

SUBJECT: Religious counselor visitation in health care facilities in certain disasters

COMMITTEE: Public Health — committee substitute recommended

VOTE: 10 ayes — Klick, Guerra, Allison, Campos, Collier, Jetton, Oliverson,  
Price, Smith, Zwiener

0 nays

1 absent — Coleman

SENATE VOTE: On final passage, April 19 — 31-0, on Local and Uncontested Calendar

WITNESSES: For — Jennifer Allmon, The Texas Catholic Conference of Bishops;  
(*Registered, but did not testify*: Joshua Massingill, LeadingAge Texas;  
Thomas Parkinson)

Against — None

BACKGROUND: Health and Safety Code sec. 81.003 defines "public health disaster" as:

- a state of disaster declared by the governor; and
- a determination by the commissioner of the Department of State Health Services that there is an immediate threat from a communicable disease that poses a high risk of death or serious long-term disability and creates a substantial risk of public exposure.

DIGEST: CSSB 572 would prohibit a health care facility from barring a resident or facility patient from receiving in-person visitation with a religious counselor on the patient's or resident's request during a public health emergency.

The bill would define a "health care facility" as a licensed home and community support services agency, hospital, nursing facility, assisted living facility, or special care facility. The term also would include a

regulated continuing care facility.

"Religious counselor" would mean an individual acting substantially in a pastoral or religious capacity to provide spiritual counsel to other individuals.

"Public health emergency" would mean a declared state of disaster or local disaster, or a public health disaster.

During a public health emergency, the bill would allow a health care facility to prohibit in-person visitation with a religious counselor if federal law or a federal agency required the facility to prohibit in-person visitation.

As soon as practicable after the bill's effective date, the executive commissioner of the Health and Human Services Commission by rule would have to create guidelines to assist health care facilities in establishing in-person religious counselor visitation policies and procedures. The guidelines would have to:

- establish minimum health and safety requirements for in-person visitation with religious counselors;
- allow health care facilities to adopt reasonable time, place, and manner restrictions on in-person visitation with religious counselors to mitigate the spread of a communicable disease and address the patient's or resident's medical condition; and
- provide special consideration to patients and residents who were receiving end-of-life care.

The bill would take immediate effect if finally passed by a two-thirds record vote of the membership of each house. Otherwise, it would take effect September 1, 2021.

SUPPORTERS  
SAY:

CSSB 572 would ensure patients and residents of health care facilities had access to spiritual counseling during a public health emergency. Access to

spiritual support is important for ailing patients and residents, especially in end-of-life circumstances.

During the COVID-19 pandemic, visitation restrictions were difficult for patients and residents in health care facilities. Many patients lacked connection and physical touch from loved ones for several months, and as a result of these restrictions, some patients died alone. By permitting in-person religious counselor visitation during a public health emergency, CSSB 572 would enable patients and residents seeking spiritual counseling to be comforted during illness or end-of-life care.

The bill also would require the guidelines for religious counselor in-person visitation to allow health care facilities to adopt reasonable restrictions that accommodate both infection control protocols and a patient's or resident's request for religious counselor visitation. This would create flexibility for health care facilities' response to future public health emergencies while allowing patients and residents to receive the spiritual counseling they seek.

CRITICS  
SAY:

No concerns identified.