Second Regular Session of the 122nd General Assembly (2022)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2021 Regular Session of the General Assembly.

SENATE ENROLLED ACT No. 185

AN ACT to amend the Indiana Code concerning family law and juvenile law.

Be it enacted by the General Assembly of the State of Indiana:

SECTION 1. IC 31-34-2.5-1, AS AMENDED BY P.L.137-2021, SECTION 35, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 1. (a) An emergency medical services provider (as defined in IC 16-41-10-1) shall, without a court order, take custody of a child who is, or who appears to be, not more than thirty (30) days of age if except as provided in subsection (g), (h), the child is voluntarily left:

- (1) with the provider by the child's parent;
- (2) in a newborn safety device that:
 - (A) has been approved by a hospital licensed under IC 16-21;
 - (B) is physically located inside a hospital that is staffed continuously on a twenty-four (24) hour basis every day to provide care to patients in an emergency; and
 - (C) is located in an area that is conspicuous and visible to hospital staff;
- (3) in a newborn safety device that was installed on or before January 1, 2017, and is located at a site that is staffed by an emergency medical services provider (as defined in IC 16-41-10-1);
- (4) in a newborn safety device that:
 - (A) is located at a facility, fire department, or emergency



- medical services station that is staffed by an emergency medical services provider (as defined in IC 16-41-10-1) on a twenty-four (24) hour seven (7) day a week basis;
- (B) is located in an area that is conspicuous and visible to staff; and
- (C) includes an adequate dual alarm system connected to the site that is tested at least one (1) time per month to ensure the alarm system is in working order;
- (5) in a newborn safety device that:
 - (A) is located at a fire department, including a volunteer fire department that:
 - (i) meets the minimum response time established by the county, not to exceed four (4) minutes; and
 - (ii) is located within one (1) mile of a hospital, police station, or emergency medical services station that is staffed on a twenty-four (24) hour per day, seven (7) day a week basis with full-time personnel who hold a valid cardiopulmonary resuscitation certification and that meets the minimum response time established by the county, not to exceed four (4) minutes;
 - (B) is equipped with an alert system:
 - (i) that, when the newborn safety device is opened, automatically connects to the 911 system and transmits a request for immediate dispatch of an emergency medical services provider (as defined in IC 16-41-10-1) to the location of the newborn safety device; and
 - (ii) that is tested at least one (1) time per month to ensure the alert system is in working order; and
 - (C) is equipped with a video surveillance system that allows members of a fire department to monitor the inside of the newborn safety device twenty-four (24) hours a day and that:
 - (i) has at least two (2) firefighters who are responsible for monitoring the inside of the newborn safety device twenty-four (24) hours a day; and
 - (ii) is an independent surveillance system from the alert system described in clause (B); or
- (6) with medical staff after delivery in a hospital or other medical facility when the child's parent notifies the medical staff that the parent is voluntarily relinquishing the child;
- and the parent does not express an intent to return for the child.
- (b) An emergency medical services provider who takes custody of a child under this section shall perform any act necessary to protect the



child's physical health or safety.

- (c) Any person who in good faith voluntarily leaves a child:
 - (1) with an emergency medical services provider;
 - (2) in a newborn safety device described in this section; or
- (3) with medical staff as described in subsection (a)(6); is not obligated to disclose the parent's name or the person's name.
- (d) The following are immune from civil liability, unless the act or omission constitutes gross negligence or willful or wanton misconduct:
 - (1) An:
 - (A) emergency medical services provider; or
 - (B) employee of an emergency medical service provider; for an act or omission relating to taking custody of a child under subsection (a).
 - (2) A:
 - (A) medical staff person; or
 - (B) hospital or other medical facility;

for an act or omission relating to taking custody of a child under subsection (a)(6).

- (d) (e) A hospital that approves the operation of a newborn safety device that meets the requirements set forth in subsection (a)(2) is immune from civil liability for an act or omission relating to the operation of the newborn safety device unless the act or omission constitutes gross negligence or willful or wanton misconduct.
- (e) (f) A newborn safety device described in subsection (a)(3) may continue to operate without meeting the conditions set forth in subsection (a)(2).
 - (f) **(g)** A:
 - (1) facility, fire department, or emergency medical services station or an employee of a facility, fire department, or emergency medical services station that meets the requirements set forth in subsection (a)(4); or
 - (2) fire department, including a volunteer fire department and an emergency medical services station or a member of a volunteer fire department that meets the requirements set forth in subsection (a)(5);

is immune from civil liability for an act or omission relating to the operation of the newborn safety device unless the act or omission constitutes gross negligence or willful or wanton misconduct.

(g) (h) Due to extenuating circumstances, if a child's parent or a person is unable to give up custody of the child as described in subsection (a), the child's parent or the person may request that an



emergency medical services provider (as defined in IC 16-41-10-1) take custody of the child by:

- (1) dialing the 911 emergency call number; and
- (2) staying with the child until an emergency medical services provider (as defined in IC 16-41-10-1) arrives to take custody of the child.

The emergency medical dispatch agency (as defined in IC 16-31-3.5-1) or the emergency medical services provider (as defined in IC 16-41-10-1) shall inform the child's parent or the person described in this subsection of the ability to remain anonymous as described in subsection (c).

SECTION 2. IC 34-30-2-134.5, AS AMENDED BY P.L.137-2021, SECTION 36, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 134.5. IC 31-34-2.5-1 (Concerning a hospital, fire department, other facility, or emergency medical services station operating certain individuals and entities that take custody of a child, operate a newborn safety device, or approve a newborn safety device).

SECTION 3. An emergency is declared for this act.



President of the Senate	
President Pro Tempore	
Speaker of the House of Represen	atatives
Governor of the State of Indiana	
Date:	Time:

