



# **Safe Haven Law Annual Report January 2018**

**Pursuant to  
HCR 107 - Louisiana 2016 Regular Session  
and  
ACT 223 - Louisiana 2015 Regular Session**

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## 1.0 INTRODUCTION AND BACKGROUND

As required by Louisiana Children's Code, Article 1160, the Department of Children and Family Services (DCFS) is submitting this report to both the House and Senate Committees on Health and Welfare regarding the Safe Haven Law.

A series of high-profile infant abandonment cases across the country prompted the Louisiana Legislature to combat the problem. In 2000, Louisiana enacted the Safe Haven Law, amending the Children's Code Articles 1101 and 1193 and Title XVII of the Children's Code, Articles 1701-1706, to provide for the Safe Haven relinquishment of newborns. That Code was again amended in 2003. The entire Safe Haven Law, contained in LA Children's Code Chapter 13, Articles 1149-1160, provides a safe, legal, last resort to abandonment.

The Louisiana Department of Children and Family Services (then the Department of Social Services) implemented policies and procedures in 2004 relating to the state's Safe Haven Law. Several pieces of legislation have been passed since the implementation of the Safe Haven Law, all established to promote the use of the Safe Haven Law as an alternative to abandonment of an infant.

Since 2004, 55 infants have been successfully and safely relinquished to the State\* through a "designated emergency care facility." These facilities include licensed hospitals, public health units, emergency medical service providers, medical clinics, fire stations, police stations, pregnancy crisis centers, and child advocacy centers.

## 2.0 OVERVIEW OF DATA AND DEMOGRAPHICS

DCFS (then the Department of Social Services) implemented policies and procedures in 2004 relating to the state's Safe Haven Law. Since 2004, 55 infants have been successfully and safely relinquished to the State. The chart below provides details on the 55 successful relinquishments.

Number of Safe Haven Cases CY 2004 - 2017															
Region	Calendar Year														
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	Total
Greater New Orleans	0	2	0	1	1	1	3	0	2	5	0	1	4	2	<b>22</b>
Baton Rouge	0	0	0	1	0	0	1	1	0	2	0	2	1	2	<b>10</b>
Covington	1	0	0	0	0	0	1	1	1	1	1	1	0	0	<b>7</b>
Thibodaux	0	0	0	0	0	0	0	0	0	0	0	0	0	1	<b>1</b>
Lafayette	1	0	1	1	1	0	0	0	1	2	0	1	0	0	<b>8</b>
Lake Charles	0	0	0	0	0	2	1	0	0	0	0	0	1	0	<b>4</b>
Alexandria	0	0	0	0	0	0	0	0	0	1	0	0	0	0	<b>1</b>
Shreveport	0	0	0	1	0	0	0	0	0	0	1	0	0	0	<b>2</b>
Monroe	0	0	0	0	0	0	0	0	0	0	0	0	0	0	<b>0</b>
<b>Total</b>	<b>2</b>	<b>2</b>	<b>1</b>	<b>4</b>	<b>2</b>	<b>3</b>	<b>6</b>	<b>2</b>	<b>4</b>	<b>11</b>	<b>2</b>	<b>5</b>	<b>6</b>	<b>5</b>	<b>55</b>

\*It should be noted that the Department amended policy 4-405 to include information on how to handle Safe Haven intake cases. DCFS policy aligns with Louisiana Children's Code Articles 1149-1160 in 2004. The initial Safe Haven Law was enacted in 2000 and was amended in 2003 to include a precise definition of the term 'infant.'

