HOUSE BILL 245

D4 3lr0088

By: Chair, Judiciary Committee (By Request - Departmental - Human Resources)

Introduced and read first time: January 23, 2013

Assigned to: Judiciary

A BILL ENTITLED

	AN	ACT	concerning
L	T TT A	1101	COLLCCITILLE

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Family Law - Substance-Exposed Newborns

- 3 FOR the purpose of establishing a presumption that a child is not receiving proper 4 care and attention from the mother for purposes of determining whether a child 5 is a child in need of assistance under certain provisions of law; altering the 6 factors that a juvenile court is required to consider when determining whether 7 to terminate a parent's rights; requiring a health practitioner involved in the 8 delivery or care of a substance-exposed newborn to make a certain report to a 9 local department of social services except under certain circumstances; 10 specifying the contents of the report; requiring a local department of social 11 services to take certain actions; requiring the Secretary of Human Resources to adopt certain regulations; defining certain terms; and generally relating to 12 substance-exposed newborns. 13
- 14 BY repealing and reenacting, with amendments.
- 15 Article Courts and Judicial Proceedings
- 16 Section 3–818
- 17 Annotated Code of Maryland
- 18 (2006 Replacement Volume and 2012 Supplement)
- 19 BY repealing and reenacting, with amendments,
- 20 Article Family Law
- 21 Section 5–323
- 22 Annotated Code of Maryland
- 23 (2012 Replacement Volume)
- 24 BY adding to
- 25 Article Family Law
- 26 Section 5–704.2
- 27 Annotated Code of Maryland

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 (2012 Replacement Volume)

2 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF 3 MARYLAND, That the Laws of Maryland read as follows:

Article - Courts and Judicial Proceedings

5 3–818.

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Within 1 year after a child's birth, there is a presumption that a child is not receiving proper care and attention from the mother for purposes of § 3–801(f)(2) of this subtitle if:

- 9 (1) [(i) The child was born exposed to cocaine, heroin, 10 methamphetamine, or a derivative of cocaine, heroin, or methamphetamine as 11 evidenced by any appropriate tests of the mother or child; or
- 12 (ii) Upon admission to a hospital for delivery of the child, the
 13 mother tested positive for cocaine, heroin, methamphetamine, or a derivative of
 14 cocaine, heroin, or methamphetamine as evidenced by any appropriate toxicology test]
 15 THE CHILD WAS IDENTIFIED AS A SUBSTANCE-EXPOSED NEWBORN AS
 16 DESCRIBED IN § 5-704.2 OF THE FAMILY LAW ARTICLE; and
- 17 (2) Drug treatment is made available to the mother and the mother 18 refuses the recommended level of drug treatment, or does not successfully complete 19 the recommended level of drug treatment.

Article - Family Law

21 5–323.

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- (a) [In this section, "drug" means cocaine, heroin, methamphetamine, or a derivative of cocaine, heroin, or methamphetamine.
- (b)] If, after consideration of factors as required in this section, a juvenile court finds by clear and convincing evidence that a parent is unfit to remain in a parental relationship with the child or that exceptional circumstances exist that would make a continuation of the parental relationship detrimental to the best interests of the child such that terminating the rights of the parent is in a child's best interests, the juvenile court may grant guardianship of the child without consent otherwise required under this subtitle and over the child's objection.
- [(c)] (B) A juvenile court need not consider any factor listed in subsection [(d)] (C) of this section in determining a child's best interests if, after a thorough investigation by a local department, the juvenile court finds that:

