

---

THE GENERAL ASSEMBLY OF PENNSYLVANIA

---

HOUSE BILL

No. 773 Session of  
2019

---

INTRODUCED BY McCLINTON, STEPHENS, READSHAW, T. DAVIS, STURLA,  
McNEILL, HILL-EVANS, BARRAR, MILLARD, B. MILLER, MASSER,  
NEILSON, SAPPEY, BERNSTINE, MURT, KINSEY, DEASY, OTTEN,  
TOOHIL, HEFFLEY, DeLUCA AND STRUZZI, MARCH 11, 2019

---

REFERRED TO COMMITTEE ON CHILDREN AND YOUTH, MARCH 11, 2019

---

AN ACT

1 Amending Title 23 (Domestic Relations) of the Pennsylvania  
2 Consolidated Statutes, in child protective services, further  
3 providing for notification to department and development of  
4 plan of safe care for children under one year of age.

5 The General Assembly of the Commonwealth of Pennsylvania  
6 hereby enacts as follows:

7 Section 1. Section 6386 of Title 23 of the Pennsylvania  
8 Consolidated Statutes, amended June 28, 2018 (P.L.375, No.54),  
9 is amended to read:

10 § 6386. Notification to department and development of plan of  
11 safe care for children under one year of age and  
12 certain other children.

13 (a) Notification to department.--For the purpose of  
14 assessing a child and the child's family for a plan of safe  
15 care, a health care provider shall immediately give notice or  
16 cause notice to be given to the department if the provider is  
17 involved in the delivery or care of a child under one year of  
18 age and the health care provider has determined, based on

1 standards of professional practice, the child was born affected  
2 by any of the following:

3 (1) [substance] Substance use or withdrawal symptoms,  
4 including neonatal abstinence syndrome, resulting from  
5 prenatal [drug] exposure[; or] to heroin, an opioid drug or  
6 any other illegal substance.

7 (2) [a] A Fetal Alcohol Spectrum Disorder.

8 (4) Withdrawal symptoms from prenatal exposure to a  
9 prescription drug, unless during pregnancy the child's mother  
10 was:

11 (i) under the primary care and treatment of a  
12 prescribing health care provider; and

13 (ii) in compliance with prescribing directions for  
14 the administration of the prescription drug as directed  
15 by the prescribing health care provider.

16 (a.1) Mandatory reporting applicable to all children.--A  
17 health care provider or first responder organization shall  
18 immediately make a report or cause a report to be made to the  
19 appropriate county agency if the health care provider or first  
20 responder renders emergency medical service, including the  
21 administration of Naloxone, for a heroin or an opioid overdose  
22 or an overdose resulting from the use of another illegal  
23 substance by a parent of a child under 18 years of age or by any  
24 other individual residing in the parent's household.

25 [(a.1)] (a.2) Notification not to constitute child abuse  
26 report.--The notification by a health care provider to the  
27 department and any transmittal to the county agency by the  
28 department shall not constitute a child abuse report.

29 [(b.1) Development of interagency protocols and plan of safe  
30 care.--The department, in collaboration with the Department of

1 Health and the Department of Drug and Alcohol Programs, shall  
2 develop written protocols that include, but are not limited to:

3 (1) Definitions and evidence-based screening tools,  
4 based on standards of professional practice, to be utilized  
5 by health care providers to identify a child born affected by  
6 substance use or withdrawal symptoms resulting from prenatal  
7 drug exposure or a fetal alcohol spectrum disorder.

8 (2) Notification to the department that a child born  
9 affected by substance use or withdrawal symptoms resulting  
10 from prenatal drug exposure or a fetal alcohol spectrum  
11 disorder has been born and identified. Ongoing involvement of  
12 the county agency after taking into consideration the  
13 individual needs of the child and the child's parents and  
14 immediate caregivers may not be required.

15 (3) Collection of data to meet Federal and State  
16 reporting requirements.