<b>Safe Haven Cases from 2013-2017 by Receiving Emergency Designated Facility Type</b>						
Region	Calendar Year					Total
	2013	2014	2015	2016	2017	
Licensed Hospitals upon birth of child	7	2	3	4	5	<b>21</b>
Other Licensed Hospitals	3	0	0	0	0	<b>3</b>
Fire Stations	1	0	2	1	0	<b>4</b>
Emergency Medical Service Providers (911)	0	0	0	1	0	<b>1</b>
Child Advocacy Centers	0	0	0	0	0	<b>0</b>
Medical Clinics	0	0	0	0	0	<b>0</b>
Public Health Units	0	0	0	0	0	<b>0</b>
Police Stations	0	0	0	0	0	<b>0</b>
Crisis Pregnancy Centers	0	0	0	0	0	<b>0</b>
<b>TOTAL</b>	<b>11</b>	<b>2</b>	<b>5</b>	<b>6</b>	<b>5</b>	<b>29</b>

### **3.0 2017 PROGRAMMATIC UPDATES**

During 2017, DCFS promulgated rules to be in compliance with Act 84 of the 2016 Legislative Session. This legislation required promulgation of the image constituting the official Safe Haven symbol as described in Article 1161 of Act 84, and required DCFS to transmit an electronic version of the Safe Haven symbol to any designated emergency care facility upon request. The ability to request a digital version of the Safe Haven symbol has been placed on the DCFS website as well.

Through House Concurrent Resolution 107 of the 2016 Legislative Session, a Safe Haven Consortium was formed of a select group of representatives of emergency care facilities and key stakeholder groups to assist the Department in developing and maintaining a registry of Safe Haven sites and to promote best practice related to the Safe Haven Law. DCFS coordinated and hosted two Safe Haven Consortium meetings in 2017, the first being on October 12, 2017 and then on December 4, 2017. An additional meeting was held on January 12, 2018 to finalize the recommendations of the Consortium. DCFS assists in organizing and facilitating these meetings. Included in Section 6.0 of this report is a summary of the Consortium's activities and recommendations.

DCFS secured a small grant through the Children's Trust Fund to publish a registry of Safe Haven designated emergency care facilities. Prior to publishing, DCFS completed a mail-out to all Safe Haven sites to inform them of their placement on the Safe Haven registry along with their responsibilities with such designation. This mail-out also provided facilities with an opportunity to verify and update demographic information, such as addresses and phone numbers, for publication in the registry.

This Safe Haven registry was published on the DCFS website in October 2017. Currently, the law defines a designated emergency care facility as any medical clinic, any hospital licensed in Louisiana, any fire station, any police station, any public health unit, any emergency medical service provider, any crisis pregnancy center, or any child advocacy center. The following facilities are included in the registry:

- Medical Clinics – those clinics designated as Federally Qualified Health Centers (33).
- Licensed Hospitals – all hospitals licensed by the Louisiana Department of Health, including 92 acute care hospitals, 27 critical access hospitals, 2 children's hospitals, 31 long-term hospitals, 37 psychiatric hospitals, and 20 rehabilitation hospitals.
- Fire Stations – fire stations that contain a physical street address as listed on the State Fire Marshall's website (535).
- Police Stations – police departments as listed in the Louisiana Association of Chiefs of Police 2016 Directory (327); sheriffs' offices as listed in the same directory (64); and the nine Louisiana State Police troops.
- Public Health Units – facilities provided by the Louisiana Department of Health (70).
- Emergency Medical Service Providers – licensed emergency medical transportation companies licensed by Louisiana Department of Health (70).
- Crisis Pregnancy Centers – crisis pregnancy centers as listed on the [prolifelouisiana.org](http://prolifelouisiana.org) website (36).

The creation of the registry shed light on the need for clarity in the legal definitions of designated emergency care facilities. As a result of the work of the Safe Haven Consortium, DCFS will be proposing legislative changes to further define Safe Haven sites, which will lead to greater accuracy of the Safe Haven online registry.

## **4.0 SAFE HAVEN PUBLIC AWARENESS**

### **ACTIVITIES TO DATE**

In February 2009, DCFS launched a statewide public awareness campaign for Louisiana's Safe Haven Law. The campaign featured billboards, brochures, public service announcements for radio and television, and the creation of a website ([www.louisianasafehaven.com](http://www.louisianasafehaven.com)). The Department also designed posters, business cards, and window decals for Safe Haven facilities. In July 2009, an online form was created for Safe Haven facilities to request materials for their Safe Haven site.

