

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 253 Session of 2021

INTRODUCED BY OWLETT, TOOHL, PICKETT, BOBACK, HILL-EVANS, HOHENSTEIN, RYAN, STEPHENS, KAUFFMAN, ROTHMAN, SCHLOSSBERG, R. BROWN, CIRESI, PASHINSKI, STRUZZI, WARREN, GLEIM, COX, MIZGORSKI AND GUZMAN, JANUARY 26, 2021

AS AMENDED ON SECOND CONSIDERATION, HOUSE OF REPRESENTATIVES, MAY 26, 2021

AN ACT

1 Establishing a task force on the opioid abuse epidemic's impact
2 on children and providing for powers and duties of the task
3 force.

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

6 Section 1. Short title.

7 This act shall be known and may be cited as the Opioid Abuse
8 Child Impact Task Force Act.

9 Section 2. Declaration of policy.

10 The General Assembly finds and declares as follows:

11 (1) This Commonwealth is one of the states which has
12 been hardest hit by an epidemic of heroin and prescription
13 opioid abuse and addiction that is plaguing American society.

14 (2) One of the more tragic consequences of this epidemic
15 is the devastating impact it has had and continues to have on
16 infants and children.

17 (3) Newborns are suffering through withdrawal from

1 opioids because of prenatal exposure to these drugs.

2 (4) Fatalities and near fatalities of infants and young
3 children have been linked to parental substance abuse.

4 (5) Cases of child abuse and neglect linked to parental
5 substance abuse are increasing, as are the number of children
6 being removed from their homes and placed in protective
7 custody because of their parents' drug addiction.

8 (6) The Commonwealth has a responsibility to protect its
9 residents, especially children.

10 Section 3. Definitions.

11 The following words and phrases when used in this act shall
12 have the meanings given to them in this section unless the
13 context clearly indicates otherwise:

14 "Task force." The task force established in section 4.

15 Section 4. Establishment.

16 A task force on the opioid abuse epidemic's impact on
17 children is established. The task force shall focus on improving
18 the safety, well-being and permanency of substance-exposed
19 infants and other young children affected by their parents'
20 substance abuse disorders.

21 Section 5. Responsibilities.

22 The task force is responsible for:

23 (1) Identifying strategies and making short-term and
24 long-term recommendations to prioritize the prevention of
25 substance-exposed infants.

26 (2) Improving outcomes for pregnant and parenting women
27 who are striving to recover from addiction.

28 (3) Promoting the health, safety and permanency of
29 substance-exposed infants and other young children at risk of
30 child abuse and neglect or placement in foster care due to

1 parental alcohol and drug use.

2 (4) Ensuring that the Commonwealth is compliant with the
3 Child Abuse Prevention and Treatment Act (Public Law 93-247,
4 42 U.S.C. § 5101 et seq.) related to identifying substance-
5 exposed infants and is developing multidisciplinary plans of
6 safe care for these infants.

7 Section 6. Members and meetings.

8 (a) Members.--The task force is comprised of the following
9 members:

10 (1) The Secretary of Human Services or a designee who
11 shall be an employee of the Department of Human Services. The
12 designee shall be appointed by the Secretary of Human
13 Services in writing, and a copy of the appointment shall be
14 submitted to the chairperson of the task force.

15 (2) The Secretary of Health or a designee who shall be
16 an employee of the Department of Health. The designee shall
17 be appointed by the Secretary of Health in writing, and a
18 copy of the appointment shall be submitted to the chairperson
19 of the task force.

20 (3) The Secretary of Drug and Alcohol Programs or a
21 designee who shall be an employee of the Department of Drug
22 and Alcohol Programs. The designee shall be appointed by the
23 Secretary of Drug and Alcohol Programs in writing, and a copy
24 of the appointment shall be submitted to the chairperson of
25 the task force.

26 ~~(4) Three members appointed by the President pro tempore <--~~
27 ~~of the Senate, in consultation with the Majority Leader and~~
28 ~~the Minority Leader of the Senate. One member under this~~
29 ~~paragraph may be a member of the Senate.~~

30 ~~(5) Three members appointed by the Speaker of the House~~

1 ~~of Representatives, in consultation with the Majority Leader~~
2 ~~and the Minority Leader of the House of Representatives. One~~
3 ~~member under this paragraph may be a member of the House of~~
4 ~~Representatives.~~

5 (4) THREE MEMBERS APPOINTED BY THE SENATE, AS FOLLOWS: <--

6 (I) TWO MEMBERS APPOINTED BY THE PRESIDENT PRO
7 TEMPORE OF THE SENATE, ONE OF WHOM SHALL BE A LAYPERSON
8 WHO IS A BIOLOGICAL PARENT, FOSTER PARENT OR ADOPTIVE
9 PARENT OF AN INFANT OR YOUNG CHILD WITH CURRENT OR
10 PREVIOUS INVOLVEMENT IN THE CHILD WELFARE SYSTEM AS A
11 RESULT OF A PARENT'S SUBSTANCE ABUSE; AND

12 (II) ONE MEMBER APPOINTED BY THE MINORITY LEADER OF
13 THE SENATE.

