



Reprinted
February 19, 2014

ENGROSSED SENATE BILL No. 227

DIGEST OF SB 227 (Updated February 18, 2014 2:24 pm - DI 69)

Citations Affected: IC 2-5; IC 7.1-5; IC 16-18; IC 16-19; IC 16-31; IC 34-31; IC 35-38; noncode.

Synopsis: Alcohol and medical emergencies; crime studies. Provides that a person is immune from arrest or prosecution for certain alcohol offenses if the arrest or prosecution is due to the person: (1) reporting a medical emergency; (2) being the victim of a sex offense; or (3) witnessing and reporting what the person believes to be a crime. (Current law provides immunity from arrest or prosecution only if the
(Continued next page)

Effective: Upon passage; July 1, 2014.

Merritt, Head, Randolph

(HOUSE SPONSORS — MCMILLIN, FRYE R, HALE, TURNER)

January 9, 2014, read first time and referred to Committee on Judiciary.
January 23, 2014, amended, reported favorably — Do Pass.
January 27, 2014, read second time, amended, ordered engrossed.
January 28, 2014, engrossed. Read third time, passed. Yeas 49, nays 0.

HOUSE ACTION

February 4, 2014, read first time and referred to Committee on Courts and Criminal Code.
February 13, 2014, amended, reported — Do Pass.
February 18, 2014, read second time, amended, ordered engrossed.

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Digest Continued

person reports a medical emergency that is due to alcohol consumption.) Establishes a mitigating circumstance for the sentencing of a person convicted of a controlled substance offense if the person's arrest or prosecution was facilitated in part because the person requested emergency medical assistance for an individual in need of medical assistance due to the use of alcohol or a controlled substance. Allows a court to defer entering a judgment of conviction for an individual arrested for an alcohol offense if the individual was arrested after a report that the person needed medical assistance due to the use of alcohol if certain conditions are met. Allows an advanced emergency medical technician, an emergency medical responder, an emergency medical technician, a firefighter or volunteer firefighter, a law enforcement officer, or a paramedic to administer an overdose intervention drug to a person suffering from an overdose. Allows certain health care providers to prescribe, and a pharmacist to dispense, an overdose intervention drug for an advanced emergency medical technician, an emergency medical responder, an emergency medical technician, a fire department or volunteer fire department, a law enforcement agency, or a paramedic. Requires the commission on improving the status of children in Indiana to study and evaluate: (1) crimes of sexual violence against children; and (2) the impact of social media, wireless communications, digital media, and new technology on crimes against children. Requires the state department of health or the office of women's health to conduct a study to determine the number of persons who are the victims of crimes of domestic or sexual violence, the reasons why these crimes are underreported, best practices to improve reporting, and the most effective means to connect victims with appropriate treatment services. Establishes a framework for the study, and permits the department of health or the office of women's health to contract with a third party to conduct the study. Urges the legislative council to assign to the appropriate study committee during the 2014 interim the task of studying the causes of violence and violent crime in Indiana.

ES 227—LS 6844/DI 106



Reprinted
February 19, 2014

Second Regular Session 118th General Assembly (2014)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2013 Regular Session and 2013 First Regular Technical Session of the General Assembly.

ENGROSSED SENATE BILL No. 227

A BILL FOR AN ACT to amend the Indiana Code concerning criminal law and procedure.

Be it enacted by the General Assembly of the State of Indiana:

- 1 SECTION 1. IC 2-5-36-9, AS ADDED BY P.L.119-2013,
2 SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3 JULY 1, 2014]: Sec. 9. The commission shall do the following:
4 (1) Study and evaluate the following:
5 (A) Access to services for vulnerable youth.
6 (B) Availability of services for vulnerable youth.
7 (C) Duplication of services for vulnerable youth.
8 (D) Funding of services available for vulnerable youth.
9 (E) Barriers to service for vulnerable youth.
10 (F) Communication and cooperation by agencies concerning
11 vulnerable youth.
12 (G) Implementation of programs or laws concerning
13 vulnerable youth.
14 (H) The consolidation of existing entities that serve vulnerable
15 youth.
16 (I) Data from state agencies relevant to evaluating progress,

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1 targeting efforts, and demonstrating outcomes.

2 **(J) Crimes of sexual violence against children.**

3 **(K) The impact of social networking web sites, cellular**
 4 **telephones and wireless communications devices, digital**
 5 **media, and new technology on crimes against children.**

6 (2) Review and make recommendations concerning pending
 7 legislation.

8 (3) Promote information sharing concerning vulnerable youth
 9 across the state.

10 (4) Promote best practices, policies, and programs.

11 (5) Cooperate with:

12 (A) other child focused commissions;

13 (B) the judicial branch of government;

14 (C) the executive branch of government;

15 (D) stakeholders; and

16 (E) members of the community.

