substance exposure; pregnant women; neglect

State of Arizona House of Representatives Fifty-sixth Legislature First Regular Session 2023

HOUSE BILL 2530

AN ACT

AMENDING SECTION 8-455, ARIZONA REVISED STATUTES; AMENDING TITLE 8, CHAPTER 4, ARTICLE 8, ARIZONA REVISED STATUTES, BY ADDING SECTION 8-818; AMENDING SECTIONS 8-819 AND 13-3620, ARIZONA REVISED STATUTES; AMENDING TITLE 36, CHAPTER 29, ARTICLE 1, ARIZONA REVISED STATUTES, BY ADDING SECTION 36-2930.07; RELATING TO CHILD NEGLECT.

(TEXT OF BILL BEGINS ON NEXT PAGE)

- i -

Be it enacted by the Legislature of the State of Arizona: Section 1. Section 8-455, Arizona Revised Statutes, is amended to read:

8-455. Centralized intake hotline; purposes; report of possible crime; DCS report; risk assessment tools; access to information; public awareness; definitions

- A. The department shall operate and maintain a centralized intake hotline to protect children by receiving at all times communications concerning suspected abuse or neglect. If a person communicates suspected abuse or neglect to a department employee other than through the hotline, the employee shall refer the person or communication to the hotline.
- B. The hotline is the first step in the safety assessment and investigation process and must be operated to:
- $1. \ \ {\it Record} \ \ {\it communications} \ \ {\it made} \ \ {\it concerning} \ \ {\it suspected} \ \ {\it abuse} \ \ {\it or} \ \ {\it neglect}.$
- 2. Immediately take steps necessary to identify and locate prior communications and DCS reports related to the current communication using the department's data system and the central registry system of this state.
- 3. Quickly and efficiently provide information to a law enforcement agency or prepare a DCS report as required by this section.
- 4. Determine the proper initial priority level of investigation based on the report screening assessment and direct the DCS report to the appropriate part of the department based on this determination.
- C. If a communication provides a reason to believe that a criminal offense has been committed and the communication does not meet the criteria for a DCS report, the hotline worker shall immediately provide the information to the appropriate law enforcement agency.
- D. A hotline worker shall prepare a DCS report if the identity or current location of the child victim, the child's family or the person suspected of abuse or neglect is known or can be reasonably ascertained and all of the following are alleged:
 - 1. The suspected conduct would constitute abuse or neglect.
- 2. The suspected victim of the conduct is under eighteen years of age.
- 3. The suspected victim of the conduct is a resident of or present in this state.
- 4. The person suspected of committing the abuse or neglect is the parent, guardian or custodian of the victim or an adult member of the victim's household.
- E. Except for criminal conduct allegations, the department is not required to prepare a DCS report if all of the following apply:
- 1. The suspected conduct occurred more than three years before the communication to the hotline.

- 1 -

- 2. There is no information or indication that a child is currently being abused or neglected.
- F. IF THE DEPARTMENT RECEIVES A COMMUNICATION INVOLVING SUBSTANCE USE BY A PREGNANT WOMAN, THE DEPARTMENT SHALL PROVIDE INFORMATION REGARDING THE COMMUNICATION TO THE ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM, WHICH SHALL REFER THE WOMAN TO A PROVIDER FOR SUBSTANCE USE TREATMENT. THE RECEIPT OF A COMMUNICATION INVOLVING SUBSTANCE USE BY A PREGNANT WOMAN MAY NOT RESULT IN AN INVESTIGATION OF ABUSE OR NEGLECT.
- F. G. Investigations of DCS reports shall be conducted as provided in section 8-456 except for investigations containing allegations of criminal conduct, which shall be conducted as provided in section 8-471.
- 6. H. The department is not required to prepare a DCS report concerning alleged abuse or neglect if the alleged act or acts occurred in a foreign country and the child is in the custody of the federal government.
- H. I. The department shall develop and train hotline workers to use uniform risk assessment tools to determine:
- 1. Whether the suspected conduct constitutes abuse or neglect and the severity of the suspected abuse or neglect.
- 2. Whether the suspected abuse or neglect involves criminal conduct, even if the communication does not result in the preparation of a DCS report.
- 3. The appropriate investigative track for referral based on the risk to the child's safety.
- $rac{ extsf{T.}}{ extsf{J.}}$ J. A DCS report must include, if available, all of the following:
- 1. The name, address or contact information for the person making the communication.
- 2. The name, address and other location or contact information for the parent, guardian or custodian of the child or other adult member of the child's household who is suspected of committing the abuse or neglect.
- 3. The name, address and other location or contact information for the $\mbox{child}.$
- 4. The nature and extent of the indications of the child's abuse or neglect, including any indication of physical injury.
- 5. Any information regarding possible prior abuse or neglect, including reference to any communication or DCS report involving the child, the child's siblings or the person suspected of committing the abuse or neglect.
- J. K. Information gathered through the hotline must be made available to an employee of the department in order to perform the employee's duties. The office of child welfare investigations and the inspections bureau must have immediate access to all records of the hotline.

