

PLEASE NOTE: Legislative Information **cannot** perform research, provide legal advice, or interpret Maine law. For legal assistance, please contact a qualified attorney.

An Act To Create Child Advocacy Centers in Maine

Be it enacted by the People of the State of Maine as follows:

Sec. 1. 22 MRSA §4019 is enacted to read:

§ 4019. Child advocacy centers

This section governs the establishment, organization and duties of child advocacy centers to coordinate the investigation and prosecution of child sexual abuse and the referral of victims of child sexual abuse for treatment.

1. Definitions. As used in this section, unless the context otherwise indicates, the following terms have the following meanings.

A. "Board" means a child advocacy advisory board established pursuant to subsection 2.

B. "Child advocacy center" or "center" means a community-based center that provides multidisciplinary services for children and families affected by sexual abuse.

C. "District" means one of the 9 public health districts as defined in section 411, subsection 5.

2. Center; child advocacy advisory board. A district may establish one center within the district. A district that establishes a center shall establish a child advocacy advisory board to govern the center.

A. Each of the following officers or agencies shall designate one representative from within the district to serve on the board: a county sheriff; the Bureau of Child and Family Services; the district attorney; the State Police; a municipal police department; and a county mental health organization; or a comparable representative for each who carries out these duties.

B. The board shall organize itself and elect from among its members a chair. Until a chair is elected, the district attorney representative or comparable representative who carries out the duty of prosecuting serves as interim chair.

C. The chair of the board may appoint additional members of the board as necessary to accomplish the purposes of this section. Additional members may include but are not limited to representatives of law enforcement agencies, the judicial branch and tribal courts.

D. The board shall adopt by a majority vote of its members a written child sexual abuse protocol. The purpose of the protocol is to ensure coordination and cooperation of all agencies involved in child sexual abuse cases to increase efficiency and effectiveness of those agencies and to minimize stress created for the child and the child's family by the investigation and criminal justice process and to ensure that more effective treatment is provided for the child and the child's family.

E. In preparing its written protocol under paragraph D, the board shall consider the following:

(1) An interdisciplinary, coordinated approach to the investigation of child sexual abuse, which must at a minimum include:

(a) An interagency notification procedure;

(b) A dispute resolution process for the involved agencies when a conflict arises in how to proceed with the investigation of a case;

(c) A policy on interagency decision making; and

(d) A description of the role each agency has in the investigation of a case;

(2) A safe, separate space, with assigned personnel, designated for the investigation and coordination of child sexual abuse cases;

(3) An interdisciplinary case review process for purposes of decision making, problem solving, systems coordination and information sharing;

(4) A comprehensive tracking system to receive and coordinate information concerning child sexual abuse cases from each participating agency;

(5) Interdisciplinary specialized training for all professionals involved with the cases of victims and families of child sexual abuse; and

(6) A process for evaluating the implementation and effectiveness of the protocol.

F. The board shall annually evaluate the implementation and effectiveness of the protocol required under paragraph D and shall amend the protocol as necessary to maximize its effectiveness.

G. The board shall file the written protocol under paragraph D and each amendment to it with the Bureau of Child and Family Services and shall provide copies of the protocol and each amendment to it to each agency participating in the district.

3. Child advocacy centers; memorandum of understanding; participants. On the execution of a memorandum of understanding, a center may be established. A memorandum of understanding regarding participation in the operation of the center must be executed among the following:

A. The Bureau of Child and Family Services;

B. Representatives of state, county and municipal law enforcement agencies that investigate child sexual abuse in the district;

C. The district attorney who prosecutes child sexual abuse cases in the district; and

D. Representatives of any other governmental entity that participates in child sexual abuse investigations or offers services to child sexual abuse victims in the district and that wants to participate in the operation of the center.

4. Elements of memorandum of understanding. A memorandum of understanding under this section must include the agreement of each participant to cooperate in:

A. Developing a cooperative team approach to investigating child sexual abuse;

B. Reducing to the greatest extent possible the number of interviews required of a victim of child sexual abuse to minimize the negative impact of an investigation on the child; and

C. Developing, maintaining and supporting an environment that emphasizes the best interest of children and provides investigatory and rehabilitative services.

5. Office space and administrative services. A memorandum of understanding under this section may include the agreement of one or more participants to provide office space and administrative services necessary for the center's operation.

6. Child advocacy center duties. A center shall:

A. Assess victims of child sexual abuse and their families to determine their needs for services relating to the investigation of child sexual abuse and provide those services;

B. Provide a facility at which a multidisciplinary team appointed under subsection 7 can meet to facilitate the efficient and appropriate disposition of child sexual abuse cases through the civil and criminal justice systems; and

C. Coordinate the activities of governmental entities relating to child sexual abuse investigations and delivery of services to child sexual abuse victims and their families.