17 (6) Submit a report not later than July 1 of each year regarding the
 18 commission's work during the previous year. The report shall be
 19 submitted to the legislative council, the governor, and the chief
 20 justice of Indiana. The report to the legislative council must be in
 21 an electronic format under IC 5-14-6.

22 SECTION 2. IC 7.1-5-1-6.5, AS ADDED BY P.L.93-2012,
 23 SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 24 UPON PASSAGE]: Sec. 6.5. (a) A law enforcement officer may not
 25 take a person into custody based solely on the commission of an
 26 offense involving alcohol described in subsection (b) if the law
 27 enforcement officer, after making a reasonable determination and
 28 considering the facts and surrounding circumstances, reasonably
 29 believes that all of the following apply:

30 (1) The law enforcement officer has contact with the person
 31 because the person:

32 (A) either:

33 (A) (i) requested emergency medical assistance; or

34 (B) (ii) acted in concert with another person who requested
 35 emergency medical assistance;

36 for an individual who reasonably appeared to be in need of
 37 medical assistance; ~~due to alcohol consumption.~~

38 (B) is the victim of a reported sex offense (as defined in
 39 IC 11-8-8-5.2); or

40 (C) witnessed and reported what the person reasonably
 41 believed to be a crime.

42 (2) The person described in subdivision (1)(A), ~~or~~ (1)(B), or



- 1 **(1)(C):**
 2 (A) provided:
 3 (i) the person's full name; and
 4 (ii) any other relevant information requested by the law
 5 enforcement officer; **and**
 6 **(B) in the case of a person described in subdivision (1)(A):**
 7 ~~(B) (i)~~ remained at the scene with the individual who
 8 reasonably appeared to be in need of medical assistance ~~due~~
 9 ~~to alcohol consumption~~ until emergency medical assistance
 10 arrived; and
 11 ~~(C) (ii)~~ cooperated with emergency medical assistance
 12 personnel and law enforcement officers at the scene.
 13 (b) A person who meets the criteria of subsection (a)(1) and (a)(2)
 14 is immune from criminal prosecution for an offense under:
 15 (1) section 3 of this chapter if the offense involved a state of
 16 intoxication caused by the person's use of alcohol;
 17 (2) section 6 of this chapter if the offense involved the person
 18 being, or becoming, intoxicated as a result of the person's use of
 19 alcohol; and
 20 (3) IC 7.1-5-7-7.
 21 (c) A person may not initiate or maintain an action against a law
 22 enforcement officer based on the officer's compliance or failure to
 23 comply with this section.
 24 SECTION 3. IC 7.1-5-1-6.6 IS ADDED TO THE INDIANA CODE
 25 AS A **NEW SECTION TO READ AS FOLLOWS [EFFECTIVE**
 26 **UPON PASSAGE]: Sec. 6.6. (a) This section applies only to a**
 27 **person:**
 28 **(1) arrested for a violation of:**
 29 **(A) section 3 of this chapter if the offense involved a state**
 30 **of intoxication caused by the person's use of alcohol;**
 31 **(B) section 6 of this chapter if the offense involved the**
 32 **person being, or becoming, intoxicated as a result of the**
 33 **person's use of alcohol; or**
 34 **(C) IC 7.1-5-7-7; and**
 35 **(2) whose arrest was facilitated because another person**
 36 **reported that the person appeared to be in need of medical**
 37 **assistance due to the use of alcohol.**
 38 **(b) If a person described in subsection (a):**
 39 **(1) does not have a prior conviction for an offense described**
 40 **in subsection (a);**
 41 **(2) pleads guilty to an offense described in subsection (a); and**
 42 **(3) agrees to be placed in the custody of the court;**



1 the court, without entering a judgment of conviction, shall defer
 2 further proceedings and place the person in the custody of the
 3 court under conditions determined by the court.

4 (c) If the person placed in the custody of the court violates the
 5 conditions of custody, the court may enter a judgment of
 6 conviction. However, if the person fulfills the conditions of the
 7 custody, the court shall dismiss the charges against the person.

8 (d) There may be only one (1) dismissal under this section with
 9 respect to a person.

10 SECTION 4. IC 16-18-2-88.5 IS ADDED TO THE INDIANA
 11 CODE AS A NEW SECTION TO READ AS FOLLOWS
 12 [EFFECTIVE JULY 1, 2014]: **Sec. 88.5. "Crime of domestic or**
 13 **sexual violence"** means a sex offense (as defined in IC 11-8-8-5.2)
 14 or a crime of domestic violence (as defined in IC 35-31.5-2-78). The
 15 term includes a delinquent act that would be a sex offense or a
 16 crime of domestic violence if committed by an adult.

