

**FISCAL NOTE**  
**Requested by Legislative Council**  
**03/28/2017**

Amendment to: SB 2189

- 1 A. **State fiscal effect:** *Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.*

	2015-2017 Biennium		2017-2019 Biennium		2019-2021 Biennium	
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds
<b>Revenues</b>				\$0		\$0
<b>Expenditures</b>				\$0		\$0
<b>Appropriations</b>				\$0		\$0

- 1 B. **County, city, school district and township fiscal effect:** *Identify the fiscal effect on the appropriate political subdivision.*

	2015-2017 Biennium	2017-2019 Biennium	2019-2021 Biennium
<b>Counties</b>			
<b>Cities</b>			
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- 2 A. **Bill and fiscal impact summary:** *Provide a brief summary of the measure, including description of the provisions having fiscal impact (limited to 300 characters).*

This bill provides that, beginning April 1st of the last year of the biennium, the Office of Attorney General shall, subject to legislative appropriations, reimburse each accredited children's advocacy center for un-reimbursed forensic interviews.

- B. **Fiscal impact sections:** *Identify and provide a brief description of the sections of the measure which have fiscal impact. Include any assumptions and comments relevant to the analysis.*

There are three children's advocacy centers (CAC's) in North Dakota. Approximately 600 of the 2,000 forensic interviews the CAC's conduct in a biennium are not reimbursed. The cost of a forensic interview is \$360.

3. **State fiscal effect detail:** *For information shown under state fiscal effect in 1A, please:*

- A. **Revenues:** *Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.*

N/A

**B. Expenditures:** *Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.*

The estimated cost of reimbursing all un-reimbursed forensic interviews is \$216,000. The bill clarifies un-reimbursed as that is not reimbursable by insurance, medicaid, or crime victims compensation.

The Office of Attorney General receives a \$660,000 appropriation for reimbursing entities for forensic medical exams. In the previous three biennia the Office has reimbursed up to \$425,000 for a biennium. As a result the \$216,000 in estimated reimbursement of non-covered forensic interviews fits within the \$660,000 appropriated for forensic medical exams. This assumes the reimbursement costs for forensic medical exams and for forensic interviews do not change.

The amendments which indicate the Children's Advocacy Center is not precluded from allowing a parent/guardian from discussing and accessing the records and digital media have no fiscal impact.

**C. Appropriations:** *Explain the appropriation amounts. Provide detail, when appropriate, for each agency and fund affected. Explain the relationship between the amounts shown for expenditures and appropriations. Indicate whether the appropriation or a part of the appropriation is included in the executive budget or relates to a continuing appropriation.*

The Executive budget included \$660,000 from the Insurance Regulatory Trust Fund for forensic medical exams.

**Name:** Kathy Roll

**Agency:** Office of Attorney General

**Telephone:** 328-3622

**Date Prepared:** 03/28/2017

**FISCAL NOTE**  
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**Name:** Kathy Roll

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**Telephone:** 328-3622

**Date Prepared:** 03/28/2017

**FISCAL NOTE**  
**Requested by Legislative Council**  
**01/12/2017**

Amendment to: SB 2189

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There are three children's advocacy centers (CAC's) in North Dakota. Approximately 1,200 of the 2,000 forensic interviews the CAC's conduct in a biennium are not reimbursed. The cost of a forensic interview is \$360.

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The estimated cost of reimbursing all unreimbursed forensic interviews is \$432,000.

The Office of Attorney General receives a \$660,000 appropriation for reimbursing entities for forensic medical exams. In the previous three biennia the Office has reimbursed up to \$425,000 for a biennium. As a result approximately \$230,000 - \$235,000 of the \$432,000 forensic interview cost can be reimbursed in a biennium - \$200,000 of the cost of forensic interviews will not be reimbursed. This assumes the reimbursement costs for forensic medical exams and for forensic interviews do not change.

- C. **Appropriations:** *Explain the appropriation amounts. Provide detail, when appropriate, for each agency and fund affected. Explain the relationship between the amounts shown for expenditures and appropriations. Indicate whether the appropriation or a part of the appropriation is included in the executive budget or relates to a continuing appropriation.*

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**Name:** Kathy Roll

**Agency:** Office of Attorney General

**Telephone:** 328-3622

**Date Prepared:** 01/17/2017

**FISCAL NOTE**  
**Requested by Legislative Council**  
**01/12/2017**

Bill/Resolution No.: SB 2189

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**2017 SENATE HUMAN SERVICES**

**SB 2189**

# 2017 SENATE STANDING COMMITTEE MINUTES

Human Services Committee  
Red River Room, State Capitol

SB 2189  
1/18/2017  
Job Number 27045

- Subcommittee  
 Conference Committee

Committee Clerk Signature

*Ramson*

## Explanation or reason for introduction of bill/resolution:

A bill relating to the confidentiality of children's advocacy center records; and relating to reimbursement of the cost of forensic interviews and confidentiality of juvenile court records and children's advocacy center records.

## Minutes:

3 Attachments

**Chair J. Lee:** Brought the meeting to order and opened the public hearing on SB 2189. All members were present.

**Chair J. Lee: (District 13)** Introduced SB 2189 (2:35-3:30) and said it is a bill which is going to affect the confidentiality of the records.

**Paula Condol**, Director for the Children's Advocacy Centers of North Dakota (4:35-13:05) Testified in favor of SB 2189. Please see attachments #1 and #2.

**Chair J. Lee:** Where are your centers and how do you serve the whole state?

**Ms. Condol** answered that there are five sites in North Dakota: Bismarck, Dickinson, Minot, Grand Forks, and Fargo. The counties are aware of their services and can access them depending on the needs of the child in the case. She explained that they are regionally positioned to serve the whole state.

**V-Chair Larsen:** He gave an example of when his wife was on one of these which was a pilot project. He asked if there is a therapist in the room and who the people are in the background and if they send the video in or if there is a two-way mirror?

**Ms. Condol** explained that there are some CAC's across the country that have a two-way mirror but in North Dakota all the centers have close circuit TV. She went on to explain that the child and the interviewer are in the room performing the interview. The team members such as law enforcement, social services, medical provider, prosecution at times, etc. will be in another room watching the interview over TV. It's transmitted electronically but they are all in the same building. When they have questions they need the interviewer to ask for them they communicate with the interviewer through a Bluetooth device worn in the ear. The

questions from the team members are answered but the child only has to talk to and see the one person, the interviewer.

**Chair J. Lee:** They are recorded to be used in court proceedings?

**Ms. Condol** replied that all the forensic interviews are documented and recorded on a dvd that goes with law enforcement for prosecution purposes. Most of the time the child will have to at least testify but the dvd will supplement the testimony.

**Senator Piepkorn:** Is the camera discretely placed so as to not interfere with the interview process?

**Ms. Condol**, ours is discrete, but not hidden. We don't want the child to be tricked in any way. We inform them of the video and of the team who is helping by asking some of the questions. They are aware of the process. It is posed to them in a child friendly way.

**V-Chair Larsen:** How long has the inception of this program been in North Dakota.

**Ms. Condol** explained that the Dakota Children's Advocacy Center has been around 19 years. The Red River Children's Advocacy Center became accredited in 2004. She explained that there is a history timeline included in the packets (attachment #2).

**Senator Heckaman** asked about the wording on line 21 on page 2 of the bill. They already have to have been in your program before? Is the wording right? The way it states it seems they have to be seen previously.

**Ms. Condol** suggested that "referred" might be better wording.

**Johnathan Byers**, Assistant Attorney General, (20:40-) testified in favor of SB 2189. (See attachment #3 which includes proposed amendments.) He thought the suggestion to include "referred" was a good one to ensure they would get the records at the earliest time.

**Senator Anderson:** Do we want to keep records and evidence on line 26 page 2?

**Mr. Byers** thought law enforcement would prefer to see the word "evidence" taken out.

**Steve Reiser** (Social Service Director from Dakota Central Social Services and also a member of the ND Association of County Social Service Directors. He also sits on the Advisory Board for the Bismarck CAC.) (26:45-27:15) testified in support of SB 2189.

There was no opposing or neutral testimony.

**Chair J. Lee** closed the public hearing on SB 2189 and reviewed the proposed amendments. (27:45)

**Senator Piepkorn:** So there's been 125,000 or 200,000 at the end of the year returned to the gen fund. What's your estimate of how much you'll be able to give back to CAC's for these interviews?

**Mr. Byers (30:05)** responded that he thought the fiscal note is really an over projection. We will only pay them back for the ones that are not reimbursable from someone else.

**Chair J. Lee:** The fiscal note also notes the cost of a forensic interview is \$360. The FN says 3 CACs. She asked Ms. Condol to explain where the three CAC's and the satellites are.

**Ms. Condol** replied that the three CAC's are the Dakota Children's Advocacy Center in Bismarck with a satellite in Dickinson. The Red River Children's Advocacy Center in Fargo with a satellite in Grand Forks. The Northern Plains Children's Advocacy Center is located in Minot.

**Chair J. Lee** reviewed the proposed amendments from Mr. Byers. She also reviewed the amendment as discussed by the committee on page 2 line 22 - after "has" add "been referred for or has" received services.