- 2 -

K. L. A representative of the:

- 1. Office of child welfare investigations must be embedded in the hotline to carry out the purposes of section 8-471.
- 2. Inspections bureau must be embedded in the hotline to carry out the purposes of section 8-458.
- t. M. The department shall publicize the availability and the purposes of the centralized intake hotline.
 - M. N. For the purposes of this section:
- 1. "Centralized intake hotline" means the system developed pursuant to this section regardless of the communication methods or technologies used to implement the system.
- 2. "Criminal offense" means an allegation of conduct against a child by a person other than a parent, guardian or custodian of the child victim or another adult member of the child's household that, if true, would constitute a felony offense.
- Sec. 2. Title 8, chapter 4, article 8, Arizona Revised Statutes, is amended by adding section 8-818, to read:
 - 8-818. <u>Prenatal substance use: services and support</u>

ON A FINDING OF A PREGNANT WOMAN USING ALCOHOL OR A DANGEROUS DRUG OR NARCOTIC DRUG AS DEFINED IN SECTION 13-3401 AND SUBJECT TO THE REPORTING REQUIREMENTS PRESCRIBED IN SECTION 13-3620, A HEALTH CARE PROFESSIONAL WHO IS LICENSED OR CERTIFIED PURSUANT TO TITLE 32 SHALL REFER THE WOMAN TO SUBSTANCE USE SERVICES AND SUPPORT TO FACILITATE MATERNAL AND INFANT SAFETY.

Sec. 3. Section 8-819, Arizona Revised Statutes, is amended to read:

8-819. <u>Determination of neglect</u>

In determining if a child is neglected, consideration shall be given to:

- 1. The drug or alcohol abuse of the child's parent, guardian or custodian.
- 2. The use by the mother of a dangerous drug, a narcotic drug or alcohol during pregnancy if the child, at birth or within a year after birth, is demonstrably adversely affected by this use. For the purposes of this paragraph, "dangerous drug" and "narcotic drug" have the same meaning MEANINGS prescribed in section 13-3401.
- 3. PROOF THAT THE MOTHER WAS REFERRED FOR SUBSTANCE USE SERVICES AND SUPPORT PURSUANT TO SECTION 8-818 AND PARTICIPATED IN SUBSTANCE USE TREATMENT CERTIFIED BY A HEALTH CARE PROFESSIONAL WHO IS REGULATED PURSUANT TO TITLE 32. PROOF OF THE MOTHER'S PARTICIPATION IN SUBSTANCE USE TREATMENT MAY BE CONSIDERED A MITIGATING FACTOR IN DETERMINING NEGLECT.

- 3 -

2

3

4

5

6 7

8

9

10

11

12

13

14

1516

17

18

19

20

21

22

23 24

25

26

27

28 29

30

31

32

33

34

35

36

37

38

39

40

41

42 43

44 45 Sec. 4. Section 13-3620, Arizona Revised Statutes, is amended to read:

13-3620. <u>Duty to report abuse, physical injury, neglect and denial or deprivation of medical or surgical care or nourishment of minors; medical records; exception; violation; classification; definitions</u>

