a communication plan to be followed during an
1997	incident or threat;

1998	(F) reunification plan protocols, including the appropriate design and use of an
1999	incident command by others responding to or involved in an incident; and
2000	(G) recommendations for safety equipment for schools, including amounts and
2001	types of first aid supplies;
2002	(iv) reviewing and suggesting any changes to the response plans and training under
2003	Section 53G-8-803;
2004	(v) creating the official standard response protocol described in Section 53G-8-803
2005	for use by schools and law enforcement for school safety incidents; and
2006	(vi) establishing a manner for any security personnel described in Section
2007	53G-8-701.5 to be quickly identified by law enforcement during an incident;
2008	(d) in consultation with the School Safety Center established in Section 53G-8-802:
2009	(i) create a process to receive and analyze the school safety needs assessments
2010	described in Section 53G-8-701.5; and
2011	(ii) establish a required data reporting system for public schools to report serious and
2012	non-serious threats and other data related to threat assessment that the state
2013	security chief determines to be necessary; and
2014	(e) fulfill any other duties and responsibilities determined by the commissioner.
2015	(4) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, the
2016	department, in consultation with the state security chief, shall make rules to fulfill the
2017	duties described in this section.
2018	(5) The state security chief may delegate duties under this section to a sworn department
2019	member with the approval of the commissioner.
2020	Section 30. Section <b>53-22-104.2</b> is amended to read:
2021	53-22-104.2 . The School Security Task Force Education Advisory Board.
2022	(1) There is created an advisory board to the task force called the Education Advisory
2023	Board.
2024	(2) The advisory board shall consist of the following members:
2025	(a) the state security chief, who acts as chair of the advisory board;
2026	(b) the construction and facility specialist at the State Board of Education;
2027	(c) a superintendent from a county of the fourth, fifth, or sixth class, whom the state
2028	security chief selects;
2029	(d) a superintendent from a county of the first, second, or third class, whom the state
2030	security chief selects;
2031	(e) a charter school director from a county of the fourth, fifth, or sixth class, whom the

2032	state security chief selects;
2033	(f) a charter school director from a county of the first, second, or third class, whom the
2034	state security chief selects;
2035	(g) the president of the Utah School Boards Association or the president's designee;
2036	(h) a parent representative from a school community council or parent teacher
2037	organization, whom the state security chief selects;
2038	(i) a facilities manager from an LEA in a county of the fourth, fifth, or sixth class, whom
2039	the state security chief selects;
2040	(j) a facilities manager from an LEA in county of the first, second, or third class, whom
2041	the state security chief selects;
2042	(k) a representative of private schools, whom the state security chief selects; and
2043	(l) a member of the Office of Substance [Abuse] Use and Mental Health, whom the state
2044	security chief selects.
2045	(3) The advisory board's purpose is to:
2046	(a) review and provide input on official business of the task force;
2047	(b) provide recommendations and suggestions for the task force's consideration; and
2048	(c) study and evaluate the policies, procedures, and programs implemented for school
2049	safety and provide proactive information regarding the implementation.
2050	(4)(a) A majority of the members of the advisory board constitutes a quorum.
2051	(b) The action of a majority of a quorum constitutes an action of the advisory board.
2052	(5)(a) The advisory board shall select two members to serve as co-chairs.
2053	(b) The co-chairs are responsible for the call and conduct of meetings.
2054	(6) The staff of the state security chief shall provide staff for the advisory board.
2055	(7) A member of the advisory board who is not a legislator may not receive compensation
2056	for the member's work associated with the task force but may receive per diem and
2057	reimbursement for travel expenses incurred as a member of the task force at the rates
2058	established by the Division of Finance under:
2059	(a) Sections 63A-3-106 and 63A-3-107; and
2060	(b) rules made by the Division of Finance in accordance with Sections 63A-3-106 and
2061	63A-3-107.
2062	Section 31. Section <b>53-22-105</b> is amended to read:
2063	53-22-105 . School guardian program.
2064	(1) As used in this section:
2065	(a) "Annual training" means an annual four-hour training that:

