

105TH CONGRESS  
2D SESSION

# S. 2395

To provide grants to strengthen State and local health care systems' response to domestic violence by building the capacity of health care professionals and staff to identify, address, and prevent domestic violence.

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## IN THE SENATE OF THE UNITED STATES

JULY 31, 1998

Mr. DOMENICI (for himself and Mr. STEVENS) introduced the following bill; which was read twice and referred to the Committee on Labor and Human Resources

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## A BILL

To provide grants to strengthen State and local health care systems' response to domestic violence by building the capacity of health care professionals and staff to identify, address, and prevent domestic violence.

1       *Be it enacted by the Senate and House of Representa-*  
2       *tives of the United States of America in Congress assembled,*

3       **SECTION 1. GRANTS TO ADDRESS DOMESTIC VIOLENCE IN**  
4                               **HEALTH CARE SETTINGS.**

5       (a) IN GENERAL.—The Family Violence Prevention  
6 and Services Act (42 U.S.C. 10401 et seq.) is amended  
7 by adding at the end the following:

1 **“SEC. 319. GRANTS TO ADDRESS DOMESTIC VIOLENCE IN**  
2 **HEALTH CARE SETTINGS.**

3 “(a) GENERAL PURPOSE GRANTS.—The Secretary,  
4 acting through the Office of Family Violence and Preven-  
5 tion Services of the Administration for Children and Fam-  
6 ilies, may award grants to eligible State and local entities  
7 to strengthen the State and local health care system’s re-  
8 sponse to domestic violence by building the capacity of  
9 health care professionals and staff to identify, address,  
10 and prevent domestic violence.

11 “(b) STATE GRANTS.—

12 “(1) IN GENERAL.—The Secretary may award  
13 grants under subsection (a) to entities eligible under  
14 paragraph (2) for the conduct of not to exceed 10  
15 Statewide programs for the design and implementa-  
16 tion of Statewide strategies to enable health care  
17 workers to improve the health care system’s re-  
18 sponse to treatment and prevention of domestic vio-  
19 lence as provided for in subsection (d).

20 “(2) ELIGIBLE ENTITIES.—To be eligible to re-  
21 ceive a grant under paragraph (1) an entity shall—

22 “(A) be a State health department, non-  
23 profit State domestic violence coalition, State  
24 professional medical society, State health pro-  
25 fessional association, or other nonprofit or

1 State entity with a documented history of effective work in the field of domestic violence;

2  
3 “(B) demonstrate to the Secretary that  
4 such entity is representing a team of organizations and agencies working collaboratively to  
5 strengthen the health care system’s response to  
6 domestic violence; and  
7

8 “(C) prepare and submit to the Secretary  
9 an application at such time, in such manner,  
10 and containing such information as the Secretary may require.  
11

12 “(3) LIMITATION.—The Secretary may not  
13 award a grant to a State health department under  
14 paragraph (1) unless the State health department  
15 can certify that State laws, policies, and practices do  
16 not require the mandatory reporting of domestic violence by health care professionals and staff when the  
17 victim is an adult.  
18

19 “(4) TERM AND AMOUNT.—A grant under this  
20 section shall be for a term of 4 years and for an  
21 amount not to exceed \$2,000,000 for each such  
22 year.

23 “(c) LOCAL DEMONSTRATION GRANTS.—

24 “(1) IN GENERAL.—The Secretary may award  
25 grants under subsection (a) to entities eligible under

1 paragraph (2) for the conduct of not to exceed 10  
2 demonstration projects for the design and implemen-  
3 tation of a strategy to improve the response of local  
4 health care professionals and staff to the treatment  
5 and prevention of domestic violence.

6 “(2) ELIGIBLE ENTITIES.—To be eligible to re-  
7 ceive a grant under paragraph (1) an entity shall—

8 “(A) be a local health department, local  
9 nonprofit domestic violence organization or  
10 service provider, local professional medical soci-  
11 ety or health professional association, or other  
12 nonprofit or local government entity that has a  
13 documented history of effective work in the field  
14 of domestic violence;

15 “(B) demonstrate to the Secretary that  
16 such entity is representing a team of organiza-  
17 tions working collaboratively to strengthen the  
18 health care system’s response to domestic vio-  
19 lence; and

20 “(C) prepare and submit to the Secretary  
21 an application at such time, in such manner,  
22 and containing such information as the Sec-  
23 retary may require.