- A. Any person who reasonably believes that a minor is or has been the victim of physical injury, abuse, child abuse, a reportable offense or neglect that appears to have been inflicted on the minor by other than accidental means or that is not explained by the available medical history as being accidental in nature or who reasonably believes there has been a denial or deprivation of necessary medical treatment or surgical care or nourishment with the intent to cause or allow the death of an infant who is protected under section 36-2281 shall immediately report or cause reports to be made of this information to a peace officer, to the department of child safety or to a tribal law enforcement or social services agency for any Indian minor who resides on an Indian reservation, except if the report concerns a person who does not have care, custody or control of the minor, the report shall be made to a peace officer only. A member of the clergy, a Christian Science practitioner or a priest who has received a confidential communication or a confession in that person's role as a member of the clergy, as a Christian Science practitioner or as a priest in the course of the discipline enjoined by the church to which the member of the clergy, the Christian Science practitioner or the priest belongs may withhold reporting of the communication or confession if the member of the clergy, the Christian Science practitioner or the priest determines that it is reasonable and necessary within the concepts of the religion. This exemption applies only to the communication or confession and not to personal observations the member of the clergy, the Christian Science practitioner or the priest may otherwise make of the minor. For the purposes of this subsection, "person" means:
- 1. Any physician, physician's assistant, optometrist, dentist, osteopathic physician, chiropractor, podiatrist, behavioral health professional, nurse, psychologist, counselor or social worker who develops the reasonable belief in the course of treating a patient.
- 2. Any peace officer, child welfare investigator, child safety worker, member of the clergy, priest or Christian Science practitioner.
 - 3. The parent, stepparent or guardian of the minor.
- 4. School personnel, domestic violence victim advocates or sexual assault victim advocates who develop the reasonable belief in the course of their employment.
- 5. Any other person who has responsibility for the care or treatment of the minor.
- 6. Any person who is employed as the immediate or next higher level supervisor to or administrator of a person who is listed in paragraph 1,

- 4 -

- 2, 4 or 5 of this subsection and who develops the reasonable belief in the course of the supervisor's or administrator's employment, except that if the supervisor or administrator reasonably believes that the report has been made by a person who is required to report pursuant to paragraph 1, 2, 4 or 5 of this subsection, the supervisor or administrator is not required to report pursuant to this paragraph.
 - B. A report is not required under this section either:
- 1. For conduct prescribed by sections 13-1404 and 13-1405 if the conduct involves only minors who are fourteen, fifteen, sixteen or seventeen years of age and there is nothing to indicate that the conduct is other than consensual.
- 2. If a minor is of elementary school age, the physical injury occurs accidentally in the course of typical playground activity during a school day, occurs on the premises of the school that the minor attends and is reported to the legal parent or guardian of the minor and the school maintains a written record of the incident.
- C. If a physician, psychologist or behavioral health professional receives a statement from a person other than a parent, stepparent, guardian or custodian of the minor during the course of providing sex offender treatment that is not court ordered or that does not occur while the offender is incarcerated in the state department of corrections or the department of juvenile corrections, the physician, psychologist or behavioral health professional may withhold the reporting of that statement if the physician, psychologist or behavioral health professional determines it is reasonable and necessary to accomplish the purposes of the treatment.
- D. Reports shall be made immediately either electronically or by telephone. The reports shall contain the following information, if known:
- 1. The names and addresses of the minor and the minor's parents or the person or persons having custody of the minor.
- 2. The minor's age and the nature and extent of the minor's abuse, child abuse, physical injury or neglect, including any evidence of previous abuse, child abuse, physical injury or neglect.
- 3. Any other information that the person believes might be helpful in establishing the cause of the abuse, child abuse, physical injury or neglect.
- E. A health care professional who is regulated pursuant to title 32 and who: $\overline{}$
- 1. After a routine newborn physical assessment of a newborn infant's health status or following AND notification of positive toxicology screens of a newborn infant, reasonably believes that the newborn infant may be affected by the presence of alcohol or a drug listed in section 13-3401 shall immediately report this information, or cause a report to be made, to the department of child safety. For the purposes of

- 5 -

 this subsection PARAGRAPH, "newborn infant" means a newborn infant who is under thirty days of age.

- 2. THROUGH CLINICAL INDICATORS IN THE PRENATAL PERIOD, INCLUDING MATERNAL PRESENTATION OR POSITIVE TOXICOLOGY OR OTHER LABORATORY TESTS, SUSPECTS THE USE OF ALCOHOL OR A DANGEROUS DRUG OR NARCOTIC DRUG AS DEFINED IN SECTION 13-3401 SHALL IMMEDIATELY REFER THE WOMAN TO THE ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM FOR SUBSTANCE USE SERVICES AND SUPPORT PURSUANT TO SECTION 8-818. THE PRESENCE OF PRENATAL CLINICAL INDICATORS OR THE WOMAN'S HISTORY OF SUBSTANCE USE OR PARTICIPATION IN SUBSTANCE USE SERVICES AND SUPPORT ALONE MAY NOT BE THE BASIS OF A REPORT PURSUANT TO THIS SUBSECTION OF SUSPECTED NEGLECT MADE TO THE DEPARTMENT OF CHILD SAFETY ON THE BIRTH OF THE CHILD.
- F. Any person other than one required to report or cause reports to be made under subsection A of this section who reasonably believes that a minor is or has been a victim of abuse, child abuse, physical injury, a reportable offense or neglect may report the information to a peace officer or to the department of child safety, except if the report concerns a person who does not have care, custody or control of the minor, the report shall be made to a peace officer only.
- G. A person who has custody or control of medical records of a minor for whom a report is required or authorized under this section shall make the records, or a copy of the records, available to a peace officer, child welfare investigator or child safety worker investigating the minor's neglect, child abuse, physical injury or abuse on written request for the records signed by the peace officer, child welfare investigator or child safety worker. Records disclosed pursuant to this subsection are confidential and may be used only in a judicial or administrative proceeding or investigation resulting from a report required or authorized under this section.
- H. When reports are received by a peace officer, the officer shall immediately notify the department of child safety. Notwithstanding any other statute, when the department receives these reports, it shall immediately notify a peace officer in the appropriate jurisdiction.
- I. Any person who is required to receive reports pursuant to subsection A of this section may take or cause to be taken photographs of the minor and the vicinity involved. Medical examinations of the involved minor may be performed.
- J. A person who furnishes a report, information or records required or authorized under this section, or a person who participates in a judicial or administrative proceeding or investigation resulting from a report, information or records required or authorized under this section, is immune from any civil or criminal liability by reason of that action unless the person acted with malice or unless the person has been charged with or is suspected of abusing or neglecting the child or children in question.