17 SECTION 5. IC 16-18-2-263.9 IS ADDED TO THE INDIANA
 18 CODE AS A NEW SECTION TO READ AS FOLLOWS
 19 [EFFECTIVE UPON PASSAGE]: **Sec. 263.9. "Overdose**
 20 **intervention drug"**, for purposes of IC 16-31, means naloxone or
 21 any other drug that:

22 (1) is an opioid, opiate, or morphine antagonist; and

23 (2) prevents or reverses the effects of:

24 (A) opioids;

25 (B) opiates; or

26 (C) morphine;

27 including respiratory depression, sedation, and hypotension.

28 SECTION 6. IC 16-19-13-7 IS ADDED TO THE INDIANA CODE
 29 AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY
 30 1, 2014]: **Sec. 7. (a) Before July 1, 2015, the office or the state**
 31 **department shall conduct a study to do the following:**

32 (1) Determine the extent to which crimes of domestic or sexual
 33 violence are underreported.

34 (2) Identify which crimes of domestic or sexual violence are
 35 more commonly underreported.

36 (3) Investigate differences between the reporting of crimes of
 37 domestic or sexual violence committed:

38 (A) against children;

39 (B) against adults;

40 (C) in urban areas;

41 (D) in suburban areas; and

42 (E) in rural areas.



- 1 **(4) Investigate and identify reasons why the victims of**
 2 **unreported crimes of domestic or sexual violence do not**
 3 **report these crimes, both in general and with reference to**
 4 **specific crimes.**
 5 **(5) Study and evaluate methods for improving the reporting**
 6 **of underreported crimes of domestic or sexual violence.**
 7 **(6) Study and evaluate resources available to educate**
 8 **potential victims of crimes of domestic or sexual violence.**
 9 **(7) Evaluate best practices to connect victims of crimes of**
 10 **domestic or sexual violence with appropriate therapeutic and**
 11 **other resources.**
 12 **(8) Make recommendations concerning best practices to:**
 13 **(A) improve the reporting of underreported crimes of**
 14 **domestic or sexual violence;**
 15 **(B) provide resources for persons who are the victims of**
 16 **crimes of domestic or sexual violence; and**
 17 **(C) make educational, therapeutic, and other resources**
 18 **available to victims of crimes of domestic or sexual**
 19 **violence who may have not reported the crimes.**
 20 **(b) The study described in subsection (a) must include the**
 21 **following:**
 22 **(1) The use of GIS (as defined in IC 25-21.5-1-3.5) mapping to**
 23 **detect patterns of reported and unreported crimes of domestic**
 24 **or sexual violence, and follow-up investigations to study areas**
 25 **with high and low reporting rates.**
 26 **(2) At least two (2) separate surveys to quantify**
 27 **underreporting.**
 28 **(3) One (1) of the surveys described in subdivision (2) must:**
 29 **(A) be conducted by professionals who have expertise in**
 30 **analyzing communication and understanding the social**
 31 **norms and cultural pressures that affect whether the**
 32 **victim of a crime of domestic or sexual violence reports the**
 33 **crime or not; and**
 34 **(B) in order to capture unreported crimes of domestic or**
 35 **sexual violence, focus on surveying individuals (including**
 36 **teachers, coaches, pastors, and other mentors) who may**
 37 **know of unreported crimes of domestic or sexual violence,**
 38 **with the purpose of studying the perspective that these**
 39 **individuals have concerning the reasons the victims did not**
 40 **report the crimes. These surveys shall be conducted**
 41 **anonymously, and, to the extent that the person**
 42 **interviewed had a duty to report the crime and did not**



- 1 report the crime, the survey must determine what factors
2 made the person reluctant to report the crime.
- 3 **(4) The second survey described in subdivision (2) must be**
4 **modeled on studies conducted by the national Centers for**
5 **Disease Control and Prevention's Academic Centers of**
6 **Excellence and involve a survey of persons who were the**
7 **victims of a crime of domestic or sexual violence when they**
8 **were younger, but who did not report the crime until they**
9 **were older. The purpose of this survey is to obtain the victim's**
10 **insight into the reason the victim did not report the crime of**
11 **domestic or sexual violence.**
- 12 **(5) After evaluating the surveys described in subdivision (2),**
13 **researchers performing the study must conduct in depth**
14 **interviews with individuals and focus groups. The interviews**
15 **and focus groups must be conducted in different geographical**
16 **areas of the state, and contain a mix of urban, suburban, and**
17 **rural areas. Persons interviewed must include:**
- 18 **(A) groups or individuals who have reported crimes of**
19 **domestic or sexual violence;**
- 20 **(B) groups or individuals who have not reported crimes of**
21 **domestic or sexual violence; and**
- 22 **(C) teachers and other persons who have insight into**
23 **students' lives and have perspective into the cultural**
24 **dynamics that give rise to the problem of crimes of**
25 **domestic or sexual violence as well as the reasons a person**
26 **may have for not reporting the crime.**
- 27 **The professionals who conduct these interviews must have**
28 **diverse backgrounds and must be skilled at eliciting subtle**
29 **information from the persons they interview.**
- 30 **(6) At the conclusion of the interviews described in**
31 **subdivision (5), the information from the surveys and**
32 **interviews shall be evaluated and assembled by a data analysis**
33 **group that shall draw conclusions and make appropriate**
34 **recommendations.**
- 35 **(c) The office or state department may contract with a third**
36 **party to conduct the study described in this section.**
- 37 **(d) Information contained in a study described in this section**
38 **that identifies or could be used to determine the identity of a child**
39 **or adult participating in the study is confidential. All other**
40 **information contained in the study is not confidential and is**
41 **available for inspection and copying under IC 5-14-3.**
- 42 **(e) The office or state department shall provide a copy of the**