1           “(3) TERM AND AMOUNT.—A grant under this  
2           section shall be for a term of 3 years and for an  
3           amount not to exceed \$450,000 for each such year.

4           “(d) USE OF FUNDS.—Amounts provided under a  
5           grant under this section shall be used to design and imple-  
6           ment comprehensive Statewide and local strategies to im-  
7           prove the health care setting’s response to domestic vio-  
8           lence in hospitals, clinics, managed care settings, emer-  
9           gency medical services, and other health care systems.  
10          Such a strategy shall include—

11           “(1) the development, implementation, and dis-  
12           semination of policies and procedures to guide health  
13           care professionals and staff responding to domestic  
14           violence;

15           “(2) the training of, and providing follow-up  
16           technical assistance to, health care professionals and  
17           staff to screen for domestic violence, and then to ap-  
18           propriately assess, record in medical records, treat,  
19           and refer patients who are victims of domestic vio-  
20           lence to domestic violence services;

21           “(3) the implementation of practice guidelines  
22           for widespread screening and recording mechanisms  
23           to identify and document domestic violence, and the  
24           institutionalization of such guidelines and mecha-  
25           nisms in quality improvement measurements such as

1 patient record reviews, staff interviews, patient sur-  
2 veys, or other methods used to evaluate and enhance  
3 staff compliance with protocols;

4 “(4) the development of an on-site program to  
5 address the safety, medical, mental health, and eco-  
6 nomic needs of patients who are victims of domestic  
7 violence achieved either by increasing the capacity of  
8 existing health care professionals and staff to ad-  
9 dress these issues or by contracting with or hiring  
10 domestic violence advocates to provide the services;

11 “(5) the development of innovative and effective  
12 comprehensive approaches to domestic violence iden-  
13 tification, treatment, and prevention models unique  
14 to managed care settings, such as—

15 “(A) exploring ways to include com-  
16 pensated health care professionals and staff for  
17 screening and other services related to domestic  
18 violence;

19 “(B) developing built-in incentives such as  
20 billing mechanisms and protocols to encourage  
21 health care professionals and staff to implement  
22 screening and other domestic violence pro-  
23 grams; and

24 “(C) contracting with community agencies  
25 as vendors to provide domestic violence victims

1 access to advocates and services in health care  
2 settings; and

3 “(6) the collection of data, implementation of  
4 patient and staff surveys, or other methods of meas-  
5 uring the effectiveness of their programs and for  
6 other activities identified as necessary for evaluation  
7 by the evaluating agency.

8 “(e) EVALUATION.—The Secretary may use not to  
9 exceed 5 percent of the amount appropriated for a fiscal  
10 year under subsection (e) to evaluate the economic and  
11 health benefits of the programs and activities conducted  
12 by grantees under this section and the extent to which  
13 the institutionalization of protocols, practice guidelines,  
14 and recording mechanisms has been achieved.

15 “(f) AUTHORIZATION OF APPROPRIATIONS.—

16 “(1) IN GENERAL.—There are authorized to be  
17 appropriated to carry out this section—

18 “(A) \$24,500,000 for each of the fiscal  
19 years 2000 through 2002; and

20 “(B) \$20,000,000 for fiscal year 2003.

21 “(2) AVAILABILITY.—Amounts appropriated  
22 under paragraph (1) shall remain available until ex-  
23 pended.”.

1           (b) TECHNICAL AMENDMENT.—Section 305(a) of the  
2 Family Violence Prevention and Services Act (42 U.S.C.  
3 10405(a)) is amended—

4                   (A) by striking “an employee” and insert-  
5                   ing “one or more employees”; and

6                   (B) by striking “individual” and inserting  
7                   “individuals”.

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