**Senator Heckaman:** Moved the amendments to SB 2189 as presented.

**V-Chair Larsen:** Seconded.

**Roll Call Vote: 7-0-0. Amendments were adopted.**

**Senator Heckaman:** Moved a Do Pass on Amended SB 2189.

**V-Chair Larsen:** Seconded

**Roll Call Vote: 7-0-0. Motion passed.**

**Sen Larsen** will be the carrier.

**V-Chair Larsen** relayed a story about his wife and the CAC's.

**Chair J. Lee** closed work on SB 2189.

January 18, 2017

ET  
1-18-17  
p. 1 of 1

PROPOSED AMENDMENTS TO SENATE BILL NO. 2189

Page 1, line 15, replace "has not been reimbursed" with "is not reimbursable"

Page 2, line 22, after "has" insert "been referred for or has"

Page 2, line 26, replace "evidence" with "digital media"

Page 2, line 28, replace "social service agency" with "the department or the department's  
authorized agent"

Renumber accordingly

Date: 4/18 2017

Roll Call Vote #: 1

2017 SENATE STANDING COMMITTEE  
ROLL CALL VOTES  
BILL/RESOLUTION NO. 2189

Senate Human Services Committee

Subcommittee

Amendment LC# or Description: 17.0726.02001

Recommendation:  Adopt Amendment  
 Do Pass     Do Not Pass     Without Committee Recommendation  
 As Amended     Rerefer to Appropriations  
 Place on Consent Calendar  
Other Actions:  Reconsider     \_\_\_\_\_

Motion Made By Sen Heckaman Seconded By Sen Larsen

Senators	Yes	No	Senators	Yes	No
Senator Judy Lee (Chairman)	X		Senator Joan Heckaman	X	
Senator Oley Larsen (Vice-Chair)	X		Senator Merrill Piepkorn	X	
Senator Howard C. Anderson, Jr.	X				
Senator David A. Clemens	X				
Senator Curt Kreun	X				

Total (Yes) 7 No 0

Absent 0

Floor Assignment \_\_\_\_\_

If the vote is on an amendment, briefly indicate intent:

Date: 4/18 2017

Roll Call Vote #: 2

2017 SENATE STANDING COMMITTEE  
ROLL CALL VOTES

BILL/RESOLUTION NO. 2189

Senate Human Services Committee

Subcommittee

Amendment LC# or Description: M-0726.02001

Recommendation:  Adopt Amendment  
 Do Pass  Do Not Pass  Without Committee Recommendation  
 As Amended  Rerefer to Appropriations  
 Place on Consent Calendar

Other Actions:  Reconsider  \_\_\_\_\_

Motion Made By Sen Heckaman Seconded By Sen Larsen

Senators	Yes	No	Senators	Yes	No
Senator Judy Lee (Chairman)	X		Senator Joan Heckaman	X	
Senator Oley Larsen (Vice-Chair)	X		Senator Merrill Piepkorn	X	
Senator Howard C. Anderson, Jr.	X				
Senator David A. Clemens	X				
Senator Curt Kreun	X				

Total (Yes) 7 No 0

Absent 0

Floor Assignment Sen Larsen

If the vote is on an amendment, briefly indicate intent:

**REPORT OF STANDING COMMITTEE**

**SB 2189: Human Services Committee (Sen. J. Lee, Chairman)** recommends **AMENDMENTS AS FOLLOWS** and when so amended, recommends **DO PASS** (7 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). SB 2189 was placed on the Sixth order on the calendar.

Page 1, line 15, replace "has not been reimbursed" with "is not reimbursable"

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Renumber accordingly

**2017 HOUSE HUMAN SERVICES**

**SB 2189**

# 2017 HOUSE STANDING COMMITTEE MINUTES

**Human Services Committee**  
Fort Union Room, State Capitol

SB 2189  
3/15/2017  
29231

- Subcommittee  
 Conference Committee

Committee Clerk Signature



## Explanation or reason for introduction of bill/resolution:

Relating to the confidentiality of children's advocacy center records; and relating to reimbursement of the cost of forensic interviews and confidentiality of juvenile court records and children's advocacy center records

## Minutes:

1, 2,

Chairman Weisz: Called the committee to order.  
Opened the hearing on SB 2189.

Senator J. Lee

I have been involved with the children's advocacy centers for some time and they are a remarkable entity. They do interviews with children that have been sexually abused and it is challenging work. I have great admiration for everyone that is involved with these forensic interviews.

Introduced SB 2189

Chairman Weisz: Are there questions from the committee?

Chairman Weisz: Is there testimony in support of SB 2189?

2:40

Jonathan Byers, Assistant Attorney General  
(Attachment 1) and also went through the bill

Chairman Weisz: Are there any questions from the committee?

Chairman Weisz: Go back to where you were talking about the cost of the interview. The \$360 is for the testing and the interview?

J. Byers: The \$360 is what Medicaid reimburses for doing a forensic interview. Our fiscal note is incorrect because we had projected about 2000 forensic interviews up from the 3 centers over the course of the biennium, but we only projected that about 40% of those would be reimbursable and it is actually much higher than that. About 75% of the 2000 interviews are reimbursable by Medicaid or other compensation. It is only about 5- 600 that are going to be paid for with this leftover money.

Chairman Weisz: So really about \$180,000 - \$200,000.

J. Byers: Yes, that is just about on the mark.

Chairman Weisz: Ok that clarifies that. Further questions from the committee?

Vice Chairman Rohr: Where you talked about them not having a court order to get the records. Is that without the parent's permission or knowledge?

J. Byers: This provision of the century code allows right now people who are not parties to the case to file a request for the court and then the judge can order that they be released. What we are trying to avoid is each time to have to go make a motion to the court., "Judge we would like to have this record for the therapist that the children's advocacy center. If this provision passes that is in section 2, it would be that they could access the record and there wouldn't be keeping track of which cases they access the records on. You are wondering if the parents would know that they got access to that? No they would not. Nor are the parents advised as to which entities can get them under current law.

Chairman Weisz: Further questions from the committee? Seeing none, thank you.

9:14

Chairman Weisz: Is there further testimony in support of SB 2189?

Anna Frissell, Exe. Dir. Of the Red River Children's Advocacy Center  
(Attachment 2)

20:00

Chairman Weisz: Are there any questions from the committee?

Representative Skroch: I just have a question about sharing of information. I am thinking that when you have a child that has been abuse in that situation and you have them in that setting and you are gathering all the data that maybe they would be a little they freer to give information to the team than they are with their parents. Is that the case?

A Fissell: Of course it would be different with every child and every family. The interviewers that we have are highly trained in this process. They go through a process that allows the child an opportunity to give an account of what happened to them in the way that inflicts the least trauma on the child. It is very difficult for a child to share that with parents what has happened to them. They are allowed to do the interview in whatever form they are most comfortable. This is much easier than trying to tell your parents something that they react to immediately and don't want to hear.

Representative Skroch: Are the parents that are not involved in the abuse still allowed to have access to the interviews that are taped? Would they be able to see that DVD?

A Fissell: In the state of ND children do still have to testify so parents would be able to hear. I don't control who watches that DVD after it leaves our hands. Law enforcement and social services does.

Representative Skroch: Are the parents then able to work with a team that allows them to know how to deal with this whole situation?

A Fissell: Following the interview they are allowed to discuss recommendations and discuss the interview. The noninvolved parents who have come with the child to the interview are invited into the team room and allowed to ask questions. After they leave the center there are advocates that stay in touch with them and may suggest referrals for therapy. Those professionals are part of the team and will share information back.

Chairman Weisz: Further questions from the committee.

Vice Chairman Rohr: If the attorney general's office will cover the 25% are you trending up so that it will run out of money at some point?

A Fissell: Our numbers are trending upwards, but the fund is set up to cover the forensic medical examinations first. We will trend up in medical examinations which means the money will go down for forensic interviews. No one expects the fund to grow. We understand that our job is to provide services within the moneys that we have and this is just going to allow us to access the overage that we have.

Representative McWilliams: What would happen to those funds if they are not accessed?

A Fissell: I don't know that.

Chairman Weisz: Further questions from the committee.

J. Beyer: That money is returned to that insurance regulatory trust fund and then I suppose comes back as part of the \$660,000 for the next biennium. If we use this for those interviews there will just be less of it returned if this bill is passed.

Representative Porter: I want to be clear based on Ms. Fissell's testimony. In section 3 where you talk about the non -accused parent and their access to everything that is in here. Based on her testimony it was talked about a team approach and that the parent is involved in this and even into the actual therapy part of it. And I want to be sure that the non-accused parent is part of this and that they can't be excluded because of what we are setting out as our own little HIPPA kind of thing. It is the forensic exam, interview and to me even more important is the therapy side of it that all of a sudden that parent can be told that they can't participate in that because it is confidential now. I want to be sure that the team approach allows that parent to be inside of this language.

J. Beyer: This will allow discretion on a case by case basis. If it is a non- offending parent that they will be able to see what their purpose for getting the record is. If it is non-offending parent and it looks like they are trying to be sure this child is protected then the children's advocacy center will release as much of the record that they need to deal with their child. We don't want that parent to take the record and go back to the perpetrator.

Representative Porter: Inside of here that record can only go to the whoever the judge says

not the advocacy center. I read this that it is only up to the judge whether that parent can be included.

Representative Porter: I am more looking at it from the child and the therapy component and moving on while the criminal system is standing still with a 2 -year trial date or whatever. Of course the therapy side and the well-being of the child is in a different category. I want that center to be able to release that information to a parent they feel will be in the best interest of the child you don't need a judge to say you can go ahead. Maybe if the word therapy was not in there. To me the therapy is the next step for the kid and their wellbeing.

J. Beyer: Eventually even the charged individual will be allowed to get access to this information.

J. Beyer: So if there was a comma after the word judge would that fix it?

Representative Porter: Yes, that would fix it. I really think that is lacking right now.

Chairman Weisz: We want to be sure that the parents that are non-offenders can be included in all of the therapy, etc.

Chairman Weisz: are there further questions from the committee?

Chairman Weisz: Is there further testimony in support of SB 2189?

An agent with the N D Bureau of Criminal Investigation  
I didn't plan to testify, but I wanted to express how our agency feels that the CAC is very important to what we do around the state. That partnership is a vital part of what we do.

Chairman Weisz: Any questions from the committee?

Chairman Weisz: Is there testimony in opposition? Seeing none we will close the hearing on SB 2189.

# 2017 HOUSE STANDING COMMITTEE MINUTES

**Human Services Committee**  
Fort Union Room, State Capitol

SB 2189  
3/27/2017  
29716

- Subcommittee  
 Conference Committee

Committee Clerk Signature



## Explanation or reason for introduction of bill/resolution:

Relating to the confidentiality of children's advocacy center records; relating to reimbursement of the cost of forensic interviews and confidentiality of juvenile court records and children's advocacy center records.

