

BILL ANALYSIS

Senate Research Center

H.B. 1798
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Health & Human Services
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Engrossed

DIGEST

The number of abductions and attempted abductions of infants from hospitals in Texas is increasing. Other states have responded to this problem by ensuring that hospitals have in place precautionary policy and procedures regarding infant patient identification and safety. According to the National Center for Missing and Exploited Children, hospital measures such as architectural barriers which limit public access to infant care units, video monitoring of such areas, and stringent identification of staff and visitors in areas of infant care decrease the likelihood of abductions. The problem of missing infants is further compounded by the difficulty in identifying a very young child, thought to be abducted. Texas children's advocacy centers believe that hospital policy and procedures can be established that will aid in the identification of allegedly missing infants who are recovered, including the maintenance of records and copies of infant foot prints, photographs taken at birth or admission, and the obtaining and retaining of cord blood samples for genetic testing. H.B. 1798 requires the Texas Department of Health to recommend hospital security procedures to reduce the likelihood of infant patient abduction and aid in the identification of missing infants, and requires each hospital licensed under Chapter 241 of the Health and Safety Code to consider implementing the procedures.

PURPOSE

As proposed, H.B. 1798 sets forth recommendations for hospitals relating to missing infants.

RULEMAKING AUTHORITY

This bill does not grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Chapter 241B, Health and Safety Code, by adding Section 241.0263, as follows:

Sec. 241.0263. RECOMMENDATIONS RELATING TO MISSING INFANTS. Sets forth the terms by which the Texas Department of Health is required to recommend hospital security procedures to reduce the likelihood of infant patient abduction and aid in the identification of missing infants, and in making recommendations, to consider hospital size and location and the number of births at a hospital. Requires each hospital licensed under this chapter to consider implementing the procedures recommended under this section.

SECTION 2. Effective date: September 1, 1997.

SECTION 3. Emergency clause.