14 (5) THREE MEMBERS APPOINTED BY THE HOUSE OF
15 REPRESENTATIVES, AS FOLLOWS:

16 (I) TWO MEMBERS APPOINTED BY THE SPEAKER OF THE
17 HOUSE OF REPRESENTATIVES, ONE OF WHOM SHALL BE A
18 LAYPERSON WHO IS A BIOLOGICAL PARENT, FOSTER PARENT OR
19 ADOPTIVE PARENT OF AN INFANT OR YOUNG CHILD WITH CURRENT
20 OR PREVIOUS INVOLVEMENT IN THE CHILD WELFARE SYSTEM AS A
21 RESULT OF A PARENT'S SUBSTANCE ABUSE; AND

22 (II) ONE MEMBER APPOINTED BY THE MINORITY LEADER OF
23 THE HOUSE OF REPRESENTATIVES.

24 (6) ~~Four~~ TWO members appointed by the Governor. <--

25 (b) Qualifications.--~~Individuals~~ EXCEPT FOR LAYPERSONS <--
26 APPOINTED UNDER PARAGRAPHS (4) (I) AND (5) (I), INDIVIDUALS
27 appointed under subsection (a) (4), (5) or (6) must possess
28 professional experience and expertise in:

29 (1) obstetric medicine;

30 (2) pediatric medicine;

- 1 (3) behavioral health treatment;
- 2 (4) early intervention programs;
- 3 (5) county children and youth agency services;
- 4 (6) child advocacy; or
- 5 (7) neonatal intensive care unit nursing.

6 (c) Chairperson.--The Governor shall select the chairperson
7 of the task force.

8 (d) Appointment.--The members of the task force shall be
9 appointed within 25 days after the effective date of this
10 section.

11 (e) Quorum.--The physical presence of seven members
12 constitutes a quorum of the task force.

13 (f) Majority vote.--An action of the task force shall be
14 authorized or ratified by a majority vote of its members.

15 (g) Meetings.--

16 (1) The task force shall meet as necessary but no fewer
17 than five times during the period ending two months prior to
18 the issuance date of the report. The first meeting shall be
19 convened within 45 days following the effective date of this
20 section.

21 (2) Additional meetings may be called by the chairperson
22 as necessary.

23 (3) The chairperson shall schedule a meeting upon
24 written request of eight members of the task force.

25 (4) A member not physically present may participate by
26 teleconference or video conference.

27 (h) Compensation.--Members of the task force shall not
28 receive compensation but shall be reimbursed for reasonable and
29 necessary expenses incurred in service of the task force.

30 Section 7. Duties.

1 The task force has the following duties:

2 (1) To examine and analyze the existing practices,
3 processes, procedures and laws relating to the diagnosis and
4 treatment of substance-exposed infants.

5 (2) To review and analyze the existing practices,
6 processes, procedures and laws relating to the safety, well-
7 being, permanency and placement of children at risk due to
8 their parents' substance abuse disorders.

9 (3) To hold public hearings for the taking of testimony
10 and the requesting of documents.

11 (4) To make relevant recommendations for improving the
12 safety, well-being and permanency of substance-exposed
13 infants and other children adversely affected by their
14 parents' substance abuse disorders.

15 (5) To issue a report in accordance with section 10.
16 Section 8. Hearings.

17 The task force shall hold public hearings as necessary to
18 obtain the information required to conduct its review.

19 Section 9. Agency cooperation.

20 The Department of Human Services, the Department of Health
21 and the Joint State Government Commission shall cooperate to
22 provide administrative or other assistance to the task force.

23 Section 10. Reports.

24 (a) General rule.--The task force shall prepare and submit,
25 two months prior to the expiration date of this act, a final
26 report on its activities, findings and recommendations to the
27 Governor, the Senate and the House of Representatives. The task
28 force may file status reports and updates with the Governor, the
29 Senate and the House of Representatives as it deems appropriate.

30 (b) Adoption of report.--A report under this section shall

1 be adopted at a public meeting.

2 (c) Public record.--A report under this section shall be
3 available to the public.

4 Section 11. Expiration.

5 This act expires 12 months after the effective date of this
6 act.

7 Section 12. Effective date.

8 This act shall take effect immediately.