2066	(i) a county security chief or a designee administers;
2067	(ii) the state security chief approves;
2068	(iii) can be tailored to local needs;
2069	(iv) allows an individual to practice and demonstrate firearms proficiency at a
2070	firearms range using the firearm the individual carries for self defense and defense
2071	of others;
2072	(v) includes the following components:
2073	(A) firearm safety, including safe storage of a firearm;
2074	(B) de-escalation tactics;
2075	(C) the role of mental health in incidents; and
2076	(D) disability awareness and interactions; and
2077	(vi) contains other training needs as determined by the state security chief.
2078	(b) "Biannual training" means a twice-yearly training that:
2079	(i) is at least four hours, unless otherwise approved by the state security chief;
2080	(ii) a county security chief or a designee administers;
2081	(iii) the state security chief approves;
2082	(iv) can be tailored to local needs;[-and]
2083	(v) through which a school guardian at a school or simulated school environment:
2084	(A) receives training on the specifics of the building or buildings of the school,
2085	including the location of emergency supplies and security infrastructure; and
2086	(B) participates in a live-action practice plan with school administrators in
2087	responding to active threats at the school; and
2088	(vi) shall be taken with at least three months in between the two trainings.
2089	(c) "Firearm" means the same as that term is defined in Section 76-10-501.
2090	(d) "Initial training" means an in-person training that:
2091	(i) a county security chief or a designee administers;
2092	(ii) the state security chief approves;
2093	(iii) can be tailored to local needs; and
2094	(iv) provides:
2095	(A) training on general familiarity with the types of firearms that can be concealed
2096	for self-defense and defense of others;
2097	(B) training on the safe loading, unloading, storage, and carrying of firearms in a
2098	school setting;
2099	(C) training at a firearms range with instruction regarding firearms fundamentals,

2100	marksmanship, the demonstration and explanation of the difference between
2101	sight picture, sight alignment, and trigger control, and a recognized pistol
2102	course;
2103	(D) current laws dealing with the lawful use of a firearm by a private citizen,
2104	including laws on self-defense, defense of others, transportation of firearms,
2105	and concealment of firearms;
2106	(E) coordination with law enforcement officers in the event of an active threat;
2107	(F) basic trauma first aid;
2108	(G) the appropriate use of force, emphasizing the de-escalation of force and
2109	alternatives to using force; and
2110	(H) situational response evaluations, including:
2111	(I) protecting and securing a crime or accident scene;
2112	(II) notifying law enforcement;
2113	(III) controlling information; and
2114	(IV) other training that the county sheriff, designee, or department deems
2115	appropriate.
2116	(e) "Program" means the school guardian program created in this section.
2117	(f)(i) "School employee" means an employee of a school whose duties and
2118	responsibilities require the employee to be physically present at a school's campus
2119	while school is in session.
2120	(ii) "School employee" does not include a principal, teacher, or individual whose
2121	primary responsibilities require the employee to be primarily present in a
2122	classroom to teach, care for, or interact with students, unless:
2123	(A) the principal, teacher, or individual is employed at a school with 100 or fewer
2124	students;
2125	(B) the principal, teacher, or individual is employed at a school with adjacent
2126	campuses as determined by the state security chief; or
2127	(C) as provided in Subsection 53G-8-701.5(3).
2128	(g) "School guardian" means a school employee who meets the requirements of
2129	Subsection (3).
2130	(2)(a)(i) There is created within the department the school guardian program $[\frac{1}{2}]$ .
2131	(ii) [the] The state security chief shall oversee the school guardian program[;] .
2132	(iii) [the] The applicable county security chief shall administer the school guardian
2133	program in each county.

2134	(b) The state security chief shall ensure that the school guardian program includes:
2135	(i) initial training;
2136	(ii) biannual training; and
2137	(iii) annual training.
2138	(c) A county sheriff may partner or contract with:
2139	(i) another county sheriff to support the respective county security chiefs in jointly
2140	administering the school guardian program in the relevant counties; and
2141	(ii) a local law enforcement agency of relevant jurisdiction to provide the:
2142	(A) initial training;
2143	(B) biannual training; and
2144	(C) annual training.
2145	(3)(a) A school employee that volunteers to participate is eligible to join the program as
2146	a school guardian if:
2147	(i) the school administrator approves the volunteer school employee to be designated
2148	as a school guardian;
2149	(ii) the school employee satisfactorily completes initial training within six months
2150	before the day on which the school employee joins the program;
2151	(iii) the school employee holds a valid concealed carry permit issued under Title 53,
2152	Chapter 5, Part 7, Concealed Firearm Act;
2153	(iv) the school employee certifies to the sheriff of the county where the school is
2154	located that the school employee has undergone the training in accordance with
2155	Subsection (3)(a)(ii) and intends to serve as a school guardian; and
2156	(v) the school employee successfully completes a mental health screening selected by
2157	the state security chief in collaboration with the Office of Substance [Abuse] Use
2158	and Mental Health established in Section 26B-5-102.
2159	(b) After joining the program a school guardian shall complete annual training and
2160	biannual training to retain the designation of a school guardian in the program.
2161	(4) The state security chief shall:
2162	(a) for each school that participates in the program, track each school guardian at the
2163	school by collecting the photograph and the name and contact information for each
2164	guardian;
2165	(b) make the information described in Subsection (4)(a) readily available to each law
2166	enforcement agency in the state categorized by school; and
2167	(c) provide each school guardian with a one-time stipend of \$500.