Since 2009, DCFS has appeared in radio, television, and newspaper reports bringing awareness to Louisiana's Safe Haven Law as an alternative to abandonment. The Department also periodically issued news releases about relinquishments and updates to the Safe Haven Law. The issue has been the focus of intense media coverage in instances of infant abandonments, some resulting in tragedy or near-tragedy. The Department has responded through proactive media outreach and response, as well as postings to the department's Facebook and Twitter accounts ([www.twitter.com/LouisianaDCFS](http://www.twitter.com/LouisianaDCFS) and [www.facebook.com/LADCFS](http://www.facebook.com/LADCFS)), all in an effort to inform the public about the safe, legal alternative to infant abandonment.

In 2013, when the relinquishment age was changed to 60 days old, redesigned brochures and posters were printed. Updated packets of posters, brochures, cards and decals were then mailed to Louisiana Safe Haven facilities.

In 2017 there was an increase in the requests from Safe Haven sites for publications on Safe Haven. In 2017, DCFS distributed at least 88 packets of information, as compared to 42 in 2016. The packets are individualized, but contain such information as posters, decals, brochures and cards.

In May 2017, DCFS updated its Safe Haven brochure to reflect changes in the law.

In October 2017, the department launched an online mapping tool designed to help the public locate hospitals, fire stations and other facilities where they can legally relinquish a newborn through the Safe Haven Law. Both the Safe Haven “locator” and the updated brochure were funded through a grant by the Children’s Trust Fund. In addition, DCFS updated its training video for Safe Haven providers on the DCFS website.

DCFS used the launch of the mapping tool as an opportunity to promote Safe Haven through a press release, social media and media interviews.

The Communications Office also shared information about the Safe Haven Law in connection with three incidents involving child abandonments in 2017.

## **5.0 COMMUNICATIONS PLAN**

### **Objective**

The Department of Children and Family Services aims to increase public awareness of the Louisiana Safe Haven Law through the implementation of an annual communications plan. The purpose of this communications plan is to bolster our efforts to inform the community, educational institutions of medicine, nursing, law enforcement, firefighting, or other institutions where professionals are training to work in a Safe Haven facility or be involved with Safe Haven relinquishments, and other community organizations that would benefit from Safe Haven information to raise awareness of Louisiana’s Safe Haven Law.

### **Target Audiences**

DCFS Staff – The DCFS Team serves on the front line with our other audiences. Currently, there are approximately 3,400 staff working within the Department.

General Public – The public includes clients of DCFS – individuals receiving a variety of services from the agency. Each month, DCFS touches close to a quarter of Louisiana’s citizens through the public services offered.

Stakeholders – DCFS stakeholders include the Administration, state Legislature, state partner agencies, educational institutions of medicine and nursing schools, law enforcement, firefighting, or other institutions where professionals are training to work in a Safe Haven site, and other community organizations that would benefit from Safe Haven information.

Safe Haven Relinquishment Sites – This includes licensed hospitals, public health units, emergency medical service providers, medical clinics, fire stations, police stations, pregnancy crisis centers and child advocacy centers.

## **Strategies**

### **Partnerships**

- Work in collaboration with established community partnerships to increase public awareness for the Safe Haven Law, including providing informational materials to these organizations. For example, DCFS will continue its partnership with Prevent Child Abuse Louisiana (PCAL) by utilizing and promoting the 1-800-CHILDREN hotline as the main phone number to call for Louisiana Safe Haven information.
- Continue working with Safe Haven relinquishment sites – licensed hospitals, public health units, emergency medical service providers, medical clinics, fire stations, police stations, pregnancy crisis centers and child advocacy centers – to provide informational materials as requested.
- Identify new community organizations for potential partnerships with the help of stakeholders. Targeted organizations would be those whose clients would benefit from additional information on the Safe Haven Laws.

