

HOUSE BILL REPORT

SSB 5391

As Reported By House Committee On:
Human Services

Title: An act relating to infants exposed to drugs.

Brief Description: Providing a program to assess and monitor infants exposed to drugs.

Sponsors: Senate Committee on Health & Human Services
(originally sponsored by Senators L. Smith, Talmadge, McCaslin, Deccio, Erwin, Moyer, Oke and Winsley).

Brief History:

Reported by House Committee on:
Human Services, April 1, 1993, DPA.

HOUSE COMMITTEE ON HUMAN SERVICES

Majority Report: Do pass as amended. Signed by 10 members: Representatives Leonard, Chair; Riley, Vice Chair; Cooke, Ranking Minority Member; Talcott, Assistant Ranking Minority Member; Brown; Karahalios; Lisk; Padden; Patterson; and Thibaudeau.

Staff: David Knutson (786-7146).

Background: Growing medical evidence suggests that prenatal drug exposure may result in medical and developmental disabilities after birth. Drug-affected infants are often born prematurely, have low birth weights and significant medical problems. The long-term effects of drug exposure may lead to learning disabilities, hyperactivity, articulation and socialization problems, including anti-social behavior.

Medical researchers agree that early medical interventions can help reduce the long-term medical and developmental impacts on the child resulting from prenatal drug exposure. There are currently no standards for the assessment of infant drug exposure.

Summary of Amended Bill: The University of Washington shall develop model standards to conduct infant drug exposure assessments and fetal alcohol syndrome (FAS) assessments. The university shall mail the standards to all hospitals within the state which may use them to screen newborn

infants. Hospitals may perform the assessments on infants born at the facility. The purpose of assessment is to identify the need for immediate and post-discharge services for the child and mother. The results of a hospital drug exposure assessment may not be used in any criminal proceeding against the mother.

The Department of Social and Health Services (DSHS) and the Department of Health (DOH) are to coordinate efforts to assure: (1) maximum delivery of the services they offer to chemically dependent pregnant women, mothers, and infants; (2) identification and utilization of community-based services; (3) promotion and preservation of bonding between mother and infant by offering services jointly to mother and infant; and (4) early identification of possible long-term developmental disabilities.

DOH may provide health care providers with educational materials on the effects of substance abuse by pregnant women.

Amended Bill Compared to Substitute Bill: The \$45,000 appropriation to the University of Washington is removed, and the university will prepare the screening protocols within available resources.

Fiscal Note: Available.

Effective Date of Amended Bill: Ninety days after adjournment of session in which bill is passed.

Testimony For: Infant screening for drug exposure and fetal alcohol syndrome will benefit parents and children.

Testimony Against: None.

Witnesses: Beverly Jacobson, Seattle Area Hospital Council.