SENATE BILL 6586

State of Washington 64th Legislature 2016 Regular Session

By Senator Fain

Read first time 01/27/16. Referred to Committee on Human Services, Mental Health & Housing.

AN ACT Relating to requiring the department of social and health services to collect and publicly report information on the safe surrender of newborn children; amending RCW 13.34.360; and creating a new section.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

6 NEW SECTION. Sec. 1. The legislature finds that on February 12, 7 2014, the body of a newborn girl was found near the side of a road in North Bend, Washington, wrapped in a blanket. The newborn was less 8 than half a mile away from Snoqualmie valley hospital, a location 9 10 where infants can be safely and anonymously surrendered under 11 Washington state's safety of newborn children law. The legislature further finds that while national estimates are that safe surrender 12 laws across the country have saved well over one thousand infants in 13 14 the past decade, surprisingly little is known about how many abandonment incidents occur and how many could have been or have been 15 16 prevented through safe surrender laws.

The legislature further finds that no newborn should be abandoned to die alone and hungry as its first and only exposure to the world, any life that can be saved under the safety of the newborn children law is worth saving, and understanding the characteristics of newborn abandonment and knowing when and where they occur is crucial for

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1 developing effective public awareness strategies to make caregivers aware of the state's safe surrender option. The legislature further 2 finds that while existing state law requires persons receiving 3 infants under the safety of newborn children law to notify child 4 protective services, which is situated within the Washington state 5 6 department of social and health services (DSHS) children's 7 administration, within twenty-four hours, there is no statutory requirement for DSHS to report data on surrendered newborns. The 8 legislature therefore intends to require DSHS to provide consistent 9 10 tracking and regular public reporting of safe surrender information 11 statewide and to regularly publish information on safe surrenders.

12 **Sec. 2.** RCW 13.34.360 and 2009 c 290 s 1 are each amended to 13 read as follows:

14 (1) For purposes of this section:

(a) "Appropriate location" means (i) the emergency department of a hospital licensed under chapter 70.41 RCW during the hours the hospital is in operation; (ii) a fire station during its hours of operation and while fire personnel are present; or (iii) a federally designated rural health clinic during its hours of operation.

20 (b) "Newborn" means a live human being who is less than seventy-21 two hours old.

22 "Qualified person" means (i) any person that the parent (C) 23 transferring the newborn reasonably believes is a bona fide employee, 24 volunteer, or medical staff member of the hospital or federally 25 designated rural health clinic and who represents to the parent transferring the newborn that he or she can and will summon 26 27 appropriate resources to meet the newborn's immediate needs; or (ii) a firefighter, volunteer, or emergency medical technician at a fire 28 station who represents to the parent transferring the newborn that he 29 30 she can and will summon appropriate resources to meet the or 31 newborn's immediate needs.

32 (2) A parent of a newborn who transfers the newborn to a 33 qualified person at an appropriate location is not subject to 34 criminal liability under RCW 9A.42.060, 9A.42.070, 9A.42.080, 35 26.20.030, or 26.20.035.

(3)(a) The qualified person at an appropriate location shall not
 require the parent transferring the newborn to provide any
 identifying information in order to transfer the newborn.

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1 (b) The qualified person at an appropriate location shall attempt to protect the anonymity of the parent who transfers the newborn, 2 while providing an opportunity for the parent to anonymously give the 3 qualified person such information as the parent knows about the 4 family medical history of the parents and the newborn. The qualified 5 6 person at an appropriate location shall provide referral information 7 about adoption options, counseling, appropriate medical and emotional aftercare services, domestic violence, and legal rights to the parent 8 9 seeking to transfer the newborn.

10 (c) If a parent of a newborn transfers the newborn to a qualified 11 person at an appropriate location pursuant to this section, the 12 qualified person shall cause child protective services to be notified 13 within twenty-four hours after receipt of such a newborn. Child 14 protective services shall assume custody of the newborn within 15 twenty-four hours after receipt of notification.

(d) A federally designated rural health clinic is not required to provide ongoing medical care of a transferred newborn beyond that already required by law and may transfer the newborn to a hospital licensed under chapter 70.41 RCW. The federally designated rural health clinic shall notify child protective services of the transfer of the newborn to the hospital.

(e) A hospital, federally designated rural health clinic, or fire station, its employees, volunteers, and medical staff are immune from any criminal or civil liability for accepting or receiving a newborn under this section.

(4)(a) Beginning July 1, 2011, an appropriate location shall post
a sign indicating that the location is an appropriate place for the
safe and legal transfer of a newborn.

(b) To cover the costs of acquiring and placing signs,
 appropriate locations may accept nonpublic funds and donations.

31 (5) The department of social and health services shall collect and compile information concerning: (a) The number and medical 32 condition of newborns transferred under this section after the 33 effective date of this section; and (b) the number and medical 34 condition of newborns abandoned within the state who were not 35 transferred under this section after the effective date of this 36 section. The department shall report its findings to the public 37 annually, which may be on its web site, beginning July 31, 2016. 38

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