

FIRST REGULAR SESSION

HOUSE BILL NO. 1148

98TH GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE LAUER.

2463H.011

D. ADAM CRUMBLISS, Chief Clerk

AN ACT

To amend chapter 190, RSMo, by adding thereto two new sections relating to the treatment of at-risk behavioral health patients.

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

Section A. Chapter 190, RSMo, is amended by adding thereto two new sections, to be known as sections 190.144 and 190.240, to read as follows:

190.144. No emergency medical technician licensed under section 190.142 or 190.143, if acting in good faith and without gross negligence, shall be liable for:

(1) Transporting a person for whom an application for detention for evaluation and treatment has been filed under section 631.115 or 632.305; or

(2) Physically or chemically restraining an at-risk behavioral health patient as that term is defined under section 190.240 if such restraint is to ensure the safety of the patient or technician.

190.240. 1. Any hospital licensed under chapter 197 or any nursing home facility licensed under chapter 198 shall have policies and procedures that require the hospital or facility to give advance notification to emergency medical services personnel prior to the transportation of any at-risk behavioral health patient. The hospital or facility shall take appropriate measures to ensure the safe and effective transport of the patient.

2. Any emergency medical services personnel licensed under this chapter who conducts interfacility transfers of at-risk behavioral health patients may be properly trained as determined by the ambulance services and emergency medical response agency medical director, established under section 190.103, with regard to proper restraining

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.

10 procedures and nonmedical management techniques, such as verbal de-escalation
11 techniques, to handle such patients before their transportation.

12 3. Any physician treating an at-risk behavioral patient in an emergency situation
13 who, after assessing the patient, determines that there is a reasonable cause to believe there
14 is a likelihood that the patient may cause an imminent serious harm to himself, herself, or
15 others unless the patient is immediately transported to another appropriate facility may
16 place the patient on a temporary involuntary hold for a period of time necessary to
17 effectuate the patient's transport. During the transport, the emergency medical services
18 personnel may rely on the physician's hold order as a basis for implied consent to treat and
19 transport the patient and shall not be liable for any claims of negligence, false
20 imprisonment, or invasion of privacy based on such temporary hold, treatment, or
21 transport of the patient.

22 4. Nothing in this section shall be construed to limit the patient's rights under the
23 federal Mental Health Patient's Bill of Rights under 42 U.S.C. Section 9501(1)(A) and (F).

24 5. For the purposes of this section, "at-risk behavioral health patient" shall mean
25 any patient who displays violent, homicidal, or suicidal ideation or behavior.

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