2168	(5) A school guardian:
2169	(a) may store the school guardian's firearm on the grounds of a school only if:
2170	(i) the firearm is stored in a biometric gun safe;
2171	(ii) the biometric gun safe is located in the school guardian's office; and
2172	(iii) the school guardian is physically present on the grounds of the school while the
2173	firearm is stored in the safe;
2174	(b) shall carry the school guardian's firearm in a concealed manner; and
2175	(c) may not, unless during an active threat, display or open carry a firearm while on
2176	school grounds.
2177	(6) Except as provided in Subsection (5)(c), this section does not prohibit an individual who
2178	has a valid concealed carry permit but is not participating in the program from carrying a
2179	firearm on the grounds of a public school or charter school under Subsection 76-10-505.5
2180	(4).
2181	(7) A school guardian:
2182	(a) does not have authority to act in a law enforcement capacity; and
2183	(b) may, at the school where the school guardian is employed:
2184	(i) take actions necessary to prevent or abate an active threat; and
2185	(ii) temporarily detain an individual when the school guardian has reasonable cause
2186	to believe the individual has committed or is about to commit a forcible felony, a
2187	that term is defined in Section 76-2-402.
2188	(8) A school may designate a single volunteer or multiple volunteers to participate in the
2189	school guardian program to satisfy the school safety personnel requirements of Section
2190	53G-8-701.5.
2191	(9) The department may adopt, according to Title 63G, Chapter 3, Utah Administrative
2192	Rulemaking Act, rules to administer this section.
2193	(10) A school guardian who has active status in the guardian program is not liable for any
2194	civil damages or penalties if the school guardian:
2195	(a) when carrying or storing a firearm:
2196	(i) is acting in good faith; and
2197	(ii) is not grossly negligent; or
2198	(b) threatens, draws, or otherwise uses a firearm reasonably believing the action to be
2199	necessary in compliance with Section 76-2-402.
2200	(11) A school guardian shall file a report described in Subsection (12) if, during the
2201	performance of the school guardian's duties, the school guardian points a firearm at an

2202	individual.
2203	(12)(a) A report described in Subsection (11) shall include:
2204	(i) a description of the incident;
2205	(ii) the identification of the individuals involved in the incident; and
2206	(iii) any other information required by the state security chief.
2207	(b) A school guardian shall submit a report required under Subsection (11) to the school
2208	administrator, school safety and security director, and the state security chief within
2209	48 hours after the incident.
2210	(c) The school administrator, school safety and security director, and the state security
2211	chief shall consult and review the report submitted under Subsection (12)(b).
2212	(13) The requirements of Subsections (11) and (12) do not apply to a training exercise.
2213	(14) A school guardian may have the designation of school guardian revoked at any time by
2214	the school principal, county sheriff, or state security chief.
2215	(15)(a) Any information or record created detailing a school guardian's participation in
2216	the program is:
2217	(i) a private, controlled, or protected record under Title 63G, Chapter 2, Government
2218	Records Access and Management Act; and
2219	(ii) available only to:
2220	(A) the state security chief;
2221	(B) administrators at the school guardian's school;
2222	(C) if applicable, other school safety personnel described in Section 53G-8-701.5
2223	(D) a local law enforcement agency that would respond to the school in case of ar
2224	emergency; and
2225	(E) the individual designated by the county sheriff in accordance with Section
2226	53-22-103 of the county of the school where the school guardian in the
2227	program is located.
2228	(b) The information or record described in Subsection (15)(a) includes information
2229	related to the school guardian's identity and activity within the program as described
2230	in this section and any personal identifying information of a school guardian
2231	participating in the program collected or obtained during initial training, annual
2232	training, and biannual training.
2233	(c) An individual who intentionally or knowingly provides the information described in
2234	Subsection (15)(a) to an individual or entity not listed in Subsection (15)(a)(ii) is
2235	guilty of a class B misdemeanor

2236	Section 32. Section <b>53G-8-701.6</b> is amended to read:
2237	53G-8-701.6 . School safety and security specialist.
2238	(1) As used in this section, "principal" means the chief administrator at a public school,
2239	including:
2240	(a) a school principal;
2241	(b) a charter school director; or
2242	(c) the superintendent of the Utah Schools for the Deaf and the Blind.
2243	(2)(a) Subject to Subsection (2)(b) and except as provided in Subsection 53G-8-701.5
2244	(3), every campus within an LEA shall designate a school safety and security
2245	specialist from the employees of the relevant campus.
2246	(b) The school safety and security specialist:
2247	(i) may not be a principal; and
2248	(ii) may be the school safety and security director at one campus within the LEA.
2249	(3) The school safety and security specialist shall:
2250	(a) report directly to the principal;
2251	(b) oversee school safety and security practices to ensure a safe and secure school
2252	environment for students and staff;
2253	(c) ensure adherence with all policies, procedures, protocols, rules, and regulations
2254	relating to school safety and security through collaborating and maintaining effective
2255	communications with the following as applicable:
2256	(i) the principal;
2257	(ii) school staff;
2258	(iii) the school resource officer;
2259	(iv) the armed school security guard;
2260	(v) the school guardian;
2261	(vi) local law enforcement;
2262	(vii) the county security chief;
2263	(viii) the school safety and security director;
2264	(ix) the LEA; and
2265	(x) school-based behavioral and mental health professionals;
2266	(d) in collaboration with the county security chief or designee described in Section
2267	53-22-103:
2268	(i) conduct the school safety needs assessment described in Section 53G-8-701.5; and
2269	(ii) conduct a building safety evaluation at least annually using the results of the