1 study to the legislative council in an electronic format under
2 IC 5-14-6.

3 **(f) This section expires June 30, 2016.**

4 SECTION 7. IC 16-31-2-9, AS AMENDED BY P.L.77-2012,
5 SECTION 18, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
6 UPON PASSAGE]: Sec. 9. The commission shall establish the
7 following:

8 (1) Standards for persons who provide emergency medical
9 services and who are not licensed or regulated under IC 16-31-3.

10 (2) Training standards for the administration of antidotes,
11 vaccines, and antibiotics to prepare for or respond to a terrorist or
12 military attack.

13 (3) Training and certification standards for the administration of
14 epinephrine through an auto-injector by an emergency medical
15 technician.

16 (4) Training standards to permit the use of antidote kits containing
17 atropine and pralidoxime chloride for the treatment of exposure
18 to nerve agents by an emergency medical technician or an
19 emergency medical responder.

20 **(5) Standards for distribution, administration, use, and
21 training in the use of an overdose intervention drug.**

22 SECTION 8. IC 16-31-3-23.5 IS ADDED TO THE INDIANA
23 CODE AS A NEW SECTION TO READ AS FOLLOWS
24 [EFFECTIVE UPON PASSAGE]: Sec. 23.5. **(a) The following may
25 administer an overdose intervention drug to an individual who is
26 suffering from an overdose:**

27 **(1) An advanced emergency medical technician.**

28 **(2) An emergency medical responder.**

29 **(3) An emergency medical technician.**

30 **(4) A firefighter or volunteer firefighter.**

31 **(5) A law enforcement officer.**

32 **(6) A paramedic.**

33 **(b) A health care provider who is licensed in Indiana and whose
34 scope of practice includes the prescribing of medication may write
35 a prescription, drug order, or protocol for an overdose
36 intervention drug for any of the following:**

37 **(1) An advanced emergency medical technician.**

38 **(2) An emergency medical responder.**

39 **(3) An emergency medical technician.**

40 **(4) A fire department or volunteer fire department.**

41 **(5) A law enforcement agency.**

42 **(6) A paramedic.**



1 (c) A pharmacist licensed under IC 25-26 may dispense a valid
2 prescription, drug order, or protocol for an overdose intervention
3 drug issued in the name of any of the following:

- 4 (1) An advanced emergency medical technician.
5 (2) An emergency medical responder.
6 (3) An emergency medical technician.
7 (4) A fire department or volunteer fire department.
8 (5) A law enforcement agency.
9 (6) A paramedic.

10 SECTION 9. IC 16-31-6-2.5 IS ADDED TO THE INDIANA CODE
11 AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE
12 UPON PASSAGE]: Sec. 2.5. (a) Except for an act of gross
13 negligence or willful misconduct, an advanced emergency medical
14 technician, an emergency medical responder, an emergency
15 medical technician, a firefighter or volunteer firefighter, a law
16 enforcement officer, or a paramedic who administers an overdose
17 intervention drug according to standards established by:

- 18 (1) the department or agency that oversees the individual's
19 employment in providing emergency medical services; or
20 (2) the commission under IC 16-31-2-9;

21 to an individual suffering from an overdose is immune from civil
22 liability for acts or omissions when administering the drug.

23 (b) If:

- 24 (1) an advanced emergency medical technician;
25 (2) an emergency medical responder;
26 (3) an emergency medical technician;
27 (4) a firefighter or volunteer firefighter;
28 (5) a law enforcement officer; or
29 (6) a paramedic;

30 is immune from civil liability for the individual's act or omission,
31 a person who has only an agency relationship with the advanced
32 emergency medical technician, emergency medical responder,
33 emergency medical technician, firefighter or volunteer firefighter,
34 law enforcement officer, or paramedic is also immune from civil
35 liability for the act or omission.

36 SECTION 10. IC 34-31-2-2.5 IS ADDED TO THE INDIANA
37 CODE AS A NEW SECTION TO READ AS FOLLOWS
38 [EFFECTIVE UPON PASSAGE]: Sec. 2.5. IC 16-31-6-2.5
39 (Concerning certain persons who administer an overdose
40 intervention drug).