- 6 -

- K. Except for the attorney client privilege or the privilege under subsection L of this section, no privilege applies to any:
- 1. Civil or criminal litigation or administrative proceeding in which a minor's neglect, dependency, abuse, child abuse, physical injury or abandonment is an issue.
- 2. Judicial or administrative proceeding resulting from a report, information or records submitted pursuant to this section.
- 3. Investigation of a minor's child abuse, physical injury, neglect or abuse conducted by a peace officer or the department of child safety.
- L. In any civil or criminal litigation in which a child's neglect, dependency, physical injury, abuse, child abuse or abandonment is an issue, a member of the clergy, a Christian Science practitioner or a priest shall not, without his consent, be examined as a witness concerning any confession made to him in his role as a member of the clergy, a Christian Science practitioner or a priest in the course of the discipline enjoined by the church to which he belongs. This subsection does not discharge a member of the clergy, a Christian Science practitioner or a priest from the duty to report pursuant to subsection A of this section.
- M. If psychiatric records are requested pursuant to subsection G of this section, the custodian of the records shall notify the attending psychiatrist, who may excise from the records, before they are made available:
 - 1. Personal information about individuals other than the patient.
- 2. Information regarding specific diagnosis or treatment of a psychiatric condition, if the attending psychiatrist certifies in writing that release of the information would be detrimental to the patient's health or treatment.
- N. If any portion of a psychiatric record is excised pursuant to subsection M of this section, a court, on application of a peace officer, child welfare investigator or child safety worker, may order that the entire record or any portion of the record that contains information relevant to the reported abuse, child abuse, physical injury or neglect be made available to the peace officer, child welfare investigator or child safety worker investigating the abuse, child abuse, physical injury or neglect.
- 0. A person who violates this section is guilty of a class 1 misdemeanor, except if the failure to report involves a reportable offense, the person is guilty of a class 6 felony.
 - P. For the purposes of this section:
 - 1. "Abuse" has the same meaning prescribed in section 8-201.
 - 2. "Child abuse" means child abuse pursuant to section 13-3623.
 - 3. "Neglect" has the same meaning prescribed in section 8–201.
 - 4. "Reportable offense" means any of the following:
- (a) Any offense listed in chapters 14 and 35.1 of this title or section 13-3506.01.

- 7 -

7

8

9

10

11

12 13

```
(b) Surreptitious photographing, videotaping, filming or digitally recording or viewing a minor pursuant to section 13-3019.
(c) Child sex trafficking pursuant to section 13-3212.
(d) Incest pursuant to section 13-3608.
(e) Unlawful mutilation pursuant to section 13-1214.
```

Sec. 5. Title 36, chapter 29, article 1, Arizona Revised Statutes, is amended by adding section 36-2930.07, to read:

36-2930.07. Prenatal substance use; services and support

ON A FINDING OR REPORT TO THE DEPARTMENT OF CHILD SAFETY OF A PREGNANT WOMAN USING ALCOHOL OR A DANGEROUS DRUG OR NARCOTIC AS DEFINED IN SECTION 13-3401, A HEALTH CARE PROFESSIONAL WHO IS LICENSED PURSUANT TO TITLE 32 SHALL REFER THE WOMAN TO SUBSTANCE USE SERVICES AND SUPPORT TO FACILITATE MATERNAL AND INFANT SAFETY.

- 8 -