

Date of Hearing: April 23, 2019

ASSEMBLY COMMITTEE ON HUMAN SERVICES

Eloise Gómez Reyes, Chair

AB 1221 (Cooley) – As Amended April 8, 2019

**SUBJECT:** Children's advocacy centers

**SUMMARY:** Allows a county to utilize a Children's Advocacy Center (CAC) to implement a coordinated, multidisciplinary response to investigate reports involving child physical or sexual abuse, exploitation, or maltreatment, and requires the CACs utilized by counties to comply with certain standards, as specified. Specifically, **this bill:**

- 1) Makes Legislative findings and declarations related to the effects child abuse and neglect have on a child and ways in which investigations of suspected child abuse and neglect should be conducted.
- 2) Permits a county to use a CAC to implement a coordinated multidisciplinary response, as defined in current law, to investigate reports involving child physical or sexual abuse, exploitation, or maltreatment.
- 3) Mandates that a county that utilizes a CAC to coordinate its multidisciplinary response must require the CAC to, as specified:
  - a) Ensure that the multidisciplinary team (MDT) associated with the CAC consists of at least one representative from certain agencies;
  - b) Ensure that the MDT associated with the CAC has cultural competency and diversity training to meet the needs of the community it serves;
  - c) Have a designated legal entity responsible for the governance of its operations for purposes of overseeing the CAC's business practices;
  - d) Provide a dedicated, child-focused setting designed to provide a safe, comfortable, and neutral place where forensic interviews and other services may be provided;
  - e) Use written protocols for case review and case review procedures, and use a case tracking system to provide information on demographics and case information;
  - f) Verify that members of the MDT who are responsible for medical evaluations have specific training in child abuse or child sexual abuse examinations;
  - g) Verify that members of the MDT who are responsible for mental health services are trained in and deliver trauma-focused, evidence-supported mental health treatments; and,
  - h) Verify that the interviews conducted in the course of investigations are conducted in a forensically sound manner and occur in a child-focused setting.
- 4) Specifies that a county may use more than one CAC.

- 5) Deems the files, reports, records, communications, and working papers used or developed in providing services through a CAC as confidential and, further, specifies that these documents are not public records.
- 6) Allows MDT members associated with a CAC to share with other team members information or records, provided that the information or records are treated as confidential to the extent required by law by the receiving team members, in order to facilitate a forensic interview or case discussion, or to provide services to the child or family, as specified.
- 7) Prohibits MDT members associated with a CAC, child forensic interviewers, and other providers at a CAC from being civilly or criminally liable for providing services to children or non-offending family members.

**EXISTING LAW:**

- 1) Establishes a state and local system of child welfare services, including foster care, for children who have been adjudged by the court to be at risk or have been abused or neglected, as specified. (Welfare and Institutions Code [WIC] Section 202)
- 2) Deems a child as within the jurisdiction of the juvenile court if he or she has suffered, or there is a substantial risk that the child will suffer, serious physical harm or illness as a result of the failure or ability of his or her parent to provide the child with adequate food, clothing, shelter, or medical treatment, as specified. (WIC 300)
- 3) States that the purpose of foster care law is to provide maximum safety and protection for children who are currently being physically, sexually, emotionally abused, neglected, or exploited, and to ensure the safety, protection, and physical and emotional well-being of children who are at risk of harm. (WIC 300.2)
- 4) Defines “mandated reporter” as an individual required to report suspected or known instances of child abuse and neglect, and includes: teachers, social workers, probation officers, firefighters, and physicians, among others. (Penal Code [PEN] Section 11165.7(a))
- 5) Requires reports of suspected child abuse or neglect to be made by mandated reporters to certain entities, including any police department or sheriff’s department, county probation department, or the county welfare department, as specified. (PEN 11165.9)
- 6) Includes in the definition of “child welfare services” the provision of “emergency response services,” which consist of a response system providing in-person response, 24 hours a day, seven days a week, to reports of abuse, neglect, or exploitation for the purpose of an investigation, and to determine the necessity for providing initial intake services and crisis intervention to maintain the child safely in their home, or to protect the safety of the child, as specified. Further, requires county welfare departments to respond to any report of imminent danger to a child immediately and all other reports within 10 calendar days, with certain exceptions, as specified. (WIC 16501(a)(2) and (f))
- 7) Establishes the Community Care Licensing Division (CCLD) within CDSS and requires CDSS to license group care facilities, private foster family agencies, and foster family homes in order to place children who are in the child welfare system. (Health and Safety Code [HSC] 1502 and 1522)

