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HOUSE BILL NO. 1329

AMENDMENT IN THE NATURE OF A SUBSTITUTE

(Proposed by the House Committee on Health, Welfare and Institutions
on February 10, 2022)

(Patron Prior to Substitute—Delegate Delaney)

A BILL to amend and reenact §§ 32.1-162.15:2, as it shall become effective, 32.1-162.15:5, and 32.1-162.15:11 of the Code of Virginia, relating to pediatric sexual assault survivors; Task Force on Services for Survivors of Sexual Assault.

Be it enacted by the General Assembly of Virginia:

1. That §§ 32.1-162.15:2, as it shall become effective, 32.1-162.15:5, and 32.1-162.15:11 of the Code of Virginia are amended and reenacted as follows:

§ 32.1-162.15:2. (Effective July 1, 2023) Definitions.

"Anonymous physical evidence recovery kit" has the same meaning as in § 19.2-11.5.

"Approved pediatric health care facility" means a pediatric health care facility for which a plan for the delivery of services to pediatric survivors of sexual assault has been approved pursuant to § 32.1-162.15:6.

"Board" means the Board of Health.

"Department" means the Department of Health.

"Emergency contraception" means medication approved by the U.S. Food and Drug Administration that can significantly reduce the risk of pregnancy if taken within 72 hours after sexual assault.

"Follow-up health care" means any physical examination, laboratory tests to determine the presence of sexually transmitted infection, or appropriate medications, including HIV-prophylaxis, provided to a survivor of sexual assault by a health care provider within 90 days after the date on which treatment or transfer services pursuant to this article are first provided.

"Forensic medical examination" means health care services provided to a survivor of sexual assault that include medical history, physical examination, laboratory testing, assessment for drug-facilitated or alcohol-facilitated sexual assault, collection of evidence in accordance with the requirements of Chapter 1.2 (§ 19.2-11.5 et seq.) of Title 19.2, and discharge and follow-up health care planning necessary to ensure the health, safety, and welfare of the survivor of sexual assault and the collection and preservation of evidence that may be used in a criminal proceeding.

"Hospital" means any hospital licensed by the Department pursuant to this chapter.

"Pediatric health care facility" means a hospital, clinic, or physician's office that provides health care services to pediatric patients.

"Pediatric survivor of sexual assault" means a survivor of sexual assault who is under 18 years of age.

"Physical evidence recovery kit" has the same meaning as in § 19.2-11.5.

"Sexual assault forensic examiner" means a sexual assault nurse examiner, physician, physician assistant, nurse practitioner, or registered nurse who has completed training that meets or is substantially similar to the Sexual Assault Nurse Examiner Education Guidelines established by the International Association of Forensic Nurses.

"Sexual assault survivor transfer services" means an appropriate medical examination and such stabilizing treatment as may be necessary prior to the transfer of a sexual assault survivor from a transfer hospital to a treatment hospital in accordance with the provisions of a transfer plan approved by the Department.

"Sexual assault survivor treatment services" means a forensic medical examination and other health care services provided to a sexual assault survivor by a hospital in accordance with § 32.1-162.15:4 or pediatric health care facility in accordance with § 32.1-162.15:6.

"Transfer hospital" means a hospital with a sexual assault survivor transfer plan approved by the Department.

"Transportation service" means transportation provided to a survivor of sexual assault who is transferred from a transfer hospital, treatment hospital, or approved pediatric health care facility to a treatment hospital or approved pediatric care facility pursuant to a transfer plan approved in accordance with this article.

"Treatment hospital" means a hospital with a sexual assault survivor treatment plan approved by the Department to provide sexual assault survivor treatment services to all survivors of sexual assault who present with a complaint of sexual assault within the previous seven days or who have disclosed past sexual assault by a specific individual and were in the care of that individual within the previous seven days.

§ 32.1-162.15:5. Transfer services.

