

**CHAPTER 152****( HB 167 )**

AN ACT relating to birth mothers and newborn infants.

Be it enacted by the General Assembly of the Commonwealth of Kentucky:

➔Section 1. KRS 405.075 is amended to read as follows:

- (1) As used in this section:
  - (a) "Newborn infant" means an infant who is medically determined to be less than thirty (30) days old; and
  - (b) "Participating place of worship" means a recognized place of religious worship that has voluntarily agreed to perform the duty granted in this section and display signage prominently on its premises regarding its participation in this section and its operating hours during which staff will be present.
- (2) A parent who places a newborn infant with an emergency medical services provider or at a staffed police station, fire station, hospital, or participating place of worship and expresses no intent to return for the infant shall have the right to remain anonymous and not be pursued and shall not be considered to have abandoned or endangered the newborn infant under KRS Chapters 508 and 530.
- (3)
  - (a) Any emergency medical services provider, police officer, or firefighter who accepts physical custody of a newborn infant in accordance with this section shall immediately arrange for the infant to be taken to the nearest hospital emergency room and shall have implied consent to any and all appropriate medical treatment.
  - (b) Any staff member at a participating place of worship who accepts physical custody of a newborn infant in accordance with this section shall immediately contact the 911 emergency telephone service as set forth in KRS 65.750 to 65.760, wireless enhanced 911 system as set forth in KRS 65.7621 to 65.7643, or emergency medical services as set forth in KRS Chapter 311A for transportation to the nearest hospital emergency room.
- (4) By placing a newborn infant in the manner described in this section, the parent:
  - (a) Waives the right to notification required by subsequent court proceedings conducted under KRS Chapter 620 until such time as a claim of parental rights is made; and
  - (b) Waives legal standing to make a claim of action against any person who accepts physical custody of the newborn infant.
- (5) ***A staffed police station, fire station, hospital, emergency medical facility, or participating place of worship may post a sign easily seen by the public stating that: "This facility is a safe and legal place to surrender a newborn infant who is less than 30 days old. A parent who places a newborn infant at this facility and expresses no intent to return for the infant shall have the right to remain anonymous and not be pursued and shall not be considered to have abandoned or endangered their newborn infant under KRS Chapters 508 and 530."***
- (6) Actions taken by an emergency medical services provider, police officer, firefighter, or staff member at a participating place of worship in conformity with the duty granted in this section shall be immune from criminal or civil liability. Nothing in this subsection shall limit liability for negligence.
- ~~(7)(6)~~ The provisions of subsection (2) of this section shall not apply when indicators of child physical abuse or child neglect are present.
- ~~(8)(7)~~ KRS 211.951, 216B.190, 405.075, 620.350, and 620.355 shall be known as "The Representative Thomas J. Burch Safe Infants Act."

➔Section 2. KRS 211.680 is amended to read as follows:

The Kentucky General Assembly declares that the purpose of KRS 211.680 to 211.686 and KRS 72.029 is to reduce the number of child ***and maternal*** fatalities. The General Assembly finds that establishing priorities and developing programs to prevent child ***and maternal*** fatalities requires the:

- (1) Accurate determination of the cause and manner of death;

- (2) Cooperation and communication among agencies responsible for the investigation of child *and maternal* fatalities; and
- (3) Collection and analysis of data to:
  - (a) Identify trends, patterns, and risk factors; and
  - (b) Evaluate the effectiveness of prevention and intervention strategies.