1	(1) the identities of the child's parents are unknown; and
2 3	(2) during the 60 days immediately after the child's adjudication as a child in need of assistance, no one has claimed to be the child's parent.
4 5 6 7 8	[(d)] (C) Except as provided in subsection [(c)] (B) of this section, in ruling on a petition for guardianship of a child, a juvenile court shall give primary consideration to the health and safety of the child and consideration to all other factors needed to determine whether terminating a parent's rights is in the child's best interests, including:
9 10	(1) (i) all services offered to the parent before the child's placement, whether offered by a local department, another agency, or a professional;
11 12	(ii) the extent, nature, and timeliness of services offered by a local department to facilitate reunion of the child and parent; and
13 14	(iii) the extent to which a local department and parent have fulfilled their obligations under a social services agreement, if any;
15 16 17	(2) the results of the parent's effort to adjust the parent's circumstances, condition, or conduct to make it in the child's best interests for the child to be returned to the parent's home, including:
18 19	(i) the extent to which the parent has maintained regular contact with:
20	1. the child;
21 22	2. the local department to which the child is committed; and
23	3. if feasible, the child's caregiver;
24 25	(ii) the parent's contribution to a reasonable part of the child's care and support, if the parent is financially able to do so;
26 27 28	(iii) the existence of a parental disability that makes the parent consistently unable to care for the child's immediate and ongoing physical or psychological needs for long periods of time; and
29 30 31 32 33	(iv) whether additional services would be likely to bring about a lasting parental adjustment so that the child could be returned to the parent within an ascertainable time not to exceed 18 months from the date of placement unless the juvenile court makes a specific finding that it is in the child's best interests to extend the time for a specified period;

1	(3) whet	her:	
2 3	(i) the seriousness of the ab	-	arent has abused or neglected the child or a minor and neglect;
4 5 6	(ii) delivery, the mother te test; or	1. sted po	[A. on admission to a hospital for the child's sitive for a drug as evidenced by a positive toxicology
7 8 9			upon the birth of the child, the child tested positive sitive toxicology test] THE CHILD WAS IDENTIFIED AS VBORN AS DESCRIBED IN § 5-704.2 OF THIS TITLE;
11 12 13	_ _		the mother refused the level of drug treatment ddictions specialist, as defined in § 5–1201 of this title, st, as defined in the Health Occupations Article;
14	(iii)	the p	arent subjected the child to:
15		1.	chronic abuse;
16		2.	chronic and life-threatening neglect;
L 7		3.	sexual abuse; or
18		4.	torture;
19 20	(iv) the United States, of:	the p	earent has been convicted, in any state or any court of
21		1.	a crime of violence against:
22		A.	a minor offspring of the parent;
23		В.	the child; or
24		C.	another parent of the child; or
25 26	a crime described in iter	2. n 1 of t	aiding or abetting, conspiring, or soliciting to commit his item; and
27 28	(v) of the child; and	the p	arent has involuntarily lost parental rights to a sibling

1 2 3	(4) child's parents, the significantly;	(i) child'	the child's emotional ties with and feelings toward the s siblings, and others who may affect the child's best interests			
4		(ii)	the child's adjustment to:			
5			1. community;			
6			2. home;			
7			3. placement; and			
8			4. school;			
9 10	relationship; and	(iii)	the child's feelings about severance of the parent-child			
11 12	child's well-being.	(iv)	the likely impact of terminating parental rights on the			
13 14 15 16 17 18	and may waive a [(d)(1)] (C)(1) of	local of this so he juv	A juvenile court shall consider the evidence under subsection ii) of this section as to a continuing or serious act or condition department's obligations for services described in subsection ection if, after appropriate evaluation of efforts made and venile court finds by clear and convincing evidence that a est interests.			
19 20 21 22	(2) A juvenile court may waive a local department's obligations for services described in subsection [(d)(1)] (C)(1) of this section if the juvenile court finds by clear and convincing evidence that one or more of the acts or circumstances listed in subsection [(d)(3)(iii)] (C)(3)(III) , (iv), or (v) of this section exists.					
23 24 25	(3) the Courts Article [(d)(1)] (C)(1) of the	, the j	avenile court waives reunification efforts under § 3–812(d) of uvenile court may not consider any factor under subsection tion.			
26 27 28 29	shall make a speci	ii)] (C fic finc	juvenile court finds that an act or circumstance listed in (2)(3)(III), (iv), or (v) of this section exists, the juvenile court ding, based on facts in the record, whether return of the child es an unacceptable risk to the child's future safety.			