41 SECTION 11. IC 35-38-1-7.1, AS AMENDED BY P.L.126-2012,
42 SECTION 50, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE



1 UPON PASSAGE]: Sec. 7.1. (a) In determining what sentence to
2 impose for a crime, the court may consider the following aggravating
3 circumstances:

4 (1) The harm, injury, loss, or damage suffered by the victim of an
5 offense was:

6 (A) significant; and

7 (B) greater than the elements necessary to prove the
8 commission of the offense.

9 (2) The person has a history of criminal or delinquent behavior.

10 (3) The victim of the offense was less than twelve (12) years of
11 age or at least sixty-five (65) years of age at the time the person
12 committed the offense.

13 (4) The person:

14 (A) committed a crime of violence (IC 35-50-1-2); and

15 (B) knowingly committed the offense in the presence or within
16 hearing of an individual who:

17 (i) was less than eighteen (18) years of age at the time the
18 person committed the offense; and

19 (ii) is not the victim of the offense.

20 (5) The person violated a protective order issued against the
21 person under IC 34-26-5 (or IC 31-1-11.5, IC 34-26-2, or
22 IC 34-4-5.1 before their repeal), a workplace violence restraining
23 order issued against the person under IC 34-26-6, or a no contact
24 order issued against the person.

25 (6) The person has recently violated the conditions of any
26 probation, parole, pardon, community corrections placement, or
27 pretrial release granted to the person.

28 (7) The victim of the offense was:

29 (A) a person with a disability (as defined in IC 27-7-6-12), and
30 the defendant knew or should have known that the victim was
31 a person with a disability; or

32 (B) mentally or physically infirm.

33 (8) The person was in a position having care, custody, or control
34 of the victim of the offense.

35 (9) The injury to or death of the victim of the offense was the
36 result of shaken baby syndrome (as defined in IC 16-41-40-2).

37 (10) The person threatened to harm the victim of the offense or a
38 witness if the victim or witness told anyone about the offense.

39 (11) The person:

40 (A) committed trafficking with an inmate under
41 IC 35-44.1-3-5; and

42 (B) is an employee of the penal facility.



1 (b) The court may consider the following factors as mitigating
 2 circumstances or as favoring suspending the sentence and imposing
 3 probation:

4 (1) The crime neither caused nor threatened serious harm to
 5 persons or property, or the person did not contemplate that it
 6 would do so.

7 (2) The crime was the result of circumstances unlikely to recur.

8 (3) The victim of the crime induced or facilitated the offense.

9 (4) There are substantial grounds tending to excuse or justify the
 10 crime, though failing to establish a defense.

11 (5) The person acted under strong provocation.

12 (6) The person has no history of delinquency or criminal activity,
 13 or the person has led a law-abiding life for a substantial period
 14 before commission of the crime.

15 (7) The person is likely to respond affirmatively to probation or
 16 short term imprisonment.

17 (8) The character and attitudes of the person indicate that the
 18 person is unlikely to commit another crime.

19 (9) The person has made or will make restitution to the victim of
 20 the crime for the injury, damage, or loss sustained.

21 (10) Imprisonment of the person will result in undue hardship to
 22 the person or the dependents of the person.

23 (11) The person was convicted of a crime involving the use of
 24 force against a person who had repeatedly inflicted physical or
 25 sexual abuse upon the convicted person and evidence shows that
 26 the convicted person suffered from the effects of battery as a
 27 result of the past course of conduct of the individual who is the
 28 victim of the crime for which the person was convicted.

29 **(12) The person was convicted of a crime relating to a**
 30 **controlled substance and the person's arrest or prosecution**
 31 **was facilitated in part because the person:**

32 **(A) requested emergency medical assistance; or**

33 **(B) acted in concert with another person who requested**
 34 **emergency medical assistance;**

35 **for an individual who reasonably appeared to be in need of**
 36 **medical assistance due to the use of alcohol or a controlled**
 37 **substance.**

38 (c) The criteria listed in subsections (a) and (b) do not limit the
 39 matters that the court may consider in determining the sentence.

40 (d) A court may impose any sentence that is:

41 (1) authorized by statute; and

42 (2) permissible under the Constitution of the State of Indiana;



1 regardless of the presence or absence of aggravating circumstances or
2 mitigating circumstances.

