

Date: (Filing No. S- )

**HEALTH AND HUMAN SERVICES**

Reproduced and distributed under the direction of the Secretary of the Senate.

**STATE OF MAINE  
SENATE  
126TH LEGISLATURE  
FIRST REGULAR SESSION**

COMMITTEE AMENDMENT “ ” to S.P. 468, L.D. 1334, Bill, “An Act To Create Child Advocacy Centers in Maine”

Amend the bill by striking out everything after the enacting clause and before the summary and inserting the following:

**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 other child abuse and neglect and the referral of victims of child sexual abuse and other child abuse and neglect 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 child sexual abuse and other child abuse and neglect.

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

**COMMITTEE AMENDMENT**

1 department; a sexual assault support center; and a county mental health organization;  
2 or a comparable representative for each who carries out these duties.

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

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

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

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

19 (1) An interdisciplinary, coordinated approach to the investigation of child  
20 sexual abuse and other child abuse and neglect, which must at a minimum  
21 include:

22 (a) An interagency notification procedure;

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

25 (c) A policy on interagency decision making; and

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

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

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

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

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

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

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

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

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

11 A. The Bureau of Child and Family Services;

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

14 C. The district attorney who prosecutes child sexual abuse cases and other child  
15 abuse and neglect cases in the district;

16 D. Representatives of a sexual assault support center; and

17 E. Representatives of any other governmental entity that participates in child sexual  
18 abuse or other child abuse and neglect investigations or offers services to victims of  
19 child sexual abuse and other child abuse and neglect in the district and that wants to  
20 participate in the operation of the center.

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

23 A. Developing a cooperative team approach to investigating child sexual abuse and  
24 other child abuse and neglect;

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

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

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

33 **6. Child advocacy center duties.** A center shall:

34 A. Assess victims of child sexual abuse and other child abuse and neglect and their  
35 families referred to the center by the department, a law enforcement agency or a  
36 district attorney to determine their needs for services relating to the investigation of  
37 child sexual abuse and other child abuse and neglect and provide those services;

38 B. Provide a facility at which a multidisciplinary team appointed under subsection 7  
39 can meet to facilitate the efficient and appropriate disposition of child sexual abuse

1 cases and other child abuse and neglect cases through the civil and criminal justice  
2 systems; and

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

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

7 A. A multidisciplinary team must include employees of the participating agencies  
8 who are professionals involved in the investigation or prosecution of child sexual  
9 abuse cases and other child abuse and neglect cases. A multidisciplinary team may  
10 also include representatives of sexual assault support centers and professionals  
11 involved in the delivery of services, including medical and mental health services, to  
12 victims of child sexual abuse and other child abuse and neglect and the victims'  
13 families.

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

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

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

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

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

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

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

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

