

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 1959 Session of
1999

INTRODUCED BY ORIE, FRANKEL, LEDERER, DALEY, COY, BELARDI,
LUCYK, BEBKO-JONES, VAN HORNE, WALKO, WOJNAROSKI, ARGALL,
CLARK, KENNEY, STABACK, HENNESSEY, CORNELL, E. Z. TAYLOR,
LAUGHLIN, TRAVAGLIO, CORRIGAN, PISTELLA, M. COHEN, GEIST,
BELFANTI, STEELMAN, BROWNE, CURRY, RAMOS, MELIO, HORSEY,
TRELLO, CARN, WILLIAMS, YOUNGBLOOD, YUDICHAK, THOMAS AND
J. TAYLOR, OCTOBER 12, 1999

REFERRED TO COMMITTEE ON HEALTH AND HUMAN SERVICES,
OCTOBER 12, 1999

AN ACT

1 Amending the act of December 3, 1998 (P.L.925, No.115), entitled
2 "An act providing for screening of patients for symptoms of
3 domestic violence; establishing the Domestic Violence Health
4 Care Response Program in the Department of Public Welfare;
5 and providing for domestic violence medical advocacy projects
6 to assist in implementation of domestic violence policies,
7 procedures, health care worker training and hospital, health
8 center and clinic response to domestic violence victims,"
9 further providing for primary care physicians, emergency
10 medical service organizations and nurses training, for
11 primary care physicians, emergency medical service
12 organizations and nurses' response to domestic violence
13 victims and for definitions.

14 The General Assembly of the Commonwealth of Pennsylvania
15 hereby enacts as follows:

16 Section 1. Section 2 of the act of December 3, 1998
17 (P.L.925, No.115), known as the Domestic Violence Health Care
18 Response Act, is amended by adding definitions to read:

19 Section 2. Definitions.

20 The following words and phrases when used in this act shall

1 have the meanings given to them in this section unless the
2 context clearly indicates otherwise:

3 * * *

4 "Emergency medical services organization." A group of
5 individuals or an organization which provides prehospital
6 admission services utilized in responding to the needs of an
7 individual for immediate medical care in order to prevent loss
8 of life or aggravation of physiological or psychological illness
9 or injury. The term includes, but is not limited to, an
10 organization that provides advanced life support, basic life
11 support or an ambulance service, emergency medical technician
12 and paramedic.

13 * * *

14 "Nurse." An individual who diagnoses and treats human
15 responses to actual or potential health problems through such
16 services as casefinding, health teaching, health counseling and
17 provision of care supportive to or restorative of life and well-
18 being and who executes medical regimens as prescribed by a
19 licensed physician or dentist. The term includes, but is not
20 limited to, a registered nurse, licensed practical nurse and
21 nurse practitioner.

22 * * *

23 "Primary care provider." A health care provider, who, within
24 the scope of the provider's practice, supervises, coordinates,
25 prescribes or otherwise provides or proposes to provide health
26 care services to an enrollee, initiates enrollee referral for
27 specialist care and maintains continuity of enrollee care.

28 * * *

29 Section 2. Section 3 of the act is amended to read:

30 Section 3. Domestic Violence Health Care Response Program.

1 (a) Establishment of program.--There is established within
2 the Department of Public Welfare the Domestic Violence Health
3 Care Response Program.

4 (b) Purpose of programs.--The purpose of the program shall
5 be to support the development of domestic violence medical
6 advocacy projects in this Commonwealth which would assist in the
7 implementation of domestic violence policies and procedures as
8 well as provide training for health care workers, primary care
9 providers, emergency medical services organizations and nurses
10 to improve hospital, health center and clinic response to
11 domestic violence victims seeking medical treatment.

12 (c) Medical advocacy project sites.--The department shall
13 select medical advocacy project sites with representation from
14 urban, rural and suburban areas. To ensure the effectiveness of
15 the program, the project sites shall not be publicized.

16 (d) Annual report.--Utilizing information provided under
17 subsection (e)(5), the department shall compile an annual report
18 to be submitted to the chairman and minority chairman of the
19 Appropriations Committee of the Senate and the chairman and
20 minority chairman of the Appropriations Committee of the House
21 of Representatives providing oversight of the Department of
22 Public Welfare.

23 (e) Program elements.--Each domestic violence medical
24 advocacy project shall:

25 (1) Demonstrate active collaboration between a local
26 community-based domestic violence program and the hospital,
27 health center, primary care providers, emergency medical
28 services organizations, nurses or clinic participating in
29 the project.

30 (2) Develop and implement uniform multidisciplinary

1 domestic violence policies and procedures which incorporate
2 the roles and responsibilities of all staff who provide
3 services or interact with victims of domestic violence,
4 including the identification of victims of domestic violence
5 through universal screening.

6 (3) Develop and implement a multidisciplinary,
7 comprehensive and ongoing domestic violence education and
8 training program for hospital, health center, primary care
9 providers, emergency medical services organizations, nurses
10 or clinic personnel adapted to the particular hospital's,
11 health center's or clinic's demographics, policies, staffing
12 patterns and resources. The training program shall include,
13 but is not limited to, identifying characteristics of
14 domestic violence, screening patients for domestic violence,
15 appropriately documenting in the medical record and offering
16 referral services, including domestic violence resources
17 available in the community.

18 (4) Provide available educational materials to inform
19 victims of domestic violence about the services and
20 assistance available through the domestic violence program.

21 (5) Develop formal project assessment procedures,
22 including, but not limited to, coordinating and collecting
23 data for the evaluation of the projects and their
24 effectiveness in reducing the incidence of domestic violence
25 and overall health care costs, including emergency room
26 costs.

27 Section 3. This act shall take effect in 60 days.