3 SECTION 12. [EFFECTIVE UPON PASSAGE] (a) **The general**
4 **assembly urges the legislative council to assign to the appropriate**
5 **study committee the task of studying the causes of violence and**
6 **violent crime in Indiana.**

7 (b) **If an appropriate study committee is assigned the topic**
8 **described in subsection (a), the committee shall issue to the**
9 **legislative council a final report containing the committee's**
10 **findings and recommendations, including any recommended**
11 **legislation concerning the topic, in an electronic format under**
12 **IC 5-14-6, not later than November 1, 2014.**

13 (c) **This SECTION expires January 1, 2015.**

14 SECTION 13. **An emergency is declared for this act.**



COMMITTEE REPORT

Madam President: The Senate Committee on Judiciary, to which was referred Senate Bill No. 227, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

Replace the effective dates in SECTIONS 1 through 3 with "[EFFECTIVE UPON PASSAGE]".

Page 2, line 3, after "reported" insert "**what the person reasonably believed to be**".

Page 3, between lines 12 and 13, begin a new paragraph and insert: "SECTION 3. IC 16-18-2-263.9 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 263.9. "Overdose prevention drug", for purposes of IC 16-31, means naloxone or any other drug that:**

(1) is an opioid, opiate, or morphine antagonist; and

(2) prevents or reverses the effects of:

(A) opioids;

(B) opiates; or

(C) morphine;

including respiratory depression, sedation, and hypotension.

SECTION 4. IC 16-31-2-9, AS AMENDED BY P.L.77-2012, SECTION 18, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 9. The commission shall establish the following:

(1) Standards for persons who provide emergency medical services and who are not licensed or regulated under IC 16-31-3.

(2) Training standards for the administration of antidotes, vaccines, and antibiotics to prepare for or respond to a terrorist or military attack.

(3) Training and certification standards for the administration of epinephrine through an auto-injector by an emergency medical technician.

(4) Training standards to permit the use of antidote kits containing atropine and pralidoxime chloride for the treatment of exposure to nerve agents by an emergency medical technician or an emergency medical responder.

(5) Standards for distribution, administration, use, and training in the use of an overdose prevention drug.

SECTION 5. IC 16-31-3-23.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS



[EFFECTIVE UPON PASSAGE]: **Sec. 23.5. An emergency medical responder may administer an overdose prevention drug to an individual who is suffering from an overdose.**

SECTION 6. IC 16-31-6-2.5 IS ADDED TO THE INDIANA CODE AS A **NEW SECTION TO READ AS FOLLOWS** [EFFECTIVE UPON PASSAGE]: **Sec. 2.5. (a) Except for an act of gross negligence or willful misconduct, an emergency medical responder who administers an overdose prevention drug according to standards established by the commission under IC 16-31-2-9 to an individual suffering from an overdose is immune from civil liability for acts or omissions when administering the drug.**

(b) If the emergency medical responder is immune from civil liability for the emergency medical responder's act or omission, a person who has only an agency relationship with the emergency medical responder is also immune from civil liability for the act or omission.

SECTION 7. IC 34-31-2-2.5 IS ADDED TO THE INDIANA CODE AS A **NEW SECTION TO READ AS FOLLOWS** [EFFECTIVE UPON PASSAGE]: **Sec. 2.5. IC 16-31-6-2.5 (Concerning emergency medical responders who administer an overdose prevention drug)."**

Page 5, after line 16, begin a new paragraph and insert:

"SECTION 9. **An emergency is declared for this act.**".

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to SB 227 as introduced.)

STEELE, Chairperson

Committee Vote: Yeas 9, Nays 0.

SENATE MOTION

Madam President: I move that Senate Bill 227 be amended to read as follows:

Page 4, line 4, after "23.5." insert "(a)".

Page 4, line 5, delete "responder" and insert "**responder, a firefighter, or a law enforcement officer who is providing emergency medical services in the course of the individual's employment**".

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Page 4, between lines 6 and 7, begin a new paragraph and insert:

"(b) A health care provider who is licensed in Indiana and whose scope of practice includes the prescribing of medication may write a prescription, drug order, or protocol for an overdose prevention drug for an emergency medical responder, a law enforcement agency, or a fire department.

(c) A pharmacist licensed under IC 25-26 may dispense a valid prescription, drug order, or protocol for an overdose prevention drug issued in the name of any emergency medical responder, a law enforcement agency, or a fire department."

Page 4, line 10, delete "responder" and insert **"responder, a firefighter, or a law enforcement officer"**.

Page 4, line 12, after "by" insert ":

**(1) the department or agency that oversees the individual's employment in providing emergency medical services; or
(2)"**.

Page 4, line 12, delete "IC 16-31-2-9 to" and insert **"IC 16-31-2-9;"**.

Page 4, line 12, beginning with "to" begin a new line blocked left.

Page 4, line 15, delete "responder" and insert **"responder, a firefighter, or a law enforcement officer"**.

Page 4, line 16, delete "emergency medical responder's" and insert **"individual's"**.

Page 4, line 18, delete "responder" and insert **"responder, a firefighter, or a law enforcement officer"**.

Page 4, line 22, delete "emergency" and insert **"certain persons"**.

Page 4, line 23, delete "medical responders".

