
By: **Delegates Kagan, Stern, Hubbard, Carlson, Bronrott, Cane, Barve,
Grosfeld, Franchot, Hecht, and D. Davis**

Introduced and read first time: February 11, 2000

Assigned to: Judiciary

A BILL ENTITLED

1 AN ACT concerning

2 **Task Force to Study Rape and Sexual Assault Crisis Treatment**

3 FOR the purpose of establishing a Task Force to Study Rape and Sexual Assault
4 Crisis Treatment; specifying the duties of the Task Force; providing for the
5 membership and appointment of the Task Force; providing for staffing of the
6 Task Force; requiring the Task Force to report to the General Assembly on or
7 before a certain date; providing for the termination of this Act; and generally
8 relating to a Task Force to Study Rape and Sexual Assault Crisis Treatment.

9 Preamble

10 WHEREAS, Hospitals in the State may have different procedures for emergency
11 treatment of victims of rape or sexual assault depending on whether the hospitals are
12 public or private, or whether the hospitals are religiously affiliated; and

13 WHEREAS, Victims of rape or sexual assault may be treated differently in
14 different hospitals in the State depending on whether the health care professionals
15 who provide emergency treatment have had sexual assault crisis training; and

16 WHEREAS, Information about health care options may or may not be made
17 available to victims of rape or sexual assault depending on the hospital where the
18 victim is treated; and

19 WHEREAS, There is a need for uniformity in the treatment of rape and sexual
20 assault victims by health care professionals in hospitals in the State; now, therefore,

21 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
22 MARYLAND, That:

23 (a) There is a Task Force to Study Rape and Sexual Assault Crisis Treatment.

24 (b) The Task Force shall study:

25 (1) The procedures for treating victims of rape or sexual assault in
26 hospitals throughout the State, including whether those procedures are uniform
27 throughout the State, whether there are differences in procedures between public and

1 private hospitals, whether there are differences in procedures in hospitals that are
2 religiously affiliated, how funding is provided for victim treatment at each hospital,
3 and how procedures in this State compare to procedures in other states;

4 (2) Sexual assault crisis training for health care professionals who treat
5 rape and sexual assault victims in hospitals, including how this training is funded,
6 how often training is provided and by whom, who oversees the training program,
7 whether there is a certification program, whether there are minimum or maximum
8 numbers of trained personnel employed by hospitals to treat rape and sexual assault
9 victims, and how training programs in this State compare to training programs in
10 other states;

11 (3) The procedures for the dissemination of information about hospital
12 procedures for treating rape and sexual assault crisis victims to law enforcement,
13 rape counseling centers, schools, and the general public and how these procedures
14 compare to procedures in other states; and

15 (4) The availability of emergency contraception and information about
16 emergency contraception in hospitals in the State and how emergency contraception
17 is funded.

18 (c) The Task Force shall be composed of:

19 (1) Two members of the House of Delegates, appointed by the Speaker of
20 the House;

21 (2) Two members of the Senate of Maryland, appointed by the President
22 of the Senate;

23 (3) Nine members appointed by the Governor as follows:

24 (i) One registered nurse;

25 (ii) One licensed physician;

26 (iii) One representative from hospital administration;

27 (iv) One representative who is an emergency room physician or
28 nurse;

29 (v) One representative of a victims' rights or sexual assault
30 advocacy group;

31 (vi) One representative of a victims' rights support group;

32 (vii) One representative of State or local law enforcement;

33 (viii) One representative from the Department of Health and Mental
34 Hygiene; and

35 (ix) One consumer member.

1 (d) The Governor shall designate one of the members as chairman of the Task
2 Force.

3 (e) The Department of Health and Mental Hygiene shall provide professional
4 and administrative support to the Task Force.

5 (f) The Task Force shall:

6 (1) Determine the times and places of its meetings;

7 (2) Recommend measures to address the problems and concerns it
8 identifies; and

9 (3) Report its recommendations and findings to the Governor and, in
10 accordance with § 2-1246 of the State Government Article, the General Assembly on
11 or before December 31, 2000.

12 (g) The members of the Task Force may not receive compensation but are
13 entitled to reimbursement for expenses under the Standard State Travel Regulations,
14 as provided in the State Budget.

15 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take
16 effect June 1, 2000. It shall remain effective for a period of 7 months and, at the end
17 of December 31, 2000, with no further action required by the General Assembly, this
18 Act shall be abrogated and of no further force and effect.