

House \_\_\_\_\_ Amendment NO. \_\_\_\_\_

Offered By \_\_\_\_\_

1 AMEND Senate Bill No. 819, Page 6, Section 210.112, Line 160, by inserting immediately after  
2 said section and line the following:

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4 "210.115. 1. When any physician, medical examiner, coroner, dentist, chiropractor,  
5 optometrist, podiatrist, resident, intern, nurse, hospital or clinic personnel that are engaged in the  
6 examination, care, treatment or research of persons, and any other health practitioner, psychologist,  
7 mental health professional, social worker, day care center worker or other child-care worker,  
8 juvenile officer, probation or parole officer, jail or detention center personnel, teacher, principal or  
9 other school official, minister as provided by section 352.400, peace officer or law enforcement  
10 official, or other person with responsibility for the care of children has reasonable cause to suspect  
11 that a child has been or may be subjected to abuse or neglect or observes a child being subjected to  
12 conditions or circumstances which would reasonably result in abuse or neglect, that person shall  
13 immediately report to the division in accordance with the provisions of sections 210.109 to 210.183.  
14 No internal investigation shall be initiated until such a report has been made. As used in this  
15 section, the term "abuse" is not limited to abuse inflicted by a person responsible for the child's care,  
16 custody and control as specified in section 210.110, but shall also include abuse inflicted by any  
17 other person.

18 2. If two or more members of a medical institution who are required to report jointly have  
19 knowledge of a known or suspected instance of child abuse or neglect, a single report may be made  
20 by a designated member of that medical team. Any member who has knowledge that the member  
21 designated to report has failed to do so shall thereafter immediately make the report. Nothing in this  
22 section, however, is meant to preclude any person from reporting abuse or neglect.

23 3. The reporting requirements under this section are individual, and no supervisor or  
24 administrator may impede or inhibit any reporting under this section. No person making a report  
25 under this section shall be subject to any sanction, including any adverse employment action, for  
26 making such report. Every employer shall ensure that any employee required to report pursuant to  
27 subsection 1 of this section has immediate and unrestricted access to communications technology  
28 necessary to make an immediate report and is temporarily relieved of other work duties for such  
29 time as is required to make any report required under subsection 1 of this section.

30 4. Notwithstanding any other provision of sections 210.109 to 210.183, any child who does  
31 not receive specified medical treatment by reason of the legitimate practice of the religious belief of  
32 the child's parents, guardian, or others legally responsible for the child, for that reason alone, shall  
33 not be found to be an abused or neglected child, and such parents, guardian or other persons legally  
34 responsible for the child shall not be entered into the central registry. However, the division may  
35 accept reports concerning such a child and may subsequently investigate or conduct a family  
36 assessment as a result of that report. Such an exception shall not limit the administrative or judicial

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1 authority of the state to ensure that medical services are provided to the child when the child's health  
2 requires it.

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

8 6. Any person or official required to report pursuant to this section, including employees of  
9 the division, who has probable cause to suspect that a child who is or may be under the age of  
10 eighteen, who is eligible to receive a certificate of live birth, has died shall report that fact to the  
11 appropriate medical examiner or coroner. If, upon review of the circumstances and medical  
12 information, the medical examiner or coroner determines that the child died of natural causes while  
13 under medical care for an established natural disease, the coroner, medical examiner or physician  
14 shall notify the division of the child's death and that the child's attending physician shall be signing  
15 the death certificate. In all other cases, the medical examiner or coroner shall accept the report for  
16 investigation, shall immediately notify the division of the child's death as required in section 58.452  
17 and shall report the findings to the child fatality review panel established pursuant to section  
18 210.192.

19 7. Any person or individual required to report may also report the suspicion of abuse or  
20 neglect to any law enforcement agency or juvenile office. Such report shall not, however, take the  
21 place of reporting to the division.

22 8. If an individual required to report suspected instances of abuse or neglect pursuant to this  
23 section has reason to believe that the victim of such abuse or neglect is a resident of another state or  
24 was injured as a result of an act which occurred in another state, the person required to report such  
25 abuse or neglect may, in lieu of reporting to the Missouri children's division, make such a report to  
26 the child protection agency of the other state with the authority to receive such reports pursuant to  
27 the laws of such other state. If such agency accepts the report, no report is required to be made, but  
28 may be made, to the children's division.

29 9. If any physician, resident, intern, nurse, hospital or clinic personnel, or any other health  
30 care provider who is engaged in the examination, care, treatment, or research of persons becomes  
31 aware that a birth mother or child, within eight hours after the child's birth, tested positive for a  
32 blood alcohol content of eight-hundredths of one percent or more by weight or tested positive for  
33 cocaine, heroin, methamphetamine, or a controlled substance as defined in section 195.010 or  
34 prescription drug other than a controlled substance or prescription drug for which the birth mother  
35 or child has a valid prescription and reports such diagnosis to the children's division, the division  
36 shall submit a referral to the juvenile office as soon as reasonably possible. The referral shall  
37 include the division's recommendations to the juvenile office regarding the care, safety, and  
38 placement of the child and the reasons for such recommendations."; and  
39

40 Further amend said bill by amending the title, enacting clause, and intersectional references  
41 accordingly.