## Minutes:

1,

Chairman Weisz: Called the committee to order. Opened the discussion on SB 2189. You should have a copy of the amendment.  
(Attachment 1)

Representative Porter: When we heard from the advocacy folks and the people from the attorney general's office and they talked about the team approach and having the therapy and having the not accused parent to be part of that. I just kept reading and the verbiage that they chose would not automatically include the not accused parent inside of that therapy component. I had this amendment drawn up so that if it is a parent that has not been accused they can be part of the treatment and have access to the records.

Representative Porter: I move the amendment.

Chairman Weisz: Ok we have a motion, is there a second?

Vice Chairman Rohr: second

Chairman Weisz: Further discussion on the amendment? Seeing none we will have a voice vote to accept the amendment.

Chairman Weisz voice vote to adopted the amendment carried. Are there any other amendments? If not, I will entertain a motion.

Representative Schneider: I move for a do pass on SB 2189 as amend.

Representative Seibel: Second.

Chairman Weisz: Is there further discussion on SB 2189? Seeing none, the clerk will call the roll for a do pass as amended on SB 2189.

Roll call taken Yes 12 No 1 Absent 1

Chairman Weisz: Ok motion passes. Do I have a volunteer?

Representative Schneider, thank you.

3/27/17 DA

17.0726.03001  
Title.04000

Adopted by the Human Services Committee

March 27, 2017

PROPOSED AMENDMENTS TO ENGROSSED SENATE BILL NO. 2189

Page 2, line 29, after the underscored period insert "This section does not preclude a children's advocacy center from allowing a parent or guardian who is not an accused from discussing and accessing the records and digital media."

Renumber accordingly

Date: 3/27/17  
 Roll Call Vote #: 1

**2017 HOUSE STANDING COMMITTEE  
 ROLL CALL VOTES  
 BILL/RESOLUTION NO. S.B. 2189**

House Human Services Committee

Subcommittee

Amendment LC# or Description: 17.0726.03001  
04000

Recommendation:  Adopt Amendment  
 Do Pass     Do Not Pass     Without Committee Recommendation  
 As Amended     Rerefer to Appropriations  
 Place on Consent Calendar  
 Other Actions:  Reconsider     \_\_\_\_\_

Motion Made By Rep. Portee    Seconded By Rep. Rohr

Representatives	Yes	No	Representatives	Yes	No
Chairman Weisz			Rep. P. Anderson		
Vice Chairman Rohr			Rep. Schneider		
Rep. B. Anderson					
Rep. D. Anderson					
Rep. Damschen					
Rep. Devlin					
Rep. Kiefert					
Rep. McWilliams					
Rep. Porter					
Rep. Seibel					
Rep. Skroch					
Rep. Westlind					

*Vote to adopt the amendment motion carried*

Total (Yes) \_\_\_\_\_ No \_\_\_\_\_

Absent \_\_\_\_\_

Floor Assignment \_\_\_\_\_

If the vote is on an amendment, briefly indicate intent:

Date: 3/27/17  
 Roll Call Vote #: 2

**2017 HOUSE STANDING COMMITTEE  
 ROLL CALL VOTES  
 BILL/RESOLUTION NO. S.B. 189**

House Human Services Committee

Subcommittee

Amendment LC# or Description: \_\_\_\_\_

Recommendation:  Adopt Amendment  
 Do Pass     Do Not Pass     Without Committee Recommendation  
 As Amended     Rerefer to Appropriations  
 Place on Consent Calendar  
 Other Actions:  Reconsider     \_\_\_\_\_

Motion Made By Rep. Schneider Seconded By Rep. Seibel

Representatives	Yes	No	Representatives	Yes	No
Chairman Weisz	✓		Rep. P. Anderson	✓	
Vice Chairman Rohr	✓		Rep. Schneider	✓	
Rep. B. Anderson	ab.				
Rep. D. Anderson	✓				
Rep. Damschen	✓				
Rep. Devlin	✓				
Rep. Kiefert	✓				
Rep. McWilliams		✓			
Rep. Porter	✓				
Rep. Seibel	✓				
Rep. Skroch	✓				
Rep. Westlind	✓				

Total (Yes) 12 No 1

Absent 1

Floor Assignment Rep. Schneider

If the vote is on an amendment, briefly indicate intent:

**REPORT OF STANDING COMMITTEE**

**SB 2189, as engrossed: Human Services Committee (Rep. Weisz, Chairman)** recommends **AMENDMENTS AS FOLLOWS** and when so amended, recommends **DO PASS** (12 YEAS, 1 NAYS, 1 ABSENT AND NOT VOTING). Engrossed SB 2189 was placed on the Sixth order on the calendar.

Page 2, line 29, after the underscored period insert "This section does not preclude a children's advocacy center from allowing a parent or guardian who is not an accused from discussing and accessing the records and digital media."

Renumber accordingly

**2017 CONFERENCE COMMITTEE**

**SB 2189**

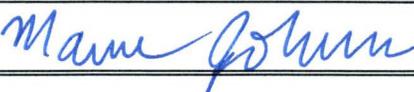
# 2017 SENATE STANDING COMMITTEE MINUTES

Human Services Committee  
Red River Room, State Capitol

SB 2189  
4/5/2017  
Job Number 29954

- Subcommittee  
 Conference Committee

Committee Clerk Signature



## Explanation or reason for introduction of bill/resolution:

Confidentiality of children's advocacy center records; reimbursement of the cost of forensic interviews and confidentiality of juvenile court records and children's advocacy records.

## Minutes:

No attachments

**Chairman Larsen:** Opened the conference committee hearing on SB 2189; all members were present: Senator Larsen, Senator Kreun, Senator Piepkorn; Representative Porter, Representative Dick Anderson, and Representative Pam Anderson.

**Representative Porter:** In the House hearing, we had concerns over the locking down of the actual records; we had a few discussions with the Attorney General staff in regards to the locking down of those records. The testimony talked about why we wanted them locked down and accessible only to certain individuals. Our concern was that we wanted the parent to be able to be part of the therapy, part of their child's treatment, and part of whole system. We didn't see that loophole existing in the way the language was stated. We added it so we could have a discussion on how to make sure when we're locking it down this tight on lines 26-29, how can we be sure that a parent isn't locked out of the process. Right now it's up to the advocacy center to say you can't come in to sit in counseling session. We don't want to exclude parents. We understood about parents being accused, we agreed that their access to the records was through the court system. We wanted to be sure that the non-accused parent could be with the child. There is a component of parental rights that we want to make sure is covered.

**Senator Piepkorn:** I don't see anything in this section that has anything to do with parents sitting in on a session, it's about having access to records and digital media.

**Representative Porter:** We looked at lines 26-27, it includes the words or therapy are confidential, if records and media are confidential from the non-accused parent, we're not sure they can be part of the therapy. We want to be clear that non-accused parent is part of healing process. I don't know if the language is there, but I think the intent of the House is clear, we want to make sure parent is able to access records if they need or want them, but also able to be in on those other areas. To say that you're giving up parental right and not watch the forensic interview, that's stripping away a parental right.

**Senator Piepkorn:** It seems like it's apples and oranges; I don't see this bill has anything to do with that. Can it be addressed in this bill?

**Senator Kreun:** As we go through, I understand, right now it says medical exam, etc. are confidential and may be released only to a person other than a law enforcement agency or the department upon service of a subpoena by a judge; that determines the outside people, but when looking at parents, what happens when the parents are part of the problem, who determines who is the right one to see the information? As you go through this process, quite frequently its one parent or the other, we don't know who's the good parent and who's the bad.

**Representative Dick Anderson:** In line 30, it says 'who is not the accused' doesn't that clarify it?

**Senator Kreun:** What if neither one is accused? And you have a problem, that's where problems originate, most of the time in the home. The determination is difficult.

**Representative Dick Anderson:** But is says agreed upon by a judge. Shouldn't that make a difference?

**Senator Kreun:** The judge is for the law enforcement agency in the service of this subpoena.

**Representative Porter:** You are right, that these are complicated situations. The parent is still the parent, inside of this whole mix I have a hard time stripping away that parental right. I have a hard time just making a blanket statement, I'm not accused of anything, I can't read through my child's medical records. I don't need judge or subpoena what's best for my child. Flipping that, I understand the complexity of these cases, whether it's he said she said, or one abuser, I'm not blind to the fact that these are complex. That's why we stuck that language in there, it's not as simple as painting it all with the same brush. Taking a parental right away is serious. What if a specialist needs the medical records? With this law, they have to go to a judge and get a subpoena. There are other things in play still, part of healing process and therapy. I don't know if the state should have that much power over my rights as a parent.

**Chairman Larsen:** This bill is talking about the interview part, not the therapies; I agree with the parents have the ability to look at that interview, but I don't think the parent can give the data to a specialist.

**Representative Porter:** It says on line 27, 'therapy.'

**Senator Piepkorn:** Lines before that say the records and digital media relating to the forensic exam and interview or therapy are confidential, the records and digital media, I think, it's 2 different things, the bill isn't talking about what you're trying to get at.

**Chairman Larsen:** I agree the parent can look at that, but they can't give it out, I can't take it out of the advocacy center.

**Representative Pam Anderson:** We had a long discussion about this. I agree with Rep. Porter about where we want to get to; but I struggle with out of all the child abuse Red River Advocacy Center has handled, they have only had two cases of stranger abuse. I struggle; I agree the parent should have information if they're not accused, but almost all are family abuse.

**Representative Porter:** I know we're talking about medical records and digital media we are saying that no parent will have a right to this without a judge, we have to be clear on what we're doing and why we're doing it.

**Mr. Jonathan Byers, Attorney General's Office:** You've identified the key items, even non-offending parents have allegiance with the abuser. When it refers to records, if you let a non-offending parent look, you can't control what happens to the records after they leave the advocacy center. Gave an example from the Fargo advocacy center. Without the House amendment, the only thing the parent couldn't have is the records and digital media, they could still participate in the forensic medical exam and therapy; they don't get to have a copy. The directors of the children's advocacy centers felt without the amendment, they still had the power and ability to talk to parents, they don't give them a record. The directors of advocacy centers were ok with it without the House amendment. One concern is that some hospital facility's way to deal with this is to put in on MyChart online, that person will be able to do anything with it.

