

SECOND REGULAR SESSION

# HOUSE BILL NO. 1867

## 95TH GENERAL ASSEMBLY

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INTRODUCED BY REPRESENTATIVE LeVOTA.

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D. ADAM CRUMBLISS, Chief Clerk

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### AN ACT

To repeal section 210.115, RSMo, and to enact in lieu thereof one new section relating to the household child protect act.

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*Be it enacted by the General Assembly of the state of Missouri, as follows:*

Section A. Section 210.115, RSMo, is repealed and one new section enacted in lieu thereof, to be known as section 210.115, to read as follows:

210.115. 1. When any physician, medical examiner, coroner, dentist, chiropractor, optometrist, podiatrist, resident, intern, nurse, hospital or clinic personnel that are engaged in the examination, care, treatment or research of persons, and any other health practitioner, psychologist, mental health professional, social worker, day care center worker or other child-care worker, juvenile officer, probation or parole officer, jail or detention center personnel, teacher, principal or other school official, minister as provided by section 352.400, RSMo, peace officer or law enforcement official, or other person with responsibility for the care of children has reasonable cause to suspect that a child has been or may be subjected to abuse or neglect or observes a child being subjected to conditions or circumstances which would reasonably result in abuse or neglect, **or any adult person who resides in the same household and witnesses the abuse or neglect or possible abuse or neglect of a child, and who is not subjected to the same suspected abusive conditions or circumstances as the child** that person shall immediately report or cause a report to be made to the division in accordance with the provisions of sections 210.109 to 210.183. As used in this section, the term "abuse" is not limited to abuse inflicted by a person responsible for the child's care, custody and control as specified in section 210.110, but shall also include abuse inflicted by any other person.

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

17           2. Whenever such person is required to report pursuant to sections 210.109 to 210.183  
18 in an official capacity as a staff member of a medical institution, school facility, or other agency,  
19 whether public or private, the person in charge or a designated agent shall be notified  
20 immediately. The person in charge or a designated agent shall then become responsible for  
21 immediately making or causing such report to be made to the division. Nothing in this section,  
22 however, is meant to preclude any person from reporting abuse or neglect.

23           3. Notwithstanding any other provision of sections 210.109 to 210.183, any child who  
24 does not receive specified medical treatment by reason of the legitimate practice of the religious  
25 belief of the child's parents, guardian, or others legally responsible for the child, for that reason  
26 alone, shall not be found to be an abused or neglected child, and such parents, guardian or other  
27 persons legally responsible for the child shall not be entered into the central registry. However,  
28 the division may accept reports concerning such a child and may subsequently investigate or  
29 conduct a family assessment as a result of that report. Such an exception shall not limit the  
30 administrative or judicial authority of the state to ensure that medical services are provided to  
31 the child when the child's health requires it.

32           4. In addition to those persons and officials required to report actual or suspected abuse  
33 or neglect, any other person may report in accordance with sections 210.109 to 210.183 if such  
34 person has reasonable cause to suspect that a child has been or may be subjected to abuse or  
35 neglect or observes a child being subjected to conditions or circumstances which would  
36 reasonably result in abuse or neglect.

37           5. Any person or official required to report pursuant to this section, including employees  
38 of the division, who has probable cause to suspect that a child who is or may be under the age  
39 of eighteen, who is eligible to receive a certificate of live birth, has died shall report that fact to  
40 the appropriate medical examiner or coroner. If, upon review of the circumstances and medical  
41 information, the medical examiner or coroner determines that the child died of natural causes  
42 while under medical care for an established natural disease, the coroner, medical examiner or  
43 physician shall notify the division of the child's death and that the child's attending physician  
44 shall be signing the death certificate. In all other cases, the medical examiner or coroner shall  
45 accept the report for investigation, shall immediately notify the division of the child's death as  
46 required in section 58.452, RSMo, and shall report the findings to the child fatality review panel  
47 established pursuant to section 210.192.

48           6. Any person or individual required to report may also report the suspicion of abuse or  
49 neglect to any law enforcement agency or juvenile office. Such report shall not, however, take  
50 the place of reporting or causing a report to be made to the division.

51           7. If an individual required to report suspected instances of abuse or neglect pursuant to  
52 this section has reason to believe that the victim of such abuse or neglect is a resident of another

53 state or was injured as a result of an act which occurred in another state, the person required to  
54 report such abuse or neglect may, in lieu of reporting to the Missouri division of family services,  
55 make such a report to the child protection agency of the other state with the authority to receive  
56 such reports pursuant to the laws of such other state. If such agency accepts the report, no report  
57 is required to be made, but may be made, to the Missouri division of family services.

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