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State of Minnesota

HOUSE OF REPRESENTATIVES

NINETY-THIRD SESSION

H. F. No. 612

01/19/2023 Authored by Daniels
The bill was read for the first time and referred to the Committee on Children and Families Finance and Policy

1.1 A bill for an act
1.2 relating to children; modifying the definition of neglect; amending Minnesota
1.3 Statutes 2022, section 260E.03, subdivision 15.

1.4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.5 Section 1. Minnesota Statutes 2022, section 260E.03, subdivision 15, is amended to read:

1.6 Subd. 15. Neglect. (a) "Neglect" means the commission or omission of any of the acts
1.7 specified under clauses (1) to (8), other than by accidental means:

1.8 (1) failure by a person responsible for a child's care to supply a child with necessary
1.9 food, clothing, shelter, health, medical, or other care required for the child's physical or
1.10 mental health, including providing a child with access to language and the acquisition of
1.11 language, such as teaching American Sign Language to a deaf child, when reasonably able
1.12 to do so;

1.13 (2) failure to protect a child from conditions or actions that seriously endanger the child's
1.14 physical or mental health when reasonably able to do so, including a growth delay, which
1.15 may be referred to as a failure to thrive, that has been diagnosed by a physician and is due
1.16 to parental neglect;

1.17 (3) failure to provide for necessary supervision or child care arrangements appropriate
1.18 for a child after considering factors as the child's age, mental ability, physical condition,
1.19 length of absence, or environment, when the child is unable to care for the child's own basic
1.20 needs or safety, or the basic needs or safety of another child in their care;

1.21 (4) failure to ensure that the child is educated as defined in sections 120A.22 and
1.22 260C.163, subdivision 11, which includes providing the child with access to language and

2.1 acquisition of language, such as teaching American Sign Language to a deaf child, but does  
2.2 not include a parent's refusal to provide the parent's child with sympathomimetic medications,  
2.3 consistent with section 125A.091, subdivision 5;

2.4 (5) prenatal exposure to a controlled substance, as defined in section 253B.02, subdivision  
2.5 2, used by the mother for a nonmedical purpose, as evidenced by withdrawal symptoms in  
2.6 the child at birth, results of a toxicology test performed on the mother at delivery or the  
2.7 child at birth, medical effects or developmental delays during the child's first year of life  
2.8 that medically indicate prenatal exposure to a controlled substance, or the presence of a  
2.9 fetal alcohol spectrum disorder;

2.10 (6) medical neglect, as defined in section 260C.007, subdivision 6, clause (5);

2.11 (7) chronic and severe use of alcohol or a controlled substance by a person responsible  
2.12 for the child's care that adversely affects the child's basic needs and safety; or

2.13 (8) emotional harm from a pattern of behavior that contributes to impaired emotional  
2.14 functioning of the child which may be demonstrated by a substantial and observable effect  
2.15 in the child's behavior, emotional response, or cognition that is not within the normal range  
2.16 for the child's age and stage of development, with due regard to the child's culture;

2.17 (9) failure to teach a deaf child sign language, thus depriving the child of the ability to  
2.18 communicate with others;

2.19 (10) failure by a child's caregiver to provide a child with a language-rich environment,  
2.20 thus depriving the child of language or obstructing the child from learning language. Without  
2.21 a language-rich environment, a child may become developmentally and socially delayed.  
2.22 A language-rich environment is an environment in which a child has language learning  
2.23 opportunities on par with peers. A language-rich environment for a deaf child is an  
2.24 environment in which language, such as American Sign Language, is accessible to a child  
2.25 without medical intervention; or

2.26 (11) obstruction or deprivation of a child's accessible and cultural language. A child  
2.27 must have robust access to learning experiences, as well as informal and educational  
2.28 environments at home and outside of the home. Children with some physical conditions  
2.29 can receive rich language access through other languages more compatible with their  
2.30 conditions.

2.31 (b) Nothing in this chapter shall be construed to mean that a child is neglected solely  
2.32 because the child's parent, guardian, or other person responsible for the child's care in good

3.1 faith selects and depends upon spiritual means or prayer for treatment or care of disease or  
3.2 remedial care of the child in lieu of medical care.

3.3 (c) This chapter does not impose upon persons not otherwise legally responsible for  
3.4 providing a child with necessary food, clothing, shelter, education, or medical care a duty  
3.5 to provide that care.