**Representative Dick Anderson:** Is there a way to review the records and not get control of them?

**Representative Porter:** Gave an example of 911 calls.

**Mr. Byers:** That would be a better option than the way it is now with the House amendment. Children advocacy centers don't think it's necessary to have the parent look at the records; they think they can verbally explain, they can do that without the record, if you think that's necessary, that the parent can look at the document, but not take it, that's preferable to current version.

**Representative Porter:** If I don't think my child is getting the best therapy, or I want a second opinion, there's a lock down that doesn't allow me to move records between providers and professionals. I'm not sold on the fact that I have to have it in my hands. There's no wiggle room to move to another provider.

**Mr. Byers:** I can see in the version without the House amendment, that's the one thing that's an issue, I would say, I'm not sure the forensic medical exam would be things they would have to have to provide therapy. The use of forensic is really to provide a law enforcement function. I don't know they need it to provide therapy.

**Representative Porter:** Inside the 2<sup>nd</sup> opinion, we know the therapies are passable to other professionals, that health care professional may need to see what state that child was in at the time. I disagree that just because it's a forensic interview, doesn't mean it's not relevant for ongoing therapy for child. I get stuck on the child, and what is best for the child, we need a window that doesn't include a judge for that parent to seek what is best for that child.

**Mr. Buyers:** If you insert after 'agent' on line 29 'or subsequent therapist,' that would satisfy that concern without opening a can of worms.

**Representative Porter:** I'm willing to look at anything, I understand your concerns, not everybody has the best intentions.

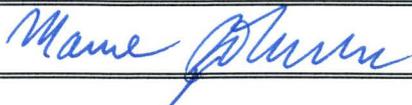
# 2017 SENATE STANDING COMMITTEE MINUTES

Human Services Committee  
Red River Room, State Capitol

SB 2189  
4/7/2017  
Job Number 29986

Subcommittee  
 Conference Committee

Committee Clerk Signature



## Explanation or reason for introduction of bill/resolution:

A bill relating to confidentiality of children's advocacy center records; reimbursement of the cost of forensic interviews and confidentiality of juvenile court records and children's advocacy records.

## Minutes:

2 attachments

**Chairman Larsen:** Opened the conference committee hearing on SB 2189. All members present: Senator Larsen, Senator Kreun, Senator Piepkorn; Representative Porter, Representative Dick Anderson, and Representative Pam Anderson.

**Representative Porter:** On email from Paula Condol, (**please see attachment #1**) there is some proposed language to address, and then there is proposed language from Mr. Byers (**Please see attachment #2**). The language removes line 29, and moves it back into position where if it's another health professional, they would have access to that, so that we aren't interfering with the ongoing treatment of the child, but we are protecting the records for the court case. Mr. Byers worked on this after our meeting the other day. This language fits what we want to accomplish. We don't want to get in the way of the treatment just to protect the records.

**Senator Piepkorn:** Does this come from personal experience?

**Representative Porter:** No, it doesn't come from anybody. As we had the hearing, we take it very seriously when we start locking things up, we don't want to get in between parents' rights and the treatment of the child in the name of locking down something that may or may not belong to them.

**Representative Pam Anderson:** I can support these amendments; I agree with Rep. Porter.

**Senator Kreun:** You can support these?

**Representative Pam Anderson:** Yes.

**Representative Porter:** These are from Mr. Byers in conjunction with the advocacy centers. We understand the locking of the records, that they are part of an ongoing investigation, that they should have level of protection. The ongoing treatment and ability of medical professionals should have access to treat the victim, could warrant their ability to access those records.

**Chairman Larsen:** Has there been testimony or knowledge of therapists requesting forensic data in their intervention, does that exist?

**Representative Porter:** Not that I'm aware of. Based on what we were told, inside this system, anybody can request anything they want; the advocacy center has no power to say no. There hasn't been any body that has had that refused.

**Chairman Larsen:** As this new amendment shows, it does lock parents, it removes lines 30-31?

**Representative Porter:** It does, Mr. Byers reluctantly agrees that these cases are difficult. You could have a submissive parent doing it for an aggressive parent and still have the mess exist, that's why we wanted to limit access to medical and mental health professionals.

**Senator Kreun:** I think I do concur; what it does do, it gives the mental health professional the ability to release or not release records. Some don't exchange information, what their therapies have been, that gives them the ability to retain that.

**Representative Porter:** That's correct, that's inside of their practices act. That's protected in a different area of code.

**Representative Porter:** I move that House recede and amend as follows.

**Senator Kreun:** Second.

**A roll call vote was taken.**

**Motion passes 6-0-0.**

**Senator Larsen and Representative Porter will carry.**

**Chairman Larsen:** Closed the hearing.

CK  
4/7/17

April 7, 2017

PROPOSED AMENDMENTS TO ENGROSSED SENATE BILL NO. 2189

That the House recede from its amendments as printed on page 1024 of the Senate Journal and page 1178 of the House Journal and that Engrossed Senate Bill No. 2189 be amended as follows:

Page 2, line 28, replace the first "or" with an underscored comma

Page 2, line 29, after "agent" insert ", or a medical or mental health professional when the child comes before the medical or mental health professional in that person's professional capacity."

Renumber accordingly

Date: 4/7  
 Roll Call Vote #: 1

**2017 SENATE CONFERENCE COMMITTEE  
 ROLL CALL VOTES**

BILL/RESOLUTION NO. 2189 as (re) engrossed

Senate "Enter committee name" **Committee**

- Action Taken**
- SENATE accede to House Amendments
  - SENATE accede to House Amendments and further amend
  - HOUSE recede from House amendments
  - HOUSE recede from House amendments and amend as follows
  - Unable to agree, recommends that the committee be discharged and a new committee be appointed

Motion Made by: Rep Porter Seconded by: Sen. Kreun

Senators					Representatives				
	4/5	4/7	Yes	No		4/5	4/7	Yes	No
Sen. Larsen	X	X	X		Rep. Porter	X	X	X	
Sen. Kreun	X	X	X		Rep. D. Anderson	X	X	X	
Sen. Piepkorn	X	X	X		Rep. P. Anderson	X	X	X	
Total Senate Vote					Total Rep. Vote				

Vote Count Yes: 6 No: 0 Absent: 0

Senate Carrier Sen. Larsen House Carrier Rep. Porter

LC Number 17.0726 . 03002 of amendment

LC Number 05000 . \_\_\_\_\_ of engrossment

Emergency clause added or deleted  
 Statement of purpose of amendment

Insert LC: 17.0726.03002  
Senate Carrier: Larsen  
House Carrier: Porter

**REPORT OF CONFERENCE COMMITTEE**

**SB 2189, as engrossed:** Your conference committee (Sens. O. Larsen, Kreun, Piepkorn and Reps. Porter, D. Anderson, P. Anderson) recommends that the **HOUSE RECEDE** from the House amendments as printed on SJ page 1024, adopt amendments as follows, and place SB 2189 on the Seventh order:

That the House recede from its amendments as printed on page 1024 of the Senate Journal and page 1178 of the House Journal and that Engrossed Senate Bill No. 2189 be amended as follows:

Page 2, line 28, replace the first "or" with an underscored comma

Page 2, line 29, after "agent" insert ", or a medical or mental health professional when the child comes before the medical or mental health professional in that person's professional capacity."

Renumber accordingly

Engrossed SB 2189 was placed on the Seventh order of business on the calendar.

2017 TESTIMONY

SB 2189

Mr. Chairman and Members of the Committee.

For the record, my name is Paula Condol. I am the Director for the Children's Advocacy Centers of North Dakota. I am here today to ask for your support for Senate Bill 2189.

The Children's Advocacy Centers of North Dakota are committed to improving the response to child abuse. Each CAC is a community partnership that utilizes a comprehensive multidisciplinary team approach in supporting alleged victims and investigations of child abuse. Professionals from social services, law enforcement, prosecution, victim advocacy and the medical and mental health communities meet under one roof so that a child only has to tell of his or her abuse one time. Sensitivity to the needs and abilities of children is the hallmark of the children's advocacy center model which is utilized at over 800 Children's Advocacy Centers, in all 50 states across the country. Including five sites here in North Dakota.

Child abuse happens in North Dakota. In 2016 Children's Advocacy Centers in ND served 2567 people and provided 25,411 services to them. Every year our centers see children that are sexually abused, beaten and threatened. They have witnessed violence and at times been exploited through pornography and trafficking. Children's Advocacy Centers offer environments that are free of intimidation. This welcoming atmosphere makes the situation less stressful for the child and as a result they may be more open to sharing their horrific experiences. Senate Bill 2189 covers three important amendments that we believe will enhance our ability to offer services to those most vulnerable, increase our partnerships to wrap around services for children and provide safeguards for their safety and well-being. Please note that there is a

#1 small amendment to the wording of the bill and that Jon Byers with the Attorney  
1/8 General's Office will speak to this shortly.

In most cases, a child is referred to a children's advocacy center by child protective service or law enforcement for a forensic interview. The forensic interview process is unique because all investigative parties participate in a single interview with the child. A trained forensic interviewer visits with the child in a child-friendly room in a way that is both neutral and legally sound. Law enforcement, prosecution and social services participate in the interview via a closed circuit television. The child only has to see and tell their story to one person, while the team is able to contribute by communicating with the interviewer via an ear-piece or during breaks. The forensic interview is often times the heart of a case. It is the child's statement in an assessment and investigation that provides further evidence and leads. However, because a forensic interview is evidence collection, it is often times not a billable expense. CAC's currently absorb the cost of approximately 25% of forensic interviews because there is no other means to pay. The suggested change to Section 1. Amendment. Subsection 3 of section 12.1-34-07 allows the Attorney General to use any funds left over in the legislative appropriation for evidence collection of sexual assault exams to include CAC forensic interviews of child victims. Each biennium this fund, which was created to pay for evidence collection of victims, has remaining funds left over. This amendment would allow CAC's to bill this fund, at the end of the biennium for any CAC forensic interviews not covered by other means, up to the amount where the fund is depleted. This would not require new money and simply use the money that is remaining in the fund as it was intended – to pay for evidence collection.