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60 The Board shall adopt regulations to establish standards for review and approval of sexual assault
61 survivor transfer plans and pediatric sexual assault survivor transfer plans, which shall include provisions
62 for the following services, when ordered by a health care provider and with the consent of the survivor
63 of sexual assault:

64 1. Appropriate medical examination and such stabilizing treatment as may be necessary prior to the
65 transfer of a survivor of sexual assault from the transfer hospital to a treatment hospital *or clinic that*
66 *provides treatment services for survivors of sexual assault that are comparable to those described in*
67 *§ 32.1-162.15:4;*

68 2. Medically and factually accurate written and oral information about emergency contraception, the
69 indications and contraindications and potential risks associated with the use of emergency contraception,
70 and the availability of emergency contraception for survivors of sexual assault; and

71 3. Prompt transfer of the survivor of sexual assault to a treatment hospital ~~or~~, approved pediatric
72 health care facility, *or clinic that provides treatment services for survivors of sexual assault that are*
73 *comparable to those described in § 32.1-162.15:4*, as may be appropriate, including provisions necessary
74 to ensure that transfer of the survivor of sexual assault or pediatric survivor of sexual assault would not
75 unduly burden the survivor of sexual assault or pediatric survivor of sexual assault.

76 **§ 32.1-162.15:11. Task Force on Services for Survivors of Sexual Assault.**

77 A. There is hereby created the Task Force on Services for Survivors of Sexual Assault (the Task
78 Force), which shall consist of (i) two members of the House of Delegates appointed by the Speaker of
79 the House of Delegates; (ii) one member of the Senate appointed by the Senate Committee on Rules;
80 (iii) the Attorney General, or his designee; (iv) the Commissioners of Health and Social Services, or
81 their designees; (v) the Director of the Department of State Police; (vi) two representatives of hospitals
82 licensed by the Department of Health appointed by the Governor; (vii) three physicians licensed by the
83 Board of Medicine to practice medicine or osteopathy appointed by the Governor, each of whom is a
84 practitioner of emergency medicine and at least one of whom is a pediatrician; (viii) three nurses
85 licensed to practice in the Commonwealth appointed by the Governor, each of whom is a sexual assault
86 nurse examiner; (ix) two representatives of organizations providing advocacy on behalf of survivors of
87 sexual assault appointed by the Governor; ~~and~~ (x) one representative of an organization providing
88 advocacy on behalf of children appointed by the Governor; *and (xi) one representative of a forensic*
89 *clinic appointed by the Governor.* The Commissioner of Health or his designee shall serve as chairman
90 of the Task Force. Staff support for the Task Force shall be provided by the Department of Health.

91 B. The Task Force shall:

92 1. Develop model treatment and transfer plans for use by transfer hospitals, treatment hospitals, and
93 pediatric health care facilities and work with hospitals and pediatric health care facilities to facilitate the
94 development of treatment and transfer plans in accordance with the requirements of this article;

95 2. Develop model written transfer agreements for use by treatment hospitals, transfer hospitals, and
96 pediatric health care facilities and work with treatment hospitals, transfer hospitals, and pediatric health
97 care facilities to facilitate the development of transfer agreements in accordance with the requirements of
98 this article;

99 3. Develop model written agreements for use by treatment hospitals and approved pediatric health
100 care facilities required to enter into agreements with rape crisis centers pursuant to subsection D of
101 § 32.1-162.15:4;

102 4. Work with treatment hospitals and approved pediatric health care facilities to develop plans to
103 employ or contract with sexual assault forensic examiners to ensure the provision of treatment services
104 to survivors of sexual assault by sexual assault forensic examiners, including plans for implementation
105 of on-call systems to ensure availability of sexual assault forensic examiners;

106 5. Work with treatment hospitals and approved pediatric health care facilities to identify and
107 recommend processes to ensure compliance with the provisions of this article related to creation, storage,
108 and retention of photographic and other documentation and evidence;

109 6. Develop and distribute educational materials regarding implementation of the provisions of this
110 article to hospitals, health care providers, rape crisis centers, children's advocacy centers, and others;

111 7. Study and provide recommendations to the Department for the use of telemedicine in meeting the
112 requirements of this article; and

113 8. Report to the Governor and the General Assembly by December 1 of each year regarding its
114 activities and the status of implementation of the provisions of this article.