[(g)] (F) If a parent has consented to guardianship in accordance with § 5-320(a)(1)(iii)1 of this subtitle, the loss of parental rights shall be considered voluntary.

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- 1 (A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE 2 MEANINGS INDICATED.
- 3 (2) "CONTROLLED DRUG" MEANS A CONTROLLED DANGEROUS
- 4 SUBSTANCE INCLUDED IN SCHEDULE I, SCHEDULE II, SCHEDULE III,
- 5 SCHEDULE IV, OR SCHEDULE V UNDER TITLE 5, SUBTITLE 4 OF THE CRIMINAL
- 6 LAW ARTICLE.
- 7 (3) "NEWBORN" MEANS A CHILD UNDER THE AGE OF 30 DAYS 8 WHO IS BORN OR WHO RECEIVES CARE IN THE STATE.
- 9 **(B)** FOR PURPOSES OF THIS SECTION, A NEWBORN IS 10 "SUBSTANCE-EXPOSED" IF:
- 11 **(1)** THE NEWBORN:
- 12 (I) DISPLAYS A POSITIVE TOXICOLOGY SCREEN FOR A CONTROLLED DRUG AS EVIDENCED BY ANY APPROPRIATE TEST AFTER BIRTH;
- 14 (II) DISPLAYS THE EFFECTS OF CONTROLLED DRUG USE OR
- 15 SYMPTOMS OF WITHDRAWAL RESULTING FROM PRENATAL CONTROLLED DRUG
- 16 EXPOSURE AS DETERMINED BY MEDICAL PERSONNEL; OR
- 17 (III) DISPLAYS THE EFFECTS OF A FETAL ALCOHOL
- 18 SPECTRUM DISORDER; OR
- 19 (2) THE NEWBORN'S MOTHER HAD A POSITIVE TOXICOLOGY
- 20 SCREEN FOR ALCOHOL OR A CONTROLLED DRUG ON ADMISSION TO THE
- 21 HOSPITAL OR AT THE TIME OF DELIVERY.
- 22 (C) EXCEPT AS PROVIDED IN SUBSECTION (D) OF THIS SECTION, A
- 23 HEALTH PRACTITIONER INVOLVED IN THE DELIVERY OR CARE OF A
- 24 SUBSTANCE-EXPOSED NEWBORN SHALL:
- 25 (1) MAKE AN ORAL REPORT TO THE LOCAL DEPARTMENT AS SOON
- 26 AS POSSIBLE; AND
- 27 (2) MAKE A WRITTEN REPORT TO THE LOCAL DEPARTMENT NOT
- 28 LATER THAN 48 HOURS AFTER THE CONTACT, EXAMINATION, ATTENTION,
- 29 TREATMENT, OR TESTING THAT PROMPTED THE REPORT.