The second amendment of the bill involves access to juvenile records. Section 2. Amendment. Subsection 1 of section 27-20-51. The suggested changes to this section allows the CAC's to have access to files and records of the juvenile court, if  
SB2189 - Condol - 2

SB 2189  
#1  
1/18

the juvenile or a victim of the juvenile has received services at a North Dakota CAC. Approximately 40% of all offenders are under the age of 18. This means that we currently do not have access to information that may be beneficial to nearly 1/2 of the victims we work with. Even dispositional information regarding the outcomes of the case is not currently available to CAC's and makes us non-compliant with our accreditation. CAC's now also provide Evidence Based Services to kids with sexual behavior problems ages 7-14. Being able to communicate to juvenile court about their history and progress is instrumental to their successful completion of the program and their reduced risk of recidivism.

I have had the privilege to work with the Children's Advocacy Centers for 16 years now and I have seen and heard many things that a person shouldn't have to experience. I have listened to a 11 year old pregnant child, sat with 5 year old in a body cast, watched an 8 year old shake as she recalled a witnessed murder and seen the wounds of an iron. I have seen children who have had their bones broken and others their spirit and hope. However, I have also seen a child's eyes light up when they realize that you might be able to help them and their smile when they know that they will be okay. I have felt the graciousness of their trust and the huge responsibility of their safety. Children's Advocacy Centers were developed to ensure that children are not further victimized by the systems intended to protect them. These children come to us, often times broken and scared. Some offer their stories to us, with hopes that we as a multidisciplinary team can help them and it's because of this that we are requesting our final amendment to Section 3. A new section to chapter 50-25.1. This suggested change recognizes the confidential nature of the information held at CACs. This provision states that records or evidence in the possession of CACs relating to a forensic medical examination, forensic interview, or therapy are confidential and may be released only to law enforcement or the department or the department's authorized agent unless the CAC is served with a subpoena signed by a judge. The underlying premise of this amendment is

safety. Safety for the child who trusted their story to us and believed we would keep them safe. Safety to the non-offending parent, who stays awake at night worried that their abusive partner, spouse or family member will gain access to the records and take it out on the child or them and safety for the evidence that might be used to hold the offender accountable. Currently CAC records are not considered confidential by state statute and are accessible by parents or guardians, and anyone else they release the information too. We provide our services at the request of, and in coordination with our multidisciplinary team members as part of an assessment and investigation. Their records are confidential, yet our records as part of the same investigation are currently accessible. In 2016 over fifty percent of alleged perpetrators of victims seen at the CAC's were family members. Twenty five percent of alleged perpetrators were parents and if you include their significant others, that number jumps to 31%. As a parent I understand the complexity of wanting my child to be safe while preserving the right to know about their care. CAC's also understand the complicated situations of the families we deal with and work with non-offending caregivers on multiple levels to ensure that they are informed of every step of the process as we can. We visit with them prior to the interview and after the interview to inform them of the process and to talk about what happens next. An advocate visits with them regularly to see how they are doing, updates them on case statuses and provides support and services. During therapy their clinician visits with them at every session to let them know how the child is doing and helps the non-offending caregiver with their trauma. Communication is key to our services. We are not asking to keep parents in the dark, we are asking that their records and our team member's evidence be kept confidential for the child's protection. Nor are we asking to take away rights of alleged offenders. Alleged offenders are already afforded rights through the disclosure process and will still have these rights. In addition judges will still have the authority to release records they deem appropriate. Domestic violence and

sexual assault centers are already afforded this level of confidentiality and we ask the same for our CAC's.

Children's Advocacy Centers in ND play a critical role in ensuring the safety of abused children in our state. A large part of protecting those children relies on us being able to communicate with our Multidisciplinary Team partners and at the same time, protecting that information so that the abuser is unable to misuse this information to further hurt the child. We greatly appreciate the support and confidence the Legislature has in the services we provide. I am the first to wish our centers could close our doors and go out of business, but until we can do so knowing that NO child in North Dakota needs our help, I ask you for your support.

Mr. Chairman and Members of the Committee, thank you for allowing me the opportunity to testify before you today and I will be happy to try and answer any of your questions.

Helping Kids • Rebuilding Lives • Strengthening Communities



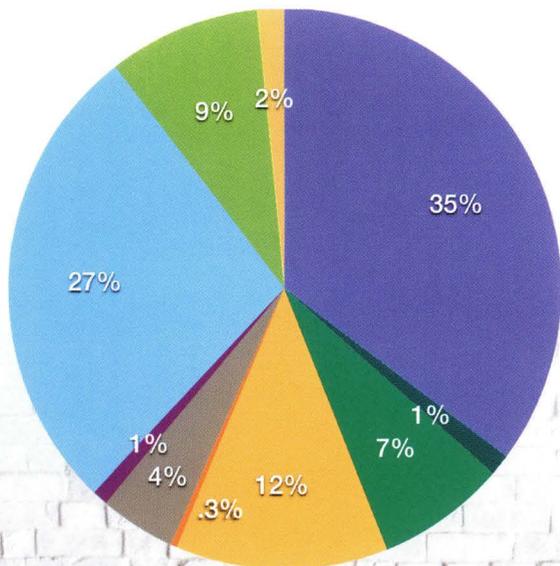
# CHILDREN'S ADVOCACY CENTERS OF NORTH DAKOTA



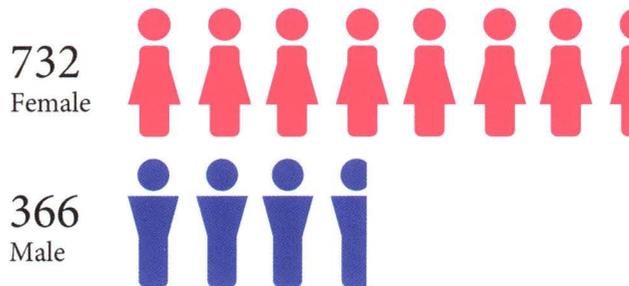
# Statistics

## Alleged Offenders

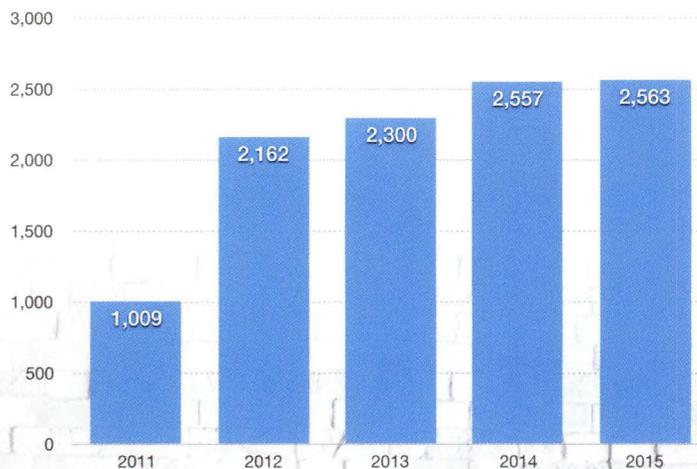
Parent	316
Other Known Person	246
Caregiver's Significant Other	112
Step Parent	80
Grandparent	67
Sibling	40
Unknown	14
Foster Parent	11
Babysitter	8
Stranger	3



## Total Alleged Victims Count

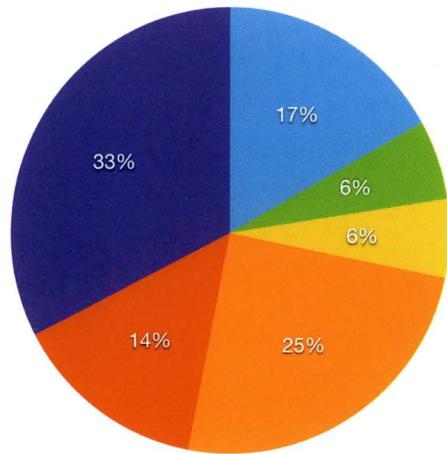


## Total People Served

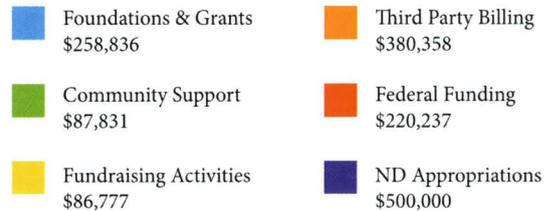


# How We Are Funded

## 2014 Combined Budgets

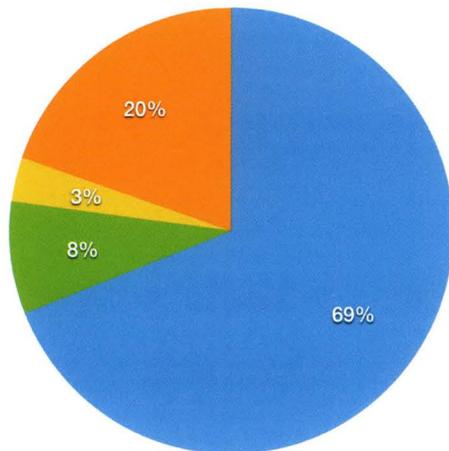


### Revenue



As not-for-profit organizations Children's Advocacy Centers are dependent on the generosity of the communities we serve. Partnerships with the Federal Department of Justice – Victims of Victim Abuse Act, the

North Dakota Department of Human Services – Children and Family Services, community foundations, as well as private corporations and individuals, allows us to serve our state's most vulnerable victims – our children.



### Expenses



To ensure the greatest level of care and protection to abuse survivors, Children's Advocacy Centers offer many direct, personal and on-going services. It is no wonder that

the largest portion of our budget is for direct service personnel while minimizing overhead without diminishing quality of service.