(Reference is to SB 227 as printed January 24, 2014.)

MERRITT

COMMITTEE REPORT

Mr. Speaker: Your Committee on Courts and Criminal Code, to which was referred Senate Bill 227, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 1, between the enacting clause and line 1, begin a new paragraph and insert:

"SECTION 1. IC 2-5-36-9, AS ADDED BY P.L.119-2013, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE

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JULY 1, 2014]: Sec. 9. The commission shall do the following:

- (1) Study and evaluate the following:
 - (A) Access to services for vulnerable youth.
 - (B) Availability of services for vulnerable youth.
 - (C) Duplication of services for vulnerable youth.
 - (D) Funding of services available for vulnerable youth.
 - (E) Barriers to service for vulnerable youth.
 - (F) Communication and cooperation by agencies concerning vulnerable youth.
 - (G) Implementation of programs or laws concerning vulnerable youth.
 - (H) The consolidation of existing entities that serve vulnerable youth.
 - (I) Data from state agencies relevant to evaluating progress, targeting efforts, and demonstrating outcomes.
 - (J) Crimes of sexual violence against children.**
 - (K) The impact of social networking web sites, cellular telephones and wireless communications devices, digital media, and new technology on crimes against children.**
- (2) Review and make recommendations concerning pending legislation.
- (3) Promote information sharing concerning vulnerable youth across the state.
- (4) Promote best practices, policies, and programs.
- (5) Cooperate with:
 - (A) other child focused commissions;
 - (B) the judicial branch of government;
 - (C) the executive branch of government;
 - (D) stakeholders; and
 - (E) members of the community.
- (6) Submit a report not later than July 1 of each year regarding the commission's work during the previous year. The report shall be submitted to the legislative council, the governor, and the chief justice of Indiana. The report to the legislative council must be in an electronic format under IC 5-14-6."

Page 3, between lines 14 and 15, begin a new paragraph and insert:
 "SECTION 4. IC 16-18-2-88.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: **Sec. 88.5. "Crime of domestic or sexual violence" means a sex offense (as defined in IC 11-8-8-5.2) or a crime of domestic violence (as defined in IC 35-31.5-2-78). The term includes a delinquent act that would be a sex offense or a**



crime of domestic violence if committed by an adult."

Page 3, between lines 25 and 26, begin a new paragraph and insert:

"SECTION 5. IC 16-19-13-7 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: **Sec. 7. (a) Before July 1, 2015, the office or the state department shall conduct a study to do the following:**

(1) Determine the extent to which crimes of domestic or sexual violence are underreported.

(2) Identify which crimes of domestic or sexual violence are more commonly underreported.

(3) Investigate differences between the reporting of crimes of domestic or sexual violence committed:

(A) against children;

(B) against adults;

(C) in urban areas;

(D) in suburban areas; and

(E) in rural areas.

(4) Investigate and identify reasons why the victims of unreported crimes of domestic or sexual violence do not report these crimes, both in general and with reference to specific crimes.

(5) Study and evaluate methods for improving the reporting of underreported crimes of domestic or sexual violence.

(6) Study and evaluate resources available to educate potential victims of crimes of domestic or sexual violence.

(7) Evaluate best practices to connect victims of crimes of domestic or sexual violence with appropriate therapeutic and other resources.

(8) Make recommendations concerning best practices to:

(A) improve the reporting of underreported crimes of domestic or sexual violence;

(B) provide resources for persons who are the victims of crimes of domestic or sexual violence; and

(C) make educational, therapeutic, and other resources available to victims of crimes of domestic or sexual violence who may have not reported the crimes.

(b) The study described in subsection (a) must include the following:

(1) The use of GIS (as defined in IC 25-21.5-1-3.5) mapping to detect patterns of reported and unreported crimes of domestic or sexual violence, and follow-up investigations to study areas with high and low reporting rates.



- (2) At least two (2) separate surveys to quantify underreporting.
- (3) One (1) of the surveys described in subdivision (2) must:
- (A) be conducted by professionals who have expertise in analyzing communication and understanding the social norms and cultural pressures that affect whether the victim of a crime of domestic or sexual violence reports the crime or not; and
 - (B) in order to capture unreported crimes of domestic or sexual violence, focus on surveying individuals (including teachers, coaches, pastors, and other mentors) who may know of unreported crimes of domestic or sexual violence, with the purpose of studying the perspective that these individuals have concerning the reasons the victims did not report the crimes. These surveys shall be conducted anonymously, and, to the extent that the person interviewed had a duty to report the crime and did not report the crime, the survey must determine what factors made the person reluctant to report the crime.
- (4) The second survey described in subdivision (2) must be modeled on studies conducted by the national Centers for Disease Control and Prevention's Academic Centers of Excellence and involve a survey of persons who were the victims of a crime of domestic or sexual violence when they were younger, but who did not report the crime until they were older. The purpose of this survey is to obtain the victim's insight into the reason the victim did not report the crime of domestic or sexual violence.
- (5) After evaluating the surveys described in subdivision (2), researchers performing the study must conduct in depth interviews with individuals and focus groups. The interviews and focus groups must be conducted in different geographical areas of the state, and contain a mix of urban, suburban, and rural areas. Persons interviewed must include:
- (A) groups or individuals who have reported crimes of domestic or sexual violence;
 - (B) groups or individuals who have not reported crimes of domestic or sexual violence; and
 - (C) teachers and other persons who have insight into students' lives and have perspective into the cultural dynamics that give rise to the problem of crimes of domestic or sexual violence as well as the reasons a person