7. Multidisciplinary team. A center shall appoint a multidisciplinary team.

A. A multidisciplinary team must include employees of the participating agencies who are professionals involved in the investigation or prosecution of child sexual abuse cases. A multidisciplinary team may also include professionals involved in the delivery of services, including medical and mental health services, to child sexual abuse victims and the victims' families.

B. A multidisciplinary team shall meet at regularly scheduled intervals to:

(1) Review child sexual abuse cases determined to be appropriate for review by the multidisciplinary team. A multidisciplinary team may review a child sexual abuse case in which the alleged abuser does not have custodial control or supervision of the child or is not responsible for the child's welfare or care; and

(2) Coordinate the actions of the entities involved in the investigation and prosecution of the cases and the delivery of services to the child sexual abuse victims and the victims' families.

C. When acting in the member's official capacity, a multidisciplinary team member is authorized to receive confidential information for the purpose of carrying out the member's duties under this section. For purposes of this paragraph, "confidential information" includes confidential records regarding the investigation of reports of child sexual abuse, including videotaped interviews, and records, papers, files and communications regarding a person receiving services from or being investigated by the department.

8. Immunity from liability. A person is immune from civil liability for a recommendation or an opinion given in good faith while acting in the official scope of the person's duties as a member of a center's multidisciplinary team or as a staff member or volunteer of a center.

9. Confidential records. The files, reports, records, communications and working papers used or developed in providing services under this section are confidential and are not public records for purposes of Title 1, chapter 13, subchapter 1. Information may be disclosed only to the following in order for them to carry out their duties:

A. The department, department employees, law enforcement agencies, prosecuting attorneys, medical professionals and other state agencies that provide services to children and families;

B. The attorney for a child who is the subject of confidential records; and

C. A guardian ad litem appointed under section 4005 for a child who is the subject of confidential records.

10. Reports. Beginning January 2015, the department shall annually report to the joint standing committee of the Legislature having jurisdiction over health and human services matters regarding the centers. The report must include the number of centers and an overview of the protocols adopted by the centers and the effectiveness of the centers in coordinating the investigation and prosecution of child sexual abuse and referral of victims of child sexual abuse for treatment. The committee may submit legislation related to the report.

SUMMARY

This bill provides for the establishment of child advocacy centers throughout the State. One center may be established in each of the State's 9 public health districts, and each center is responsible for

coordinating the investigation and prosecution of child sexual abuse and referral of victims of child sexual abuse for treatment in that district.

The bill requires that an advisory board govern each center. Board members must be from the district and must include representatives from a county sheriff's office; the Department of Health and Human Services, Bureau of Child and Family Services; the district attorney's office; the State Police; a municipal police department; and a county mental health organization; or comparable representatives who carry out the same duties. Each board is required to prepare a written protocol that includes an interagency notification procedure; a dispute resolution process for the involved agencies when a conflict arises in how to proceed with the investigation of the case; a policy on interagency decision making; and a description of the role each agency has in the investigation of the case. Protocols must provide for a safe, separate space, with assigned personnel, designated for the investigation and coordination of child sexual abuse cases; an interdisciplinary case review process for purposes of decision making, problem solving, systems coordination and information sharing; a comprehensive tracking system to receive and coordinate information concerning child sexual abuse cases from each participating agency; interdisciplinary specialized training for all professionals involved with the cases of victims and families of child sexual abuse; and a process for evaluating the implementation and effectiveness of the protocol.

The bill provides that, on the execution of a memorandum of understanding, a center may be established. A center must assess victims of child sexual abuse and their families to determine their needs for services relating to the investigation of child sexual abuse; provide services determined to be necessary; provide a facility at which a multidisciplinary team can meet to facilitate the efficient and appropriate disposition of child sexual abuse cases through the civil and criminal justice systems; and coordinate the activities of governmental entities relating to child sexual abuse investigations and delivery of services to child sexual abuse victims and their families. Multidisciplinary teams must include employees of the participating agencies who are professionals involved in the investigation or prosecution of child sexual abuse cases. Multidisciplinary teams may also include professionals involved in the delivery of services, including medical and mental health services, to child sexual abuse victims and the victims' families. Multidisciplinary teams are required to meet at regularly scheduled times to review child sexual abuse cases determined to be appropriate for review by the multidisciplinary teams and coordinate the actions of the entities involved in the investigation and prosecution of the cases and the delivery of services to the child sexual abuse victims and the victims' families.

The bill specifies that a person is immune from civil liability for a recommendation or an opinion given in good faith while acting in the official scope of the person's duties as a member of a center's multidisciplinary team or as a staff member or volunteer of a center. The bill also specifies that the files, reports, records, communications and working papers used or developed in providing services are confidential and are not public records.

Beginning January 2015, the Department of Health and Human Services must annually report to the joint standing committee of the Legislature having jurisdiction over health and human services matters regarding the centers. The report must include the number of centers and an overview of the protocols adopted by the centers and the effectiveness of the centers in coordinating the investigation and prosecution of child sexual abuse and referral of victims of child sexual abuse for treatment. The committee may submit legislation related to the report.