In 2015 the Children's Advocacy Centers of North Dakota administered 15,975 direct service to 2,563 children with a statewide, combined budget of \$1,534,039. That is an amazing average \$598 of care to every victim being served, with each victim receiving, on average, 6 services at \$100/service.

# What We Do



## Our Mission

*CACND supports local communities by promoting and assisting the strategic growth and continuation of Children's Advocacy Centers in North Dakota.*

### **Coordination & Networking:**

CACND plays a key leadership role in linking together CACs throughout North Dakota and with other CACs on Regional and National levels.

### **Community Support & Assessment:**

CACND helps identify needed resources for communities to assess local victim abuse issues and needs, as well as to promote the sustainability of local, regional and statewide CAC services.

### **Mentoring, Education, Training & Technical Assistance:**

CACND promotes and provides for specialized training for multidisciplinary team members, community professionals and agencies in the areas of investigation, prosecution, treatment and prevention of victim abuse. The Chapter also offers NCA n.e.t., which is a national teleconferencing program that offers training, technical assistance and support to the multidisciplinary team several times a month.

### **Building Public Awareness & Policy:**

CACND meets with community, business and political leaders across the state to help educate individuals on the issues of victim abuse, working to develop a cohesive agenda to address victim abuse in our communities.

### **Development & Growth:**

CACND supports the development and growth of CAC services throughout the state by upholding the integrity of the CAC service model, offering peer support and mentoring, and facilitating the strategic growth of services statewide.



**CHILDREN'S  
ADVOCACY  
CENTERS**  
OF NORTH DAKOTA

200 E. Main St #301  
Bismarck, ND 58501  
(701) 323-5626  
cacnd.org

# Who We Are

## **The Children's Advocacy Centers of North Dakota**

(CACND) is a network of Children's Advocacy Centers (CACs) working to ensure that every child and adolescent in North Dakota alleged to be a victim of abuse has access to a multidisciplinary team approach to investigation, treatment and care in a safe, family focused environment.

## **A Children's Advocacy**

**Center** (CAC) is a victim-focused, community-oriented, safe facility in which members of a multidisciplinary team (MDT), including victim protection, social services, law enforcement, prosecution, victim advocacy and the medical and mental health communities, work together to provide a comprehensive, coordinated and compassionate investigation and intervention of victim abuse allegations.

## **National Children's Alliance Accredited Members**

The National Children's Alliance is a nation-wide not-for-profit membership organization whose purpose is to empower local communities to provide comprehensive, coordinated and compassionate services to victims of victim abuse. The NCA accredits Children Advocacy Centers based on nationally recognized standards.

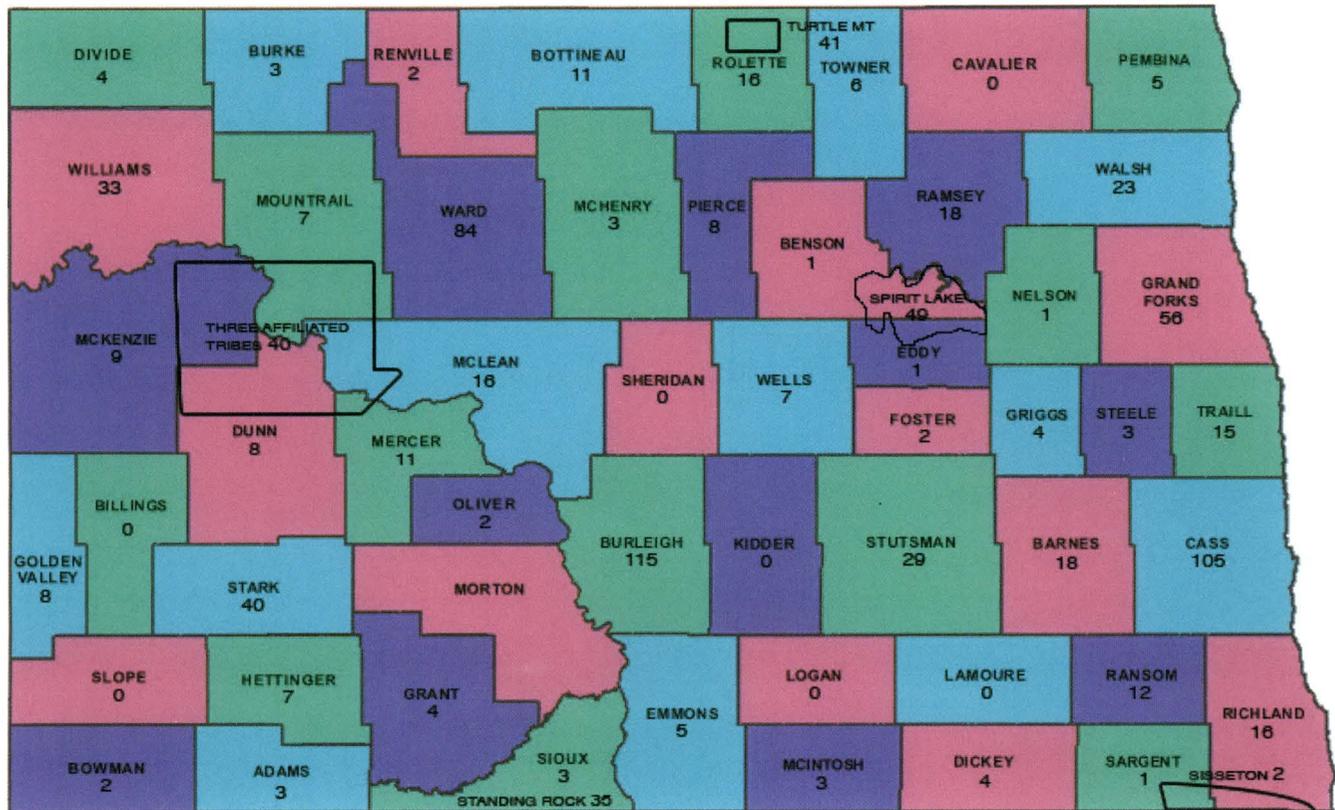


NATIONAL  
CHILDREN'S  
ALLIANCE®



# Where We Serve

## Children Served by County & Reservation in 2015

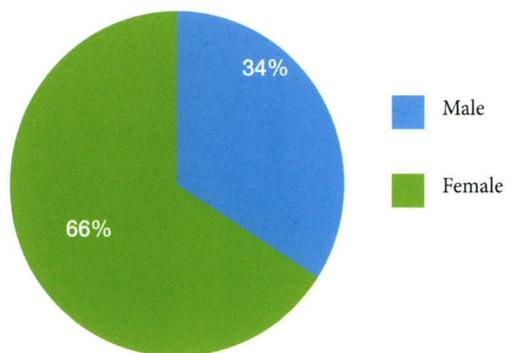


The Children's Advocacy Centers of North Dakota serve the children and adolescents of all 53 Counties and 5 Reservations in our state and are an integral part of each county's ability to respond to victim abuse allegations and to provide essential services needed to ensure

the health and wellbeing of North Dakota's suspected victim abuse victims. Each Center coordinates investigations and provides medical exams, interviews and mental health support to victims who are referred to them when there are allegations of victim abuse.



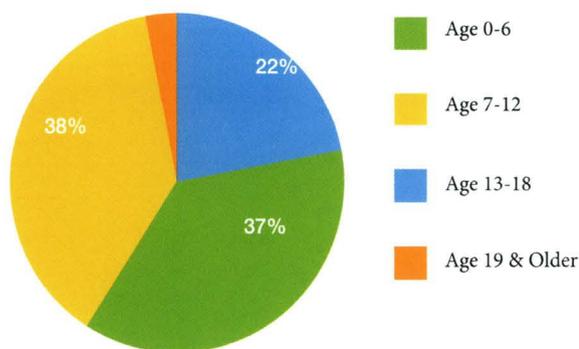
# Who We Serve



## Gender

One out of every four girls and one out of every six boys will be sexually abused before they reach age 18. This means there are over 42 million adult survivors of victim sexual abuse.

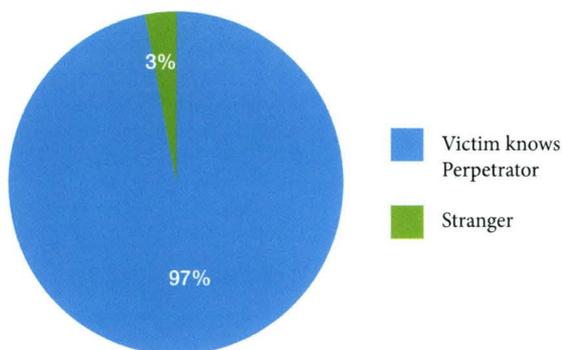
2,563 people  
Served in 2015



## Age

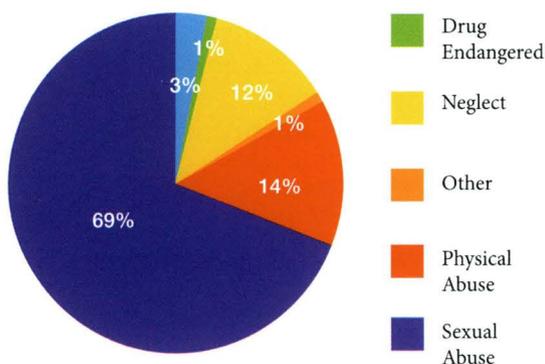
Though victim abuse affects children of all ages, the majority of children seen at the Children's Advocacy Center throughout North Dakota are under the age of 9.

Over 15,975  
services offered  
in 2015



## Children Who Know Their Offender

In most cases, the dangers to children are not from strangers, they are from someone the parent or victim knows, and someone who is often trusted by the victim and family. Over 90% of children know the person who abused them. In 2015, 98% of children seen in our CACs knew the perpetrator.



## Survivors of Abuse & Neglect

The majority of cases seen at the CACs in North Dakota involve an allegation of sexual abuse. In fact, more than one in ten of all substantiated victim abuse and neglect referrals to social service agencies nationwide are victims of sexual abuse.