### **Media Relations**

- Disseminate news releases, letters to the editor, or editorials to media outlets across the state, as appropriate. Potential topics include general information on the Safe Haven Law, information regarding children surrendered through Safe Haven and FAQs about the Safe Haven Law.
- Make broadcast appearances about Louisiana’s Safe Haven Law.
- Respond to media and public inquiries about the Safe Haven law in a timely manner.

### **Social Media**

- Post about the Safe Haven Law to Department social media accounts (Facebook and Twitter). Social Media posts will be monitored through analytics for audience reach.
- Post news releases or published editorials on DCFS social media accounts, as appropriate, for additional coverage.
- Create a cover photo image for the Department Twitter and Facebook pages specific to Louisiana’s Safe Haven Law. This cover photo should be designated as the page’s banner for a minimum length of one month.
- Create social media graphics aimed at informing the public about the Safe Haven program.

## **Program Materials**

- Safe Haven materials currently in print will be reviewed annually for necessary revisions and reordered as the need arises and as funding becomes available. Printed materials include brochures, posters, business cards and site window decals.
- Safe Haven facilities and DCFS stakeholders can request printed materials through an online form published to the DCFS website. Safe Haven facilities are able to request posters, brochures, decals and business cards. DCFS stakeholders that are not a designated Safe Haven facility should only request posters or brochures as the business cards are given after a relinquishment, and window decals designate Safe Haven sites.
- If funding is available, advertisements – such as billboards, bus advertisements, radio ads, and social media ads – should be considered as a way to reach additional members of target audiences.

## **Website**

- DCFS will enhance its online Safe Haven resources as part of a department-wide website redesign project. This will include improvements to the page devoted to the Safe Haven Law.

## **Monitoring Outcomes**

DCFS will monitor media coverage of Safe Haven press releases and related promotions to determine public engagement resulting from the efforts.

DCFS will also use its website analytics to track the number of people who visit [www.louisianasafehaven.com](http://www.louisianasafehaven.com) each month and monitor if there is an increase in visitors during media opportunities.

Requests for printed materials will be monitored and tracked for future print orders. Inquiries from legislators and other stakeholders in regards to the Safe Haven Law will also be tracked.

## **6.0 REPORT FROM THE SAFE HAVEN CONSORTIUM**

Through HCR 107 of the 2016 Louisiana Legislature, the Department of Children and Family Services convened a consortium of emergency care facilities designated in the Safe Haven Law and Safe Haven stakeholder groups, hereafter referred to as The Safe Haven Consortium.

The Safe Haven Consortium is comprised of representatives from the Louisiana Department of Health; Louisiana Hospital Association; Louisiana Emergency Response Network; Louisiana Ambulance Alliance; Louisiana State Board of Medical Examiners; Louisiana State Board of Nursing; Professional Fire Fighters Association of Louisiana; Louisiana Fire Chiefs Association; Louisiana Sheriffs' Association; Louisiana Association of Chiefs of Police; Louisiana Peace Officers Association; Louisiana State Troopers Association; Magnolia State Peace Officers



Association of Louisiana; Children's Advocacy Centers of Louisiana; National Association of Social Workers, Louisiana Chapter; Louisiana School Boards Association; Louisiana Association of Public Charter Schools; Louisiana Association of Educators; Louisiana Federation of Teachers; and Louisiana Association of Student Councils. Additional Stakeholder groups that participate in the Consortium include the Department of Children and Family Services, the Department of Education, LouisianaChildren.org, and Prevent Child Abuse Louisiana.

Two Consortium meetings were held in 2017, and one in 2018. The Consortium's chairperson is Caroline Roemer, with the Louisiana Association of Public Charter Schools; and the vice chairperson is Paige Hargrove, with the Louisiana Emergency Response Network.