may have for not reporting the crime.

The professionals who conduct these interviews must have diverse backgrounds and must be skilled at eliciting subtle information from the persons they interview.

(6) At the conclusion of the interviews described in subdivision (5), the information from the surveys and interviews shall be evaluated and assembled by a data analysis group that shall draw conclusions and make appropriate recommendations.

(c) The office or state department may contract with a third party to conduct the study described in this section.

(d) Information contained in a study described in this section that identifies or could be used to determine the identity of a child or adult participating in the study is confidential. All other information contained in the study is not confidential and is available for inspection and copying under IC 5-14-3.

(e) The office or state department shall provide a copy of the study to the legislative council in an electronic format under IC 5-14-6.

(f) This section expires June 30, 2016."

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to SB 227 as reprinted January 28, 2014.)

MCMILLIN, Chair

Committee Vote: yeas 12, nays 0.

HOUSE MOTION

Mr. Speaker: I move that Engrossed Senate Bill 227 be amended to read as follows:

Page 4, line 19, delete "prevention" and insert "**intervention**".

Page 7, line 21, delete "prevention" and insert "**intervention**".

Page 7, line 24, delete "An emergency" and insert "**The following may administer an overdose intervention drug to an individual who is suffering from an overdose:**

- (1) An advanced emergency medical technician.
- (2) An emergency medical responder.
- (3) An emergency medical technician.
- (4) A firefighter or volunteer firefighter.

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(5) A law enforcement officer.

(6) A paramedic.

(b) A health care provider who is licensed in Indiana and whose scope of practice includes the prescribing of medication may write a prescription, drug order, or protocol for an overdose intervention drug for any of the following:

(1) An advanced emergency medical technician.

(2) An emergency medical responder.

(3) An emergency medical technician.

(4) A fire department or volunteer fire department.

(5) A law enforcement agency.

(6) A paramedic.

(c) A pharmacist licensed under IC 25-26 may dispense a valid prescription, drug order, or protocol for an overdose intervention drug issued in the name of any of the following:

(1) An advanced emergency medical technician.

(2) An emergency medical responder.

(3) An emergency medical technician.

(4) A fire department or volunteer fire department.

(5) A law enforcement agency.

(6) A paramedic."

Page 7, delete lines 25 through 37.

Page 7, line 41, delete "emergency medical responder," and insert "advanced emergency medical technician, an emergency medical responder, an emergency medical technician, a firefighter or volunteer firefighter, a law enforcement officer, or a paramedic who administers an overdose intervention drug according to standards established by:".

Page 7, delete line 42.

Page 8, delete line 1.

Page 8, delete lines 7 through 12, begin a new paragraph and insert:

"(b) If:

(1) an advanced emergency medical technician;

(2) an emergency medical responder;

(3) an emergency medical technician;

(4) a firefighter or volunteer firefighter;

(5) a law enforcement officer; or

(6) a paramedic;

is immune from civil liability for the individual's act or omission, a person who has only an agency relationship with the advanced emergency medical technician, emergency medical responder, emergency medical technician, firefighter or volunteer firefighter,



law enforcement officer, or paramedic is also immune from civil liability for the act or omission."

Page 8, line 17, delete "prevention" and insert "**intervention**".

(Reference is to ESB 227 as printed February 14, 2014.)

MCMILLIN

HOUSE MOTION

Mr. Speaker: I move that Engrossed Senate Bill 227 be amended to read as follows:

Page 10, between lines 21 and 22, begin a new paragraph and insert:

"SECTION 12. [EFFECTIVE UPON PASSAGE] (a) The general assembly urges the legislative council to assign to the appropriate study committee the task of studying the causes of violence and violent crime in Indiana.

(b) If an appropriate study committee is assigned the topic described in subsection (a), the committee shall issue to the legislative council a final report containing the committee's findings and recommendations, including any recommended legislation concerning the topic, in an electronic format under IC 5-14-6, not later than November 1, 2014.

(c) This SECTION expires January 1, 2015."

Renumber all SECTIONS consecutively.

(Reference is to ESB 227 as printed February 14, 2014.)

BARTLETT