# Our History



Children's Advocacy Centers were established in the 1980's to coordinate the individuals and agencies involved in the investigation, prosecution and treatment of abuse cases and provide support for the victim and their non-offending family members.

Prior to the CAC model, professionals from the social services, investigative, legal and medical systems would interview the separately and repeatedly in police stations and other environments designed for adults. Many times these interviews were done solely to meet the diverse and

conflicting requirements of the agencies involved, rather than the needs of the victim. Successful prosecution was rare. The victims seldom received the support and treatment needed.

The heart of the Children's Advocacy Center is a multidisciplinary team

made up of six core disciplines: social services, law enforcement, medical, prosecution, advocacy and mental health, who strive together to make the process as comfortable and helpful as possible for the victim.

## North Dakota History

1991: Task Force created in Fargo to identify how to best serve sexually abused children

1996: Task Force created in Bismarck to identify how to best serve sexually abused children

1997: Dakota Children's Advocacy Center established in Bismarck in partnership with Medcenter One

1998: Dakota CAC becomes a Full Member of the National Children's Alliance

2002: Task Force created in Fargo to start a CAC

2004: Red River CAC becomes an Associate Member of the National Children's Alliance State. Chapter of the National Children's Alliance formed

2005: Legislation passes that defines a Children's Advocacy Center and state funding is granted.

2006: Task Force created in Minot.

Red River CAC becomes an Accredited Member of the National Children's Alliance

2007: Northern Plains CAC becomes an Associate Member of the National Children's Alliance

2010: Children's Advocacy Centers of North Dakota hires its first full-time Coordinator  
CACND registers as a Nonprofit 501(c)(3) Corporation

2011: Northern Plains CAC becomes an Accredited Member of the National Children's Alliance  
Red River CAC gains Re-accreditation with the National Children's Alliance

2012: CACND becomes an Accredited Chapter of the National Children's Alliance

2015: CAC Rebrands

# What We Provide

Attention to the needs and abilities of children is the hallmark of the Children's Advocacy Center model to ensure that children and adolescents are not further victimized by the systems intended to protect them. From the initial allegation of abuse, the Multidisciplinary Team approach allows the child an opportunity to talk with a single interviewer in a safe neutral setting, thus protecting the victim from being unnecessarily interviewed by multiple people from each specific field. If abuse is suspected, the team continues to work together to guide the investigation, treatment, management and possible prosecution of the case to ensure the greatest level of protection and care for the youth and his/her family.

## Our Vision

*Every victim in North Dakota alleged to be a victim having access to a Children's Advocacy Center for investigation and intervention.*

## Forensic Interviews

Specially trained Forensic Interviewers work with the MDT to ensure victims are not interviewed unnecessarily and allow them to do so in a safe, legally sound and neutral setting.

## Family Advocacy

Advocacy focuses on the needs of the youth and non-offending caregiver(s), providing needed support and information along with a compassionate, listening ear.

## Medical Evaluation

Specialized medical evaluations are offered to ensure the health and safety of each victim, identify any evidence of abuse, and refer for additional care as needed.

## Mental Health Care

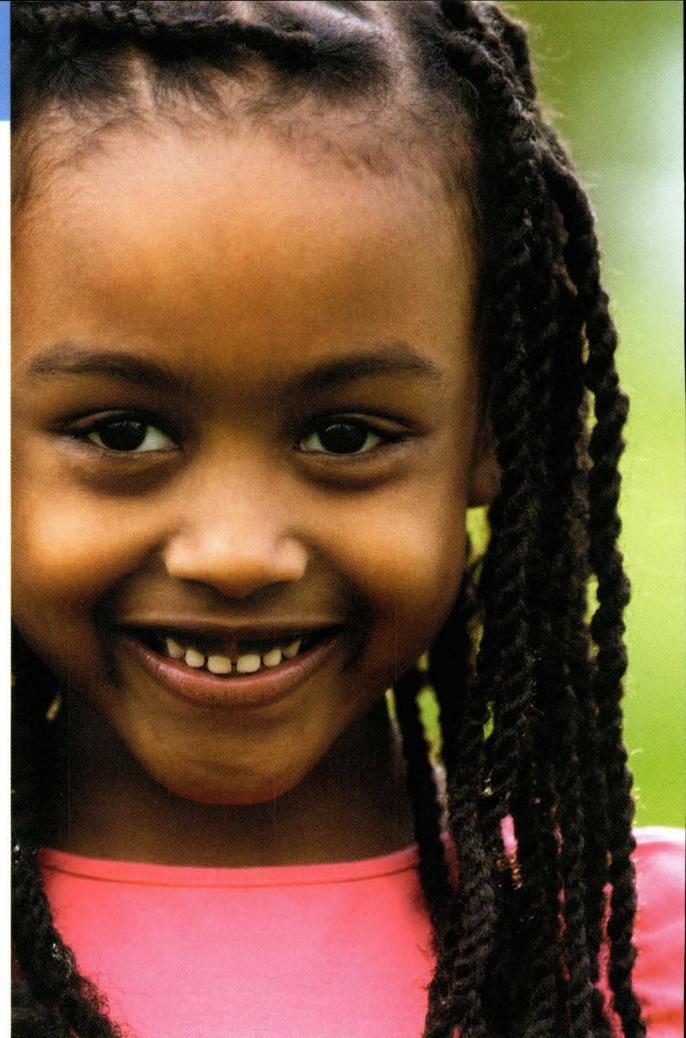
Specialized trauma-focused mental health services are offered to the victim and family to help them cope with the trauma and to assist them through the healing process.

## Case Review And Tracking

MDT members meet regularly to share information and make decisions regarding the investigation, possible prosecution, and ongoing care of the victim and family.

## Prevention And Education

CAC's provide a vital community service by offering prevention, education and community awareness presentations on relevant and vital safety issues.



## Our Values

*The CAC model and NCA Standards of Accreditation*

- Multidisciplinary Teams
- Cultural Competency
- Forensic Interviews
- Family-Victim Advocacy
- Medical Evaluations
- Therapeutic Intervention
- Case Review
- Case Tracking
- Victim Appropriate & Friendly
- Organizational Capacity
- Vibrant Membership
- Training & Technical Assistance



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SB 2189  
Attach #3  
1/18

SENATE HUMAN SERVICES COMMITTEE  
JANUARY 18TH, 2017

TESTIMONY OF JONATHAN BYERS  
OFFICE OF ATTORNEY GENERAL  
SENATE BILL NO. 2189

Mr. Chairman, members of the Committee.

I am Jonathan Byers, Assistant Attorney General, and I appear on behalf of the Attorney General. I testify in favor of Senate Bill 2189.

I helped draft this legislation at the request of the children's advocacy centers of North Dakota. The language in section 1 provides for reimbursement of forensic interviews from any unexpended money in the fund used to reimburse forensic medical exams. This is money that comes from the insurance regulatory trust fund and is not general fund money. I have attached some proposed amendments to the bill draft, one of which applies here. I would like to replace "has not been reimbursed" to "is not reimbursable." This would make sure that the children's advocacy centers only receive reimbursement for forensic interviews that can't be paid for any other way.

The amendment in section 2 allows the children's advocacy centers to access juvenile court records to find out what happens to the cases where kids have received services at the "CAC."

The amendment in section 3 deals with access to the records in possession of the children's advocacy centers. I suggest two changes to the bill draft. First, to replace "evidence" with "digital media," which is a correction suggested by law enforcement. Second, to replace "social service agency" with "the department or the department's

authorized agent.” This would make the language consistent with the rest of the child abuse and neglect chapter.

The Attorney General asks for a do pass. I would be happy to answer any questions.

SB 2189  
#3  
1/18

PROPOSED AMENDMENTS TO SENATE BILL NO. 2189

Page 1, line 15, replace "has not been reimbursed" with "is not reimbursable"

Page 2, line 26, replace "evidence" with "digital media"

Page 2, line 28, replace "social service agency" with "the department or the department's authorized agent"

Renumber accordingly

Att. 1  
SB 2189  
3/15/17

HOUSE HUMAN SERVICES COMMITTEE  
MARCH 15TH, 2017

TESTIMONY OF JONATHAN BYERS  
OFFICE OF ATTORNEY GENERAL  
ENGROSSED SENATE BILL NO. 2189

Mr. Chairman, members of the Committee.

I am Jonathan Byers, Assistant Attorney General, and I wish to submit written testimony in favor of Engrossed Senate Bill 2189.

I helped draft this legislation at the request of the children's advocacy centers of North Dakota. The language in section 1 provides for reimbursement of forensic interviews from any unexpended money in the fund used to reimburse forensic medical exams. **This is money that comes from the insurance regulatory trust fund and is not general fund money.** An amendment in the Senate committee replaced "has not been reimbursed" with "is not reimbursable." This ensures that the children's advocacy centers only receive reimbursement for forensic interviews that can't be paid for any other way. I believe the projected costs in the fiscal note are an overestimate, due to its preparation before the senate amendment, and the approximately \$230,000 left in the fund will cover the costs of the forensic interviews that are not reimbursable from other sources.

The amendment in section 2 allows the children's advocacy centers to access juvenile court records to find out what happens to the cases where kids have received services at the "CAC."

The amendment in section 3 deals with access to the records in possession of the children's advocacy centers. A suspect's access to CAC records should be governed by the criminal discovery rules and should not be unfettered during the time that the investigation is still ongoing.

The Attorney General asks for a do pass. I would be happy to answer any questions.

att. 2  
SB2189  
3-15-17

Chairman and Members of the Committee.

My name is Anna Frissell. I am the Executive Director of the Red River Children's Advocacy Centers serving Fargo and Grand Forks. I am here today to ask for your support for Senate Bill 2189.

The Children's Advocacy Centers of North Dakota ("CAC") are committed to improving the response to child abuse. Each CAC is a community partnership that utilizes a comprehensive multidisciplinary team approach in supporting alleged victims and investigations of child abuse. Professionals from social services, law enforcement, prosecution, victim advocacy and the medical and mental health communities meet under one roof so that a child only has to tell of his or her abuse one time. Sensitivity to the needs and abilities of children is the hallmark of the model which is utilized at over 800 Children's Advocacy Centers, in all 50 states across the country, including five sites here in North Dakota.

