

BILL ANALYSIS

S.B. 1191
By: Davis
Public Health
Committee Report (Unamended)

BACKGROUND AND PURPOSE

According to a federal agency, the vast majority of rapes and other sexual assaults go unreported. While this is due to a variety of factors, one potential barrier is limited access to health care facilities that are capable of collecting evidence from and treating sexual assault survivors. S.B. 1191 seeks to address this issue.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

S.B. 1191 amends the Health and Safety Code to require a health care facility that is not a health care facility designated in a community-wide plan as the primary health care facility in the community for treating sexual assault survivors to inform a sexual assault survivor that the facility is not the community's designated facility, to provide to the survivor the name and location of the designated facility, and to inform the survivor that the survivor is entitled, at the survivor's option, to receive the care required to be provided to the survivor at the current facility or to be stabilized and transferred to and receive such care at the community's designated facility. The bill requires a facility to stabilize and transfer a sexual assault survivor to the community's designated facility only if the survivor chooses to be transferred and provides written signed consent to be transferred.

S.B. 1191 prohibits a person from performing a forensic examination on a sexual assault survivor unless the person has the basic sexual assault forensic evidence collection training under the bill's provisions or the equivalent education and training. The bill specifies that provisions regarding the minimum standards for emergency services provided to survivors of sexual assault do not affect the duty of a health care facility to comply with the requirements of the federal Emergency Medical Treatment and Active Labor Act of 1986 that are applicable to the facility.

S.B. 1191 requires each health care facility that has an emergency department to comply with statutory provisions relating to minimum standards for emergency services provided to survivors of sexual assault and makes a requirement that a health care facility submit a plan for providing those services to the Department of State Health Services (DSHS) for approval applicable only to a health care facility that has an emergency department.

S.B. 1191 requires a person who performs a forensic examination on a sexual assault survivor to have at least basic forensic evidence collection training or equivalent education and specifies that a person who completes a continuing medical or nursing education course in forensic evidence collection that is approved or recognized by the appropriate licensing board is considered to have basic sexual assault forensic evidence training for the purposes of the bill's provisions. The bill requires each health care facility that has an emergency department and that is not a health care facility designated in a community-wide plan as the primary health care facility in the

community for treating sexual assault survivors to develop a plan to train personnel on sexual assault forensic evidence collection.

S.B. 1191 establishes that statutory provisions relating to emergency services for survivors of sexual assault do not affect participating entities of children's advocacy centers under statutory provisions relating to children's advocacy centers or the working protocols set forth by their multidisciplinary teams to ensure access to specialized medical assessments for sexual assault survivors who are minors and that those provisions control to the extent of a conflict with statutory provisions relating to emergency services for sexual assault survivors. The bill requires DSHS to post on its Internet website a list of all hospitals that are designated in a community-wide plan as the primary health care facility in the community for treating sexual assault survivors.

EFFECTIVE DATE

September 1, 2013.