- 1 (D) IN THE CASE OF A SUBSTANCE-EXPOSED NEWBORN IN A HOSPITAL OR BIRTHING CENTER, A HEALTH PRACTITIONER SHALL NOTIFY AND PROVIDE THE INFORMATION REQUIRED UNDER THIS SECTION TO THE HEAD OF THE INSTITUTION OR THE DESIGNEE OF THE HEAD.
- 5 (E) A HEALTH PRACTITIONER IS NOT REQUIRED TO MAKE A REPORT 6 UNDER THIS SECTION IF THE HEALTH PRACTITIONER:
- 7 (1) HAS KNOWLEDGE THAT THE HEAD OF AN INSTITUTION OR THE 8 DESIGNEE OF THE HEAD OR ANOTHER INDIVIDUAL AT THAT INSTITUTION HAS 9 MADE A REPORT REGARDING THE SUBSTANCE-EXPOSED NEWBORN;
- 10 (2) HAS VERIFIED THAT, AT THE TIME OF DELIVERY, THE MOTHER
 11 WAS USING A CONTROLLED SUBSTANCE CURRENTLY PRESCRIBED FOR THE
 12 MOTHER BY A LICENSED HEALTH PRACTITIONER; OR
- 13 (3) HAS VERIFIED THAT, AT THE TIME OF DELIVERY, THE
 14 PRESENCE OF THE CONTROLLED SUBSTANCE WAS A RESULT OF A MEDICAL
 15 TREATMENT ADMINISTERED TO THE MOTHER OR THE NEWBORN.
- 16 (F) TO THE EXTENT KNOWN, AN INDIVIDUAL WHO MAKES A REPORT 17 UNDER THIS SECTION SHALL INCLUDE IN THE REPORT THE FOLLOWING 18 INFORMATION:
- 19 (1) THE NAME, DATE OF BIRTH, AND HOME ADDRESS OF THE 20 NEWBORN;
- 21 (2) THE NAMES AND HOME ADDRESSES OF THE NEWBORN'S 22 PARENTS;
- 23 (3) THE NATURE AND EXTENT OF THE EFFECTS OF THE 24 PRENATAL ALCOHOL OR DRUG EXPOSURE ON THE NEWBORN;
- 25 (4) THE NATURE AND EXTENT OF THE IMPACT OF THE PRENATAL ALCOHOL OR DRUG EXPOSURE ON THE MOTHER'S ABILITY TO PROVIDE PROPER CARE AND ATTENTION TO THE NEWBORN;
- 28 (5) THE NATURE AND EXTENT OF THE RISK OF HARM TO THE 29 NEWBORN;
- 30 **(6)** ANY OTHER INFORMATION THAT WOULD SUPPORT A 31 CONCLUSION THAT THE NEEDS OF THE NEWBORN REQUIRE A PROMPT 32 ASSESSMENT OF RISK AND SAFETY, THE DEVELOPMENT OF A PLAN OF SAFE

1	CARE FOR	THE NEWBORN,	AND	REFERRAL	OF T	THE	FAMILY	FOR	APPROPRIATE
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- 2 SERVICES; AND
- 3 (7) THE EXTENT TO WHICH THE NEWBORN'S FATHER OR OTHER
- 4 INDIVIDUAL IS AVAILABLE AND ABLE TO PROVIDE PROPER CARE AND
- 5 ATTENTION TO THE NEWBORN.
- 6 (G) WITHIN 48 HOURS AFTER RECEIVING THE NOTIFICATION
- 7 PURSUANT TO SUBSECTION (C) OF THIS SECTION, THE LOCAL DEPARTMENT
- 8 SHALL:
- 9 (1) SEE THE NEWBORN IN PERSON;
- 10 (2) CONSULT WITH A HEALTH PRACTITIONER WITH KNOWLEDGE
- 11 OF THE NEWBORN'S CONDITION AND THE EFFECTS OF ANY PRENATAL ALCOHOL
- 12 OR DRUG EXPOSURE; AND
- 13 (3) ATTEMPT TO INTERVIEW THE NEWBORN'S MOTHER AND ANY
- 14 OTHER INDIVIDUAL RESPONSIBLE FOR CARE OF THE NEWBORN.
- 15 (H) PROMPTLY AFTER RECEIVING A REPORT UNDER SUBSECTION (C)
- 16 OF THIS SECTION, THE LOCAL DEPARTMENT SHALL:
- 17 (1) ASSESS THE RISK AND SAFETY OF THE NEWBORN;
- 18 (2) DEVELOP A PLAN OF SAFE CARE FOR THE NEWBORN;
- 19 (3) ASSESS AND REFER THE FAMILY FOR APPROPRIATE
- 20 SERVICES, INCLUDING ALCOHOL OR DRUG TREATMENT; AND
- 21 (4) AS NECESSARY, DEVELOP A PLAN TO MONITOR THE SAFETY OF
- 22 THE NEWBORN AND THE FAMILY'S PARTICIPATION IN APPROPRIATE SERVICES.
- 23 (I) THE SECRETARY OF HUMAN RESOURCES SHALL ADOPT
- 24 REGULATIONS TO IMPLEMENT THE PROVISIONS OF THIS SECTION.
- 25 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
- 26 October 1, 2013.