➔Section 3. KRS 211.684 is amended to read as follows:

- (1) For the purposes of KRS Chapter 211:
  - (a) "Child fatality" means the death of a person under the age of eighteen (18) years; ~~and~~
  - (b) "Local child *and maternal* fatality response team" and "local team" means a community team composed of representatives of agencies, offices, and institutions that investigate child *and maternal* deaths, including but not limited to, coroners, social service workers, medical professionals, law enforcement officials, and Commonwealth's and county attorneys; *and*
  - (c) "*Maternal fatality*" means the death of a woman within one (1) year of giving birth.
- (2) The Department for Public Health may establish a state child *and maternal* fatality review team. The state team may include representatives of public health, social services, law enforcement, prosecution, coroners, health-care providers, and other agencies or professions deemed appropriate by the commissioner of the department.
- (3) If a state team is created, the duties of the state team may include the following:
  - (a) Develop and distribute a model protocol for local child *and maternal* fatality response teams for the investigation of child *and maternal* fatalities;
  - (b) Facilitate the development of local child *and maternal* fatality response teams which may include, but is not limited to, providing joint training opportunities and, upon request, providing technical assistance;
  - (c) Review and approve local protocols prepared and submitted by local teams;
  - (d) Receive data and information on child *and maternal* fatalities and analyze the information to identify trends, patterns, and risk factors;
  - (e) Evaluate the effectiveness of prevention and intervention strategies adopted; and
  - (f) Recommend changes in state programs, legislation, administrative regulations, policies, budgets, and treatment and service standards which may facilitate strategies for prevention and reduce the number of child *and maternal* fatalities.
- (4) The department shall prepare an annual report to be submitted no later than November 1 of each year to the Governor, the Legislative Research Commission, the Chief Justice of the Kentucky Supreme Court, and to be made available to the citizens of the Commonwealth. The report shall include a statistical analysis of the incidence and causes of child *and maternal* fatalities in the Commonwealth during the past fiscal year and recommendations for action. The report shall not include any information which would identify specific child *and maternal* fatality cases.

➔Section 4. KRS 211.686 is amended to read as follows:

- (1) A local child *and maternal* fatality response team may be established in every county or group of contiguous counties by the coroner or coroners with jurisdiction in the county or counties. The local coroner may authorize the creation of additional local teams within the coroner's jurisdiction as needed.
- (2) Membership of the local team may include representatives of the coroner, the local office of the Department for Community Based Services, law enforcement agencies with investigation responsibilities for child *and maternal* fatalities which occur within the jurisdiction of the local team, the Commonwealth's and county attorneys, representatives of the medical profession, and other members whose participation the local team believes is important to carry out its purpose. Each local team member shall be appointed by the agency the member is representing and shall serve at the pleasure of the appointing authority.
- (3) The purpose of the local child *and maternal* fatality response team shall be to:
  - (a) Allow each member to share specific and unique information with the local team;

- (b) Generate overall investigative direction and emphasis through team coordination and sharing of specialized information;
  - (c) Create a body of information that will assist in the coroner's effort to accurately identify the cause and reasons for death; and
  - (d) Facilitate the appropriate response by each member agency to the fatality, including but not limited to, intervention on behalf of ~~others~~~~other children~~ who may be adversely affected by the situation, implementation of health services necessary for protection of other citizens, further investigation by law enforcement, or legal action by Commonwealth's or county attorneys.
- (4) The local team may:
- (a) Analyze information regarding local child *and maternal* fatalities to identify trends, patterns, and risk factors;
  - (b) Recommend to the state team, and any other entities deemed appropriate, changes in state or local programs, legislation, administrative regulations, policies, budgets, and treatment and service standards which may facilitate strategies for prevention and reduce the number of child *and maternal* fatalities; and
  - (c) Evaluate the effectiveness of local prevention and intervention strategies.
- (5) The local team may establish a protocol for the investigation of child *and maternal* fatalities and may establish operating rules and procedures as it deems necessary to carry out the purposes of this section.
- (6) The review of a child *and maternal* fatality by a local team may include information from reports generated or received by agencies, organizations, or individuals that are responsible for investigation, prosecution, or treatment in the case.
- (7) The proceedings, records, opinions, and deliberations of the local team shall be privileged and shall not be subject to discovery, subpoena, or introduction into evidence in any civil action in any manner that would directly or indirectly identify specific persons or cases reviewed by the local team. Nothing in this subsection shall be construed to restrict or limit the right to discover or use in any civil action any evidence that is discoverable independent of the proceedings of the local team.

**Signed by Governor April 13, 2018.**