

**ONE HUNDRED SECOND LEGISLATURE - SECOND SESSION - 2012**  
**COMMITTEE STATEMENT**  
**LB993**

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**Hearing Date:** Monday February 13, 2012  
**Committee On:** Judiciary  
**Introducer:** Ashford  
**One Liner:** Change provisions relating to child abuse and neglect teams and child advocacy centers

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**Roll Call Vote - Final Committee Action:**  
Advanced to General File

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**Vote Results:**

<b>Aye:</b>	6	Senators Ashford, Coash, Council, Harr, Larson, Lathrop
<b>Nay:</b>		
<b>Absent:</b>	1	Senator McGill
<b>Present Not Voting:</b>	1	Senator Lautenbaugh

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**Proponents:**

SEN. BRAD ASHFORD  
LYNN AYERS  
GENE KLEIN  
NICOLE GOALEY  
TERRY WAGNER  
  
ALICIA HENDERSON

**Representing:**

INTRODUCER  
NE ALLIANCE OF CAC  
PROJECT HARMONY  
DOUGLAS COUNTY ATTORNEY'S OFFICE  
LINCOLN/LANCASTER COUNTY CHILD ADVOCACY  
CENTER  
LANCASTER COUNTY ATTORNEY

**Opponents:**

MELANIE WILLIAMS-SMOTHERMAN  
SCOT ADAMS  
MONICA ANDERSON

**Representing:**

FAMILY ADVOCACY MOVEMENT  
CPS/DHHS  
NEBRASKA FAMILIES COLLABORATIVE

**Neutral:**

**Representing:**

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**Summary of purpose and/or changes:**

Legislative Bill 993 would amend the statutes that provide for child advocacy centers; child abuse and neglect investigation teams and child abuse and neglect treatment teams. The amendments would update the language to reflect current practice and expand the responsibilities of the teams and the centers.

The purpose of the child advocacy centers would be more clearly identified to require a location for conducting forensic interviews and medical examinations and for coordinating the team response to reports of abuse and neglect. The protocols and procedures of each child abuse and neglect investigation team would have to be enhanced to provide for: mandatory reporting of abuse and training for professionals regarding identification and reporting of abuse; assigning roles and responsibilities for the initial response to reports of abuse; how reports will be shared between HHS and law enforcement; coordinating the investigation - to include arranging for video-recorded forensic interviews with kids who are alleged to be victims of sexual abuse or serious physical abuse or neglect, have witnessed violent crime, are found in a drug endangered environment or have been removed from a kidnapping; arranging for temporary custody of a child as needed to ensure the child's safety; determining what cases will be reviewed by the team, including cases of sexual abuse, serious physical abuse and neglect, drug-endangered children and serious or ongoing domestic violence; cases

determined by HHS to be of high or very high risk and any other case referred by a team member when a system response issue has been identified. The protocols and procedures of each child abuse and neglect treatment team would have to be enhanced to provide for: staffing and coordinating "voluntary" cases in which ongoing services are provided by HHS or a contracted agency but the juvenile court is not involved and status offense cases.

The duty to report the names of the team members and the number of times the team met annually to the Crime Commission would be transferred from the county attorney to the representative from the child advocacy center from each team.

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Brad Ashford, Chairperson