#### FIRST REGULAR SESSION

# HOUSE BILL NO. 1276

### **101ST GENERAL ASSEMBLY**

INTRODUCED BY REPRESENTATIVE PIKE.

DANA RADEMAN MILLER, ChiefClerk

## AN ACT

To repeal section 210.115, RSMo, and to enact in lieu thereof two new sections relating to unaccompanied youth.

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

Section A. Section 210.115, RSMo, is repealed and two new sections enacted in lieu 2 thereof, to be known as sections 210.115 and 210.121, to read as follows: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 2 examination, care, treatment or research of persons, and any other health practitioner, 3 psychologist, mental health professional, social worker, day care center worker or other 4 child-care worker, juvenile officer, probation or parole officer, jail or detention center personnel, 5 teacher, principal or other school official, minister as provided by section 352.400, peace officer 6 or law enforcement official, volunteer or personnel of a community service program that offers 7 support services for families in crisis to assist in the delegation of any powers regarding the care 8 9 and custody of a child by a properly executed power of attorney pursuant to sections 475.600 to 10 475.604, or other person with responsibility for the care of children has reasonable cause to 11 suspect that a child has been or may be subjected to abuse or neglect or observes a child being 12 subjected to conditions or circumstances which would reasonably result in abuse or neglect, that person shall immediately report to the division in accordance with the provisions of sections 13 14 210.109 to 210.183. No internal investigation shall be initiated until such a report has been made. As used in this section, the term "abuse" is not limited to abuse inflicted by a person 15 16 responsible for the child's care, custody and control as specified in section 210.110, but shall also 17 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.

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

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

31 4. Notwithstanding any other provision of sections 210.109 to 210.183, any child who 32 does not receive specified medical treatment by reason of the legitimate practice of the religious 33 belief of the child's parents, guardian, or others legally responsible for the child, for that reason 34 alone, shall not be found to be an abused or neglected child, and such parents, guardian or other 35 persons legally responsible for the child shall not be entered into the central registry. However, 36 the division may accept reports concerning such a child and may subsequently investigate or 37 conduct a family assessment as a result of that report. Such an exception shall not limit the 38 administrative or judicial authority of the state to ensure that medical services are provided to 39 the child when the child's health requires it.

5. In addition to those persons and officials required to report actual or suspected abuse or neglect, any other person may report in accordance with sections 210.109 to 210.183 if such person 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.

45 6. Any person or official required to report pursuant to this section, including employees 46 of the division, who has probable cause to suspect that a child who is or may be under the age 47 of eighteen, who is eligible to receive a certificate of live birth, has died shall report that fact to 48 the appropriate medical examiner or coroner. If, upon review of the circumstances and medical 49 information, the medical examiner or coroner determines that the child died of natural causes 50 while under medical care for an established natural disease, the coroner, medical examiner or 51 physician shall notify the division of the child's death and that the child's attending physician 52 shall be signing the death certificate. In all other cases, the medical examiner or coroner shall 53 accept the report for investigation, shall immediately notify the division of the child's death as

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54 required in section 58.452 and shall report the findings to the child fatality review panel 55 established pursuant to section 210.192.

56 7. Any person or individual required to report may also report the suspicion of abuse or 57 neglect to any law enforcement agency or juvenile office. Such report shall not, however, take 58 the place of reporting to the division.

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

66 9. For the purposes of providing supportive services or verifying the status of a 67 youth as unaccompanied or homeless for the purposes of accessing supportive services, the 68 fact that a child is an unaccompanied youth as defined in 42 U.S.C. Section 11434a(6) is 69 not, in and of itself, a sufficient basis for reporting child abuse or neglect.

210.121. 1. As used in this section, the following terms mean:

2 (1) "Service provider", a public or private nonprofit organization that provides
3 age-appropriate shelter or supportive services to unaccompanied youth;

4 (2) "Shelter", an emergency shelter, transitional living program, or independent 5 living program services;

6 (3) "Supportive services", interventions, services, or resources necessary to assist 7 an unaccompanied youth. "Supportive services" shall include, but are not limited to, the 8 following:

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(a) Food and access to an overnight shelter;

(b) Housing search, counseling, rental assistance, financial assistance with eviction
 prevention, utilities, security deposit, relocation, and other housing support services;

12 (c) Services for families to prevent separation and support reunification if safe and13 appropriate;

14 (d) Employment assistance, job training, and job placement;

15 (e) Assistance and advocacy to ensure access to federal, state, and local benefits;

16 (f) Assistance and advocacy to ensure access to education;

17 (g) Services to prevent and treat violence and crime victimization;

18 (h) Case management;

19 (i) Child care operations and vouchers;

20 (j) Legal services;

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- 21 (k) Life skills training;
- 22 (1) Outpatient health, behavioral health, and substance abuse treatment services;
- 23 (m) Transportation;
- 24 (n) Outreach services; and
- 25 (o) Homelessness prevention services;

26 (4) "Unaccompanied youth", the same meaning as such term is defined in 42 U.S.C.
27 Section 11434a(6).

28 **2.** An unaccompanied youth may access supportive services so long as the youth is 29 verified as an unaccompanied youth as provided under subsection 3 of this section.

30 3. Acceptable documentation to verify the status of an unaccompanied youth shall
 31 include, but is not limited to, the following:

(1) A statement documenting the youth as an unaccompanied youth that is signed
by a director or designee of a government or nonprofit agency that receives public or
private funding to provide services to homeless people;

35 (2) A statement documenting the youth as an unaccompanied youth that is signed
36 by a local educational agency liaison for homeless children and youth designated under 42
37 U.S.C. Section 11432(g)(1)(J)(ii), or a school social worker or counselor; or

38 (3) A statement documenting that the youth is an unaccompanied youth that is
 39 signed by an attorney representing the youth in any legal matter.

40 **4.** A person who in good faith accepts a written statement under subdivision (1) of 41 subsection 3 of this section and who is without actual knowledge that the statement is 42 fraudulent or otherwise invalid may rely upon the statement as if it were genuine and shall 43 not be held liable in any civil or criminal action for providing shelter or supportive services 44 without having obtained permission from the minor's parent or guardian. The service 45 provider shall not be relieved from liability for negligence or criminal acts on the basis of 46 this section.

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