17 (4) Identification, informed by an assessment of the  
18 needs of the child and the child's parents and immediate  
19 caregivers, of the most appropriate lead agency responsible  
20 for developing, implementing and monitoring a plan of safe  
21 care, informed by a multidisciplinary team meeting that is  
22 held prior to the child's discharge from the health care  
23 facility, which may include:

24 (i) public health agencies;

25 (ii) maternal and child health agencies;

26 (iii) home visitation programs;

27 (iv) substance use disorder prevention and treatment  
28 providers;

29 (v) mental health providers;

30 (vi) public and private children and youth agencies;

1 (vii) early intervention and developmental services;

2 (viii) courts;

3 (ix) local education agencies;

4 (x) managed care organizations and private insurers;

5 and

6 (xi) hospitals and medical providers.

7 (5) Engagement of the child's parents and immediate  
8 caregivers in order to identify the need for access to  
9 treatment for any substance use disorder or other physical or  
10 behavioral health condition that may impact the safety, early  
11 childhood development and well-being of the child.]

12 (d) County agency duties.--Upon receipt of a report under  
13 this section, the county agency for the county where the child  
14 resides shall:

15 (1) Immediately ensure the safety of the child and see  
16 the child immediately if emergency protective custody is  
17 required or has been or shall be taken or if it cannot be  
18 determined from the report whether emergency protective  
19 custody is needed.

20 (2) Physically see the child within 48 hours of receipt  
21 of the report.

22 (3) Contact the parents of the child within 24 hours of  
23 receipt of the report.

24 (4) Provide or arrange reasonable services to ensure the  
25 child is provided with proper parental care, control and  
26 supervision.

27 (5) When an overdose is confirmed as a result of a  
28 report submitted under subsection (a.1), immediately see the  
29 child to determine if emergency protective custody is  
30 required to ensure that the health, safety and general well-

1 being of the child is protected.

2 (e) Definitions.--As used in this section, the following  
3 words and phrases shall have the meanings given to them in this  
4 subsection unless the context clearly indicates otherwise:

5 "First responder organization." The term shall include the  
6 following:

7 (1) A volunteer fire or rescue company or emergency  
8 medical services provider located in this Commonwealth.

9 (2) Law enforcement personnel of this Commonwealth,  
10 including Pennsylvania State Police troopers.

11 "Illegal substance." A controlled substance, designer drug  
12 or narcotic drug as those terms are defined in section 2 of the  
13 act of April 14, 1972 (P.L.233, No.64), known as The Controlled  
14 Substance, Drug, Device and Cosmetic Act.

15 "Neonatal abstinence syndrome." A group of health problems  
16 that occur in an infant who was exposed to opioid drugs in  
17 vitro, including, but not limited to, heroin, codeine,  
18 oxycodone, methadone or buprenorphine.

19 "Opioid drug." The term shall include any of the following:

20 (1) A preparation or derivative of opium.

21 (2) A synthetic narcotic that has opiate-like effects  
22 but is not derived from opium.

23 (3) A group of naturally occurring peptides that bind at  
24 or otherwise influence opiate receptors, including an opioid  
25 agonist.

26 "Overdose." The term shall include:

27 (1) The consumption, ingestion, inhalation, application  
28 or use of an illegal substance in violation of the applicable  
29 provisions of The Controlled Substance, Drug, Device and  
30 Cosmetic Act in an amount or under circumstances which may

1 result in severe toxicity or death.

2 (2) The consumption, ingestion, injection, inhalation,  
3 application or use of an illegal substance which has been  
4 processed, cut, prepared or otherwise mixed with another  
5 illegal substance or prescription drug in violation of the  
6 applicable provisions of The Controlled Substance, Drug,  
7 Device and Cosmetic Act in an amount or under circumstances  
8 which may result in severe toxicity or death.

9 (3) The consumption, ingestion, inhalation, application  
10 or use of a prescription drug in a manner not recommended by  
11 or in quantities greater than prescribed by a health care  
12 provider which may result in severe toxicity or death.

13 "Prescription drug." A drug as defined under section 2 of  
14 The Controlled Substance, Drug, Device and Cosmetic Act.

15 Section 2. This act shall take effect in 60 days.