- 8) Defines “multidisciplinary personnel” as any team of three or more persons who are trained in the prevention, identification, management, or treatment of child abuse or neglect cases, and who are qualified to provide a broad range of services related to child abuse or neglect, and may include, but not be limited to, psychiatrists, police officers, medical personnel, and social workers, among others. (WIC 18951(d))
- 9) Defines “provider agency” as a governmental or other agency that has as one of its purposes the prevention, identification, management, or treatment of child abuse or neglect, and includes social services, children’s services, health services, and law enforcement, among others. (WIC 18961.7(b)(2))
- 10) Allows a county to establish a child abuse MDT to allow provider agencies to share confidential information in order to investigate reports of suspected child abuse or neglect, or for the purpose of child welfare agencies making a detention determination. (WIC 18961.7(a))
- 11) Defines “child abuse MDT” as a team of two or more persons who are trained in the prevention, identification, or treatment of child abuse and neglect cases who are qualified to provide a broad range of services related to child abuse, and includes medical personnel, law enforcement agents, social services workers, and a public or private school teacher, among others, as specified. (WIC 18961.7(b)(1))
- 12) Allows members of a child abuse MDT to disclose to and exchange with one another information and writings that relate to any incident of child abuse that may also be designated as confidential under state law if the member of the team having that information or writing reasonably believes it is generally relevant to the prevention, identification, or treatment of child abuse. Further, limits the disclosure of this information to a 30-day period, or longer if documented good cause exists, following a report of suspected child abuse or neglect. (WIC 18961.7(c)(1))
- 13) Allows, notwithstanding any provision of law governing the disclosure of information and records, any person trained and qualified to serve on an MDT be deemed a part of the team as necessary, for the purposes of a particular case, provided the reasons for deeming the person a member of the team are specified in writing. (WIC 18964)

**FISCAL EFFECT:** This bill has been keyed non-fiscal by the Legislative Counsel.

**COMMENTS:**

***Child abuse and neglect investigations:*** Reports of child abuse or neglect are often made by a mandated reporter, who, due to their profession, is legally required to report any suspicion of child abuse or neglect, and can include, teachers, doctors, social workers, mental health professionals, and child care providers, among others, although anyone can make a report of suspected child abuse or neglect. When an individual believes a child may be suffering abuse or neglect, that person can make a report to either law enforcement or the county child welfare agency, often through the Child Protective Services (CPS) Hotline, which is a 24-hour hotline staffed by trained social workers who receive and evaluate reports of suspected abuse or neglect.

When the hotline receives a report of suspected abuse or neglect, the call is screened by a social worker who attempts to determine whether the report alleges abuse, neglect, or exploitation.

CPS must then determine whether the report warrants an in-person visit from a county social worker to investigate the allegations. If an in-person visit is warranted and substantiates the allegations, the social worker may make the decision to remove the child from the home and, if determined to be in the best interest of the child, petition the court to adjudicate the child as a dependent of the court. In 2018, 485,651 allegations of possible child abuse or neglect were recorded in California. Of those, 137,861 were of a sexually or physically abusive nature, 231,047 were related to severe or general neglect, and 53,578 were related to emotional abuse.

***Child advocacy centers (CACs):*** An investigation of alleged child abuse or neglect can take many forms depending on the nature and severity of the allegation, and can be conducted by multiple entities throughout the process, including: CPS, law enforcement, CCLD, and the district attorney's office, among others. As such, a child who has suffered abuse or neglect can sometimes be required to share their experience numerous times with various entities, and repeating their story may result in further, additional trauma. To reduce the trauma experienced by a child victim of abuse or neglect, investigators may utilize CACs.

A CAC is a child-focused environment that provides safety and security to children who have been abused or neglected. According to the National Children's Alliance, which is the national association and crediting body for more than 800 CACs serving approximately 334,626 children throughout the country,

“The child is brought to the CAC by a caregiver or other ‘safe’ adult. At the CAC, the child tells their story once to a trained interviewer who knows the right questions to ask in a way that does not re-traumatize the child. Then, a team that includes medical professionals, law enforcement, mental health, prosecution, CPS, victim advocacy, and other professionals make decisions together about how to help the child based on the interview. CACs offer therapy and medical exams, plus courtroom preparation, victim advocacy, case management, and other services. This is called the MDT response and is a core part of the work of CACs.”