During the 2016 Safe Haven Consortium meeting, members identified a need to clarify the definitions of designated Safe Haven sites. During 2017, Consortium members worked collaboratively in developing the below recommended changes to the Louisiana Children's Code:

## **I. Article 1150**

### **Existing Language**

"Designated emergency care facility" means any hospital licensed in the state of Louisiana, any public health unit, any emergency medical service provider, any medical clinic, any fire station, any police station, any crisis pregnancy center, or any child advocacy center.

### **Recommended Changes**

- Modification of the definition of "Designated Emergency Care Facility" to:
  - any hospital licensed in the state of Louisiana;
  - any of the following medical clinics during normal and customary hours of operation: local or parish public health units, licensed rural health clinics, licensed ambulatory surgical centers, and Federally Qualified Health Centers. Offices, clinics, or other type of treatment facilities, private physicians or dentists not listed above are not designated emergency care facilities within the meaning of this section.
  - any manned fire station.
  - any manned police station.
  - any Child Advocacy Center accredited by the National Children's Alliance, during normal and customary hours of operation.
  
- Adding a definition of "Emergency Medical Service Provider" to include any licensed emergency medical service provider, when dispatched as a result of a "911" call, from a parent who wishes to relinquish his infant under the Safe Haven Law. The Provisions set forth in LA Children's Code Article 1152, Sections B through I, which apply to Designated Emergency Care Facilities, shall apply to Emergency Medical Service Providers.

## **II. Article 1151**

### **Existing Language**

If a parent wishes to relinquish his infant, he may leave the infant in the care of any employee of a designated emergency care facility. If the parent is unable to travel to such a facility, he may call "911", and a law enforcement officer or emergency medical service provider shall immediately be dispatched to meet the parent and transport the child to a hospital.

### **Recommended Change**

If a parent wishes to relinquish his infant, he may leave the infant in the care of any employee of a designated emergency care facility. If the parent is unable to travel to such facility, he may call "911", and a law enforcement officer, fire fighter, or licensed emergency medical service provider shall immediately be dispatched to meet the parent, transport the child to a hospital, and ensure all requirements listed in Art. 1152, Sections B through I. have been met.

## **III. Article 1152 (A), (B) and (I)**

### **Existing Language**

- A. Every designated emergency care facility shall appoint as its representative one or more employees on duty during regular business hours who is knowledgeable about the requirements of this Chapter. In addition, at other times each facility shall designate a representative who can be reached by emergency telephone service.
- B. Every designated emergency care facility shall provide, on a periodic basis, instruction regarding safe haven relinquishment procedures to all employees who work in the facility. A designated emergency care facility or its employees or volunteers shall not be held liable for any civil penalty for failure to comply with the provisions of this Subsection.
- I. Absent evidence of willful or intentional misconduct or gross negligence in carrying out these responsibilities, the representative and other staff of the designated emergency shall be immune from civil and criminal liability in any legal action arising from the examination, testing, care, and treatment of the infant.

### **Recommended Changes**

- A. Every designated emergency care facility shall appoint as its representative one or more employees on duty during regular business hours who is knowledgeable about the requirements of this Chapter. In addition, at other times each facility shall designate a representative who can be reached by emergency telephone service or post instructions to contact 911 for child relinquishment if outside of normal operating hours.

- B. Every designated emergency care facility shall provide, on a periodic basis, instruction regarding safe haven relinquishment procedures to all employees who work in the facility. A designated emergency care facility or its employees or volunteers or an emergency medical service provider shall not be held liable for any civil penalty for failure to comply with the provisions of this Subsection.
  
- I. Absent evidence of willful or intentional misconduct or gross negligence in carrying out these responsibilities, the representative and other staff of the designated emergency facility or an emergency medical service provider, shall be immune from civil and criminal liability in any legal action arising from the examination, testing, care, and treatment of the infant.