

SECOND REGULAR SESSION

# HOUSE BILL NO. 1420

## 93RD GENERAL ASSEMBLY

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INTRODUCED BY REPRESENTATIVES WALSH (Sponsor), MEINERS, FRASER, GEORGE, SALVA, LOWE (44), YOUNG, BURNETT, WILDBERGER, CHAPPELLE-NADAL, OXFORD, WRIGHT-JONES, YAEGER, DARROUGH, WHORTON AND JOLLY (Co-sponsors).

Read 1st time January 18, 2006 and copies ordered printed.

STEPHEN S. DAVIS, Chief Clerk

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### AN ACT

To repeal sections 630.165 and 630.410, RSMo, and to enact in lieu thereof three new sections relating to mental health facilities, with penalty provisions.

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*Be it enacted by the General Assembly of the state of Missouri, as follows:*

Section A. Sections 630.165 and 630.410, RSMo, are repealed and three new sections  
2 enacted in lieu thereof, to be known as sections 630.165, 630.410, and 630.555, to read as  
3 follows:

630.165. 1. When any physician, dentist, chiropractor, optometrist, podiatrist, intern,  
2 nurse, medical examiner, social worker, psychologist, minister, Christian Science practitioner,  
3 peace officer, pharmacist, physical therapist, facility administrator, nurse's aide [or], orderly, **or**  
4 **any other direct care staff** in a residential facility, day program, **including privately funded,**  
5 or specialized service operated, funded or licensed by the department or in a mental health  
6 facility or mental health program in which people may be admitted on a voluntary basis or are  
7 civilly detained pursuant to chapter 632, RSMo, or employee of the department, **or of the**  
8 **private facility**, has reasonable cause to believe that a patient, resident or client of a facility,  
9 program or service has been abused or neglected, he or she shall immediately report or cause a  
10 report to be made to the department or the department of health and senior services, if such  
11 facility or program is licensed pursuant to chapter 197, RSMo.

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

12           2. The report shall contain the name and address of the residential facility, day program  
13 or specialized service; the name of the patient, resident or client; information regarding the  
14 nature of the abuse or neglect; the name of the complainant, and any other information which  
15 might be helpful in an investigation.

16           3. Any person required in subsection 1 of this section to report or cause a report to be  
17 made to the department who fails to do so within a reasonable time after the act of abuse or  
18 neglect is guilty of an infraction.

19           4. In addition to those persons required to report under subsection 1 of this section, any  
20 other person having reasonable cause to believe that a resident has been abused or neglected may  
21 report such information to the department.

22           5. Any person who knowingly files a false report of abuse or neglect is guilty of a class  
23 A misdemeanor.

24           6. Any person having a prior conviction of filing false reports and who subsequently files  
25 a false report of abuse or neglect pursuant to this section or section 565.188, RSMo, is guilty of  
26 a class D felony.

          630.410. **1.** The department shall evaluate any proposed contract to determine whether  
2 it meets the following criteria:

3           (1) Conformance with the conditions and priorities of the regional and state division  
4 plans;

5           (2) Compliance with department rules and regulations.

6           **2. The department shall terminate a contract with a vendor having a pattern or**  
7 **practice of abuse and neglect of patients, residents, or clients or misappropriation of client**  
8 **funds or property.**

**630.555. Prior to closure or downsizing of any state facility operated by the**  
2 **department of mental health, the director of the department shall submit a cost-benefit**  
3 **analysis of and written plan for the closure or downsizing of the facility to the senate and**  
4 **the house appropriations committees on mental health for their consideration.**

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