A key practice of the CAC MDT model is the use of forensic interviews, which seek to: obtain information from a child that may be helpful in a criminal investigation, assess the safety of a child's living arrangements, obtain information that can support or refute allegations of abuse and neglect, and assess the need for medical treatment or psychological care. Forensic interviews are conducted by forensic interview specialists and are structured conversations with a child who is believed to be a victim of abuse or neglect. The interviews are also recorded and individuals involved in the abuse and neglect investigation may watch the recorded forensic interview, rather than require the child to tell their story multiple times to different entities. In 2018, 21 of California's counties were covered by CACs accredited by the National Children's Alliance.

***Need for this bill:*** The provisions of this bill allow, but do not require, a county to use a CAC to implement a coordinated, multidisciplinary approach to investigate allegations of child abuse or neglect. The bill also requires the CACs that a county utilizes to meet certain standards in order to ensure investigations are not a traumatic experience for children who have been victims of abuse or neglect.

According to the author, “Children's Advocacy Centers bring together a multidisciplinary team, including law enforcement, child protection, medical personnel, mental health providers, and

district attorneys, to ensure that any response to an allegation of child abuse is coordinated among these agencies and that the needs of the child stay at the forefront of all investigations.

“Congress has identified such centers as the preferred model for pursuit of justice and healing for child victims of human trafficking, mainly sex trafficking. To ensure children and families receive the services they need to provide guidance to existing CACs in California. [This bill] creates statutory requirements for CACs to clarify what services must be provided in order for an entity to be considered a CAC. These requirements include: using a multidisciplinary approach with representatives from law enforcement, CPS, district attorney’s, and/or medical personnel who are trained in cultural competency and community diversity; having a designated legal entity responsible for the governance of its operations; and, providing a child-focused setting designated to provide a safe, comfortable and neutral place where forensic interviews and other center services can be appropriately provided for children and families.”

**Double referral:** This bill passed out of the Assembly Public Safety Committee on April 2, 2019, with an 8-0 vote.

#### **RELATED AND PRIOR LEGISLATION:**

**AB 395 (Rubio) of 2019** places a number of requirements on procedures and components of investigations of allegations of abuse or neglect in certain community care facilities conducted by CCLD or any other agency with oversight authority. AB 395 is scheduled to be heard in the Assembly Public Safety Committee on April 23, 2019.

**AB 320 (Cooley) of 2017** would have authorized counties to create CACs in order to create and facilitate multidisciplinary responses to child abuse. AB 320 was held in the Assembly Human Services Committee.

**SB 1352 (Corbett) of 2012** would have authorized each county to establish a CAC and interagency protocol agreements. SB 1352 was vetoed by the Governor.

**AB 2229 (Brownley), Chapter 464, Statutes of 2010**, established time-limited authority for counties to create two-person multidisciplinary teams engaged in the investigation of suspected child abuse or neglect.

**AB 1049 (Bader), Chapter 353, Statutes of 1987**, authorized the use of MDTs for both child and elder abuse.

#### **REGISTERED SUPPORT / OPPOSITION:**

##### **Support**

Alameda County District Attorney's Office  
California Sexual Assault Forensic Examiner Association  
Chadwick Center for Children & Families  
Child Abuse Listening Interviewing Coordination Center  
Child Advocacy Centers of California  
Children Now  
Children's Advocacy Centers of California  
Children's Assessment Center

City of Susanville  
Family Healing Center  
International Association of Forensic Nurses Southern California Chapter  
Lassen County Office of Education  
Napa County Child Advocacy Center, The Courage Center  
Napa County District Attorney's Office  
National Center for Youth Law  
National Children's Alliance  
Palomar Health Child Abuse Program  
Placer County District Attorney's Office  
Private Citizen  
Riverside County Child Assessment Team  
The University Corporation DBA Strength United  
The Women's Foundation of California  
Tuolumne County Kids Interview Team

**Opposition**

None on file

**Analysis Prepared by:** Kelsy Castillo / HUM. S. / (916) 319-2089