Child abuse happens in North Dakota. In 2016 Children's Advocacy Centers of North Dakota served 2567 people and provided 25,411 services to them. Every year our Centers see children that are sexually abused, beaten and threatened. They have witnessed violence and at times been exploited through pornography and trafficking. Children's Advocacy Centers offer environments that are free of intimidation. This welcoming atmosphere makes the situation less stressful for the child and as a result they may be more open to sharing their horrific experiences.

Senate Bill 2189 covers **three important amendments** that we believe will enhance our ability to offer services to those most vulnerable, increase our partnerships to wrap around services for children and provide safeguards for their safety and well-being:

1. The first suggested change is to Subsection 3 of Section 12.1-34-07, NDCC. In most cases, a child is referred to a Children's Advocacy Center by child protective service or law enforcement for a forensic interview. The forensic interview process is unique because all investigative parties participate in a single interview with the child. A trained forensic interviewer visits with the child

in a child-friendly room in a way that is both neutral and legally sound. Law enforcement, prosecution and social services participate in the interview via a closed circuit television. It minimizes the times that a child has to tell their account of what happened to them and the team is participating and able to contribute by communicating with the interviewer via an ear-piece or during breaks.

The forensic interview is often times the heart of a case. It is the child's statement in the assessment and investigation process that often forms the foundation for the criminal case and begins the journey toward trauma treatment for the child. However, because a forensic interview is evidence collection, it is often times not a reimbursable expense. Two of the CAC's in ND do bill for services but currently must absorb the cost of approximately 25% of forensic interviews because there is no way to recover the costs.

The suggested change allows the Attorney General to use any funds left over in the legislative appropriation for evidence collection of sexual assault exams to include CAC forensic interviews of child victims. Each biennium this fund, which was created to pay for evidence collection of victims, has remaining funds left over. This amendment would allow CAC's to bill this fund, at the end of the biennium for any CAC forensic interviews not covered by other means, up to the amount where the fund is depleted. This would not require new money and simply use the money that is remaining in the fund as it was intended – to pay for evidence collection.

2. The second proposed amendment is an addition to Subsection 1 of Section 27-20-51, NDCC. The suggested addition allows the CAC's to have access to files and records of the juvenile court, if the juvenile or a victim of the juvenile has received services at a North Dakota CAC. Approximately 40% of all offenders are under the age of 18. This means that we currently have a difficult time getting access to information that may be beneficial to nearly ½ of the victims we work with. Even dispositional information regarding the outcomes of the case is not currently easily accessible to CAC's. CAC's now also provide evidence based services to kids seven to fourteen years of age with sexual behavior problems and this information should be communicated to juvenile court. The information about their history and progress supports their successful completion of therapeutic programming and their reduced risk of recidivism.

3. Finally, we have requested a new section be added to Chapter 50-25.1, NDCC.

Children's Advocacy Centers were developed to ensure that children are not further victimized by the systems intended to protect them. These children come to us, often times broken and scared. Some offer their stories to us, with hopes that we as a multidisciplinary team can help them, and it is because of this trust that we are requesting our final amendment in Section 3. This suggested change recognizes the confidential nature of the information held at CACs. This provision states that records or evidence in the possession of CACs relating to a forensic medical examination, forensic interview, or therapy are confidential and may be released only to law enforcement or the department or the department's authorized agent unless the CAC is served with a subpoena signed by a judge.

The underlying premise of this amendment is safety: Safety for the child who trusted their story to us and believed we would keep them safe; Safety for the non-offending parent, who stays awake at night worried that their abusive partner, spouse or family member will gain access to the records and take it out on the child or them, and; Safe preservation of the evidence that might be used to hold the offender accountable.

Currently, CAC records are not considered confidential by state statute and are accessible to parents or guardians, and anyone else they release the information too. We provide our services at the request of, and in coordination with our multidisciplinary team members as part of an assessment and investigation. Their records are confidential, yet our records, as part of the same investigation, are currently accessible.

In 2016, over fifty percent of alleged perpetrators of victims seen at the CAC's were family members. Twenty five percent of alleged perpetrators were parents and if you include their significant others, that number jumps to 31%. As a parent I understand the conflict of wanting my child and their confidential information to be safe while preserving the right to know about their care.

CAC's also understand the complicated situations of the families we deal with and work with non-offending caregivers on multiple levels to ensure that they are as informed of every step of the process as they can be given the information we have. We visit with them prior to the interview and after the interview to inform them of the process and to talk about what happens

next. An advocate visits with them to see how they are doing, updates them on case statuses and provides support and services. During therapy their clinician visits with them to let them know how the child is doing and helps the non-offending caregiver with their own trauma. We recognize that communication is key to the successful delivery of our services. We are not asking to keep parents in the dark. Rather, we are asking that the records and our team member's evidence be kept confidential for the child's protection.

Nor are we asking to take away rights of alleged offenders. Alleged offenders are already afforded rights through the disclosure process and will still have these rights. In addition judges will still have the authority to release records they deem appropriate. Domestic violence and sexual assault centers are already afforded this level of confidentiality and we ask the same for our CAC's.

Children's Advocacy Centers in ND play a critical role in ensuring the safety of abused children in North Dakota. In order to protect children, it is imperative that we are able to communicate with our multidisciplinary team partners and at the same time, protect the information so that the alleged abuser is unable to misuse this information to further hurt the child. We greatly appreciate the support and confidence the Legislature has in the services we provide.

Chairman and Members of the Committee. Thank you for allowing me the opportunity to testify before you today and I will be happy to try and answer your questions.

Att. 1 SB2189  
3/27/17

PREPARED FOR THE HOUSE HEALTH AND HUMAN SERVICES COMMITTEE

DRAFT AMENDMENTS TO SENATE BILL 2189

Page 2, line 29 after the underscored period insert "This section does not preclude a children's advocacy center from allowing a parent or guardian who has not been accused from discussing and accessing the records and digital media."

SB 2189  
#1  
4/7

**Porter, Todd K.**

**From:** Condol, Paula <Paula.Condol@SanfordHealth.org>  
**Sent:** Friday, April 7, 2017 9:00 AM  
**To:** Byers, Jon R.; Porter, Todd K.; Larsen, Oley L.  
**Cc:** Baker, Marlys A.; Anna Frissell (annarrcac@yahoo.com); Lee, Judy E.; Christal Warren  
**Subject:** SB 2189 RE: 125.01 - Legislation

**CAUTION:** This email originated from an outside source. Do not click links or open attachments unless you know they are safe.

Hi everyone.

First let me thank you for all the work you have been doing on this bill that is very important to the work with the children we see. It may impact their lives in very significant ways and I want to be cognizant that we impact them in the right way.

Although I do agree with the premise of some of the discussions surrounding the bill regarding access for medical and mental health providers, I do have lots of concerns about the changes suggested yesterday. I would like to propose some new wording for that. Know that I have spoken with Jon Byers and our board chair, Anna Frissell, and we are all on the same page. Jon is currently traveling to a meeting and will reach out to you all this afternoon.

We all agree that if a child is seen at the CAC and there are medical reasons for their doctor to know information, we want them to have that. For instance a child tests positive for an STD. Their doctor needs to know that so they have the ability to treat them. The same with a mental health provider. In order to provide treatment they may want to know what the child is struggling with.

However the concern is that neither of these providers need carte blanche access to these records and we strongly feel that no one, other than law enforcement and the Dept., needs access to the forensic interview. The forensic interview is a piece of evidence in a case or assessment. Neither medical or mental health providers have access this is information in any other type of case. It is a child's statement and needs to be protected both for the fidelity of that evidence and for the sake of the child's safety and wellbeing. Imagine your worst sexual experience being documented and floating around to all of these agency files. It isn't okay. Additionally mental health providers certainly don't need copies of medical exams and vice versa. When needed, and for the purposes of continuity of care, we do currently provide a verbal summary to both medical and mental health providers of the interview so that they can provide the best services to that child. Both entities have been very happy with this process and we have not had any provider state that they want anything additional.

Because of these issues this is what I would suggest. (I believe Jon will review and make edits to the language if need be).

**Records and digital media in the possession of a children's advocacy center relating to a forensic medical examination, forensic interview, or therapy are confidential and may be released only to a person other than a law enforcement agency or the department or the department's authorized agent upon service of a subpoena signed by a judge .** For the purposes of continuity of care a children's advocacy center may release medical records to a medical provider and mental health records to a mental health provider. A verbal summary of a forensic interview may be provided to medical and mental health providers for the purposes of treatment.

2189  
#1  
4/7

I hope that this change eases everyone's concerns. I believe all of our goals are to provide the best possible services and safety to these child and again I appreciate your work on this. I would be happy to come up today and address any other concerns to the committee.

Paula Condol 202-7073

Paula Condol, Director



Dakota Children's  
Advocacy Center  
SANFORD  
HEALTH

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**From:** Byers, Jon R. [mailto:jbyers@nd.gov]  
**Sent:** Thursday, April 06, 2017 4:32 PM  
**To:** Porter, Todd K.; Larsen, Oley L.  
**Cc:** Baker, Marlys A.; Condol, Paula  
**Subject:** [EXTERNAL] 125.01 - Legislation

Here is some language that may provide a fix for the problem that Representative Porter identified with the child coming before a subsequent therapist or doctor, while avoiding the other issues I talked about at the conference committee.

Your conference committee clerk will have to put this in the correct format.

Jon Byers  
Assistant Attorney General  
328-4183

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SB2189  
#2  
4/7

PROPOSED AMENDMENTS TO ENGROSSED SENATE BILL NO. 2189  
With House Amendments

Page 2, line 28, after "agency" replace "or" with an underlined comma

Page 2, line 29, after "agent" insert ", or a medical or mental health professional when the child comes before the medical or mental health professional in that person's professional capacity."

Page 2, line 29, remove "This section"

Page 2, remove lines 30 and 31

Renumber accordingly