

76-12b01. Definitions. When used in this act:

- (a) "Adaptive behavior" means the effectiveness or degree with which an individual meets the standards of personal independence and social responsibility expected of that person's age, cultural group and community.
- (b) "Care" means supportive services, including, but not limited to, provision of room and board, supervision, protection, assistance in bathing, dressing, grooming, eating and other activities of daily living.
- (c) "Institution" means a state institution for people with intellectual disability including the following institutions: Kansas neurological institute and Parsons state hospital.
- (d) "Intellectual disability" means significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the period from birth to age 18.
- (e) "Respite care" means temporary, short-term care not exceeding 90 days per calendar year to provide relief from the daily pressures involved in caring for a person with intellectual disability.
- (f) "Restraint" means the use of a totally enclosed crib or any material to restrict or inhibit the free movement of one or more limbs of a person except medical devices which limit movement for examination, treatment or to insure the healing process.
- (g) "Seclusion" means being placed alone in a locked room where the individual's freedom to leave is thereby restricted and where such placement is not under continuous observation.
- (h) "Secretary" means the secretary for aging and disability services or the designee of the secretary.
- (i) "Significantly subaverage general intellectual functioning" means performance which is two or more standard deviations from the mean score on a standardized intelligence test specified by the secretary.
- (j) "Superintendent" means the chief administrative officer of the institution or the designee of the chief administrative officer.
- (k) "Training" means the provision of specific environmental, physical, mental, social and educational interventions and therapies for the purpose of halting, controlling or reversing processes that cause, aggravate or complicate malfunctions or dysfunctions of development.

History: L. 1984, ch. 339, § 1; L. 1996, ch. 60, § 1; L. 2012, ch. 91, § 68; L. 2014, ch. 115, § 422; July 1.