2270	school safety needs assessment to recommend and implement improvements to
2271	school facilities, policies, procedures, protocols, rules, and regulations relating to
2272	school safety and security;
2273	(e) if the specialist is also an employee of an LEA, participate on the multidisciplinary
2274	team that the LEA establishes;
2275	(f) conduct a behavioral threat assessment when the school safety and security specialist
2276	deems necessary using an evidence-based tool the state security chief recommends in
2277	consultation with the school safety center and the Office of Substance [Abuse] <u>Use</u>
2278	and Mental Health;
2279	(g) regularly monitor and report to the principal, local law enforcement, and, if
2280	applicable, the LEA superintendent or designee, security risks for the school resulting
2281	from:
2282	(i) issues with school facilities; or
2283	(ii) the implementation of practices, policies, procedures, and protocols relating to
2284	school safety and security;
2285	(h) coordinate with local first responder agencies to implement and monitor safety and
2286	security drills in accordance with policy and applicable procedures and protocols;
2287	(i) ensure that school staff, and, when appropriate, students, receive training on and
2288	remain current on the school's safety and security procedures and protocols;
2289	(j) following an event where security of the school has been significantly compromised,
2290	organize a debriefing with the individuals listed in Subsection (3)(c) regarding
2291	strengthening school safety and security practices, policies, procedures, and protocols
2292	(k) abide by any LEA, school, or law enforcement agency policy outlining the chain of
2293	command;
2294	(l) during an emergency, coordinate with the following individuals as applicable, the:
2295	(i) school resource officer;
2296	(ii) school guardians;
2297	(iii) armed school security guards;
2298	(iv) school administrators; and
2299	(v) responding law enforcement officers;
2300	(m) follow any LEA, school, or law enforcement agency student privacy policies,
2301	including state and federal privacy laws;
2302	(n) participate in an annual training the state security chief selects in consultation with
2303	the School Safety Center; and

2304	(o) remain current on:
2305	(i) a comprehensive school guideline the state security chief selects;
2306	(ii) the duties of a school safety and security specialist described in this Subsection
2307	(3); and
2308	(iii) the school's emergency response plan.
2309	(4) During an active emergency at the school, the school safety and security specialist is
2310	subordinate to any responding law enforcement officers.
2311	Section 33. Section <b>63I-1-281</b> is amended to read:
2312	63I-1-281 . Repeal dates: Title 81.
2313	Title 81, Chapter 6, Part 4, Child Support Guidelines Advisory Committee, is repealed [
2314	<del>July 1, 2026</del> ] <u>May 7, 2025</u> .
2315	Section 34. Section <b>80-2-709</b> is amended to read:
2316	80-2-709. Division access to criminal background information for background
2317	screening and investigation.
2318	(1) The division shall have direct access to criminal background information maintained
2319	under Title 53, Chapter 10, Part 2, Bureau of Criminal Identification, for the purpose of:
2320	(a) background screening under this chapter, Chapter 2a, Removal and Protective
2321	Custody of a Child, or Chapter 3, Abuse, Neglect, and Dependency Proceedings,
2322	including background screening of an individual who has direct access, as defined in
2323	Section [62A-2-101] 26B-2-101, to a minor:
2324	(i) who is alleged to be or has been abused, neglected, or dependent; and
2325	(ii) for whom the division has an open case; or
2326	(b) investigation of abuse or neglect under this chapter, Chapter 2a, Removal and
2327	Protective Custody of a Child, or Chapter 3, Abuse, Neglect, and Dependency
2328	Proceedings.
2329	(2) Except as provided in Section 80-3-305, the division and the Office of Guardian Ad
2330	Litem are authorized to request the Department of Public Safety to conduct a complete
2331	Federal Bureau of Investigation criminal background check through the national
2332	criminal history system (NCIC).
2333	Section 35. Repealer.
2334	This bill repeals:
2335	Section 26B-7-102, Director of family health services programs.
2336	Section 36. Effective Date.
2337	This bill takes effect on May 7, 2025.