

SENATE

STATE OF MINNESOTA

NINETY-FOURTH SESSION

S.F. No. 1682

(SENATE AUTHORS: MAYE QUADE, Mitchell and Abeler)		
DATE	D-PG	OFFICIAL STATUS
02/20/2025	451	Introduction and first reading Referred to Health and Human Services
03/10/2025	721	Author added Mitchell
03/17/2025	850a	Comm report: To pass as amended and re-refer to Judiciary and Public Safety
	874	Author added Abeler

1.1

A bill for an act

1.2

relating to child welfare; modifying the definition of neglect; amending Minnesota

1.3

Statutes 2024, section 260E.03, subdivision 15.

1.4

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

1.5

Section 1. Minnesota Statutes 2024, 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 when reasonably able to do so;

1.11

(2) failure to protect a child from conditions or actions that seriously endanger the child's

1.12

physical or mental health when reasonably able to do so, including a growth delay, which

1.13

may be referred to as a failure to thrive, that has been diagnosed by a physician and is due

1.14

to parental neglect;

1.15

(3) failure to provide for necessary supervision or child care arrangements appropriate

1.16

for a child after considering factors as the child's age, mental ability, physical condition,

1.17

length of absence, or environment, when the child is unable to care for the child's own basic

1.18

needs or safety, or the basic needs or safety of another child in their care;

1.19

(4) failure to ensure that the child is educated as defined in sections 120A.22 and

1.20

260C.163, subdivision 11, which does not include a parent's refusal to provide the parent's

1.21

child with sympathomimetic medications, consistent with section 125A.091, subdivision

1.22

5;

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

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

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

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

(b) Nothing in this chapter shall be construed to mean that a child is neglected solely because the child's parent, guardian, or other person responsible for the child's care in good faith selects and depends upon spiritual means or prayer for treatment or care of disease or remedial care of the child in lieu of medical care.

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

(d) Nothing in this chapter shall be construed to mean that a child who has a mental, physical, or emotional condition is neglected solely because the child remains in an emergency department or hospital setting because services, including residential treatment, that are deemed necessary by the child's medical or mental health care professional or county case manager are not available to the child's parent, guardian, or other person responsible for the child's care, and the child cannot be safely discharged to the child's family.