

STRONGER CHILD ABUSE PREVENTION AND TREATMENT  
 ACT

MAY 20, 2019.—Committed to the Committee of the Whole House on the State of  
 the Union and ordered to be printed

Mr. SCOTT of Virginia, from the Committee on Education and  
 Labor, submitted the following

R E P O R T

[To accompany H.R. 2480]

[Including cost estimate of the Congressional Budget Office]

The Committee on Education and Labor, to whom was referred  
 the bill (H.R. 2480) to reauthorize the Child Abuse Prevention and  
 Treatment Act, and for other purposes, having considered the  
 same, report favorably thereon with an amendment and rec-  
 ommend that the bill as amended do pass.

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The amendment is as follows:  
 Strike all after the enacting clause and insert the following:

**SECTION 1. SHORT TITLE.**

This Act may be cited as the “Stronger Child Abuse Prevention and Treatment Act”.

**SEC. 2. TABLE OF CONTENTS.**

The table of contents of this Act is as follows:

- Sec. 1. Short title.  
Sec. 2. Table of contents.

**TITLE I—GENERAL PROGRAM**

- Sec. 101. Repeal of findings.  
Sec. 102. Repeal of Advisory Board on Child Abuse and Neglect.  
Sec. 103. National clearinghouse for information relating to child abuse.  
Sec. 104. Research and assistance activities.  
Sec. 105. Grants to States, Indian Tribes or tribal organizations, and public or private agencies and organizations.  
Sec. 106. Grants to States for child abuse or neglect prevention and treatment programs.  
Sec. 107. Miscellaneous requirements.  
Sec. 108. Reports.  
Sec. 109. Authorization of appropriations.  
Sec. 110. Electronic interstate data exchange system.  
Sec. 111. Technical and conforming amendments.

**TITLE II—COMMUNITY-BASED GRANTS FOR THE PREVENTION OF CHILD ABUSE AND NEGLECT**

- Sec. 201. Purpose and authority.  
Sec. 202. Eligibility.  
Sec. 203. Amount of grant.  
Sec. 204. Application.  
Sec. 205. Local program requirements.  
Sec. 206. Performance measures.  
Sec. 207. National network for community-based family resource programs.  
Sec. 208. Definitions.  
Sec. 209. Rule of construction.  
Sec. 210. Authorization of appropriations.  
Sec. 211. Study and report.

**TITLE III—ADOPTION OPPORTUNITIES**

- Sec. 301. Purpose.  
Sec. 302. Report and guidance on unregulated custody transfers.  
Sec. 303. Information and services.  
Sec. 304. Study and report on successful adoptions.  
Sec. 305. Authorization of appropriations.

**TITLE I—GENERAL PROGRAM****SEC. 101. REPEAL OF FINDINGS.**

Section 2 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5101 note) is repealed.

**SEC. 102. REPEAL OF ADVISORY BOARD ON CHILD ABUSE AND NEGLECT.**

Section 102 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5102) is repealed.

**SEC. 103. NATIONAL CLEARINGHOUSE FOR INFORMATION RELATING TO CHILD ABUSE.**

Section 103 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5104) is amended—

(1) in subsection (b)(1), by inserting “early learning programs and” after “including”;

(2) in subsection (c)(1)(C)—

(A) in clause (iii), by striking “and” at the end;

(B) in clause (iv), by adding “and” at the end; and

(C) by adding at the end the following:

“(v) the number of child fatalities and near fatalities due to maltreatment, as reported by States in accordance with the uniform standards established pursuant to subsection (d), and any other relevant information related to such fatalities;” and

(3) by adding at the end the following:

“(d) UNIFORM STANDARDS FOR TRACKING AND REPORTING OF CHILD FATALITIES RESULTING FROM MALTREATMENT.—

“(1) REGULATIONS REQUIRED.—Not later than 24 months after the date of the enactment of the Stronger Child Abuse Prevention and Treatment Act, the Secretary shall develop and issue final regulations establishing uniform standards for the tracking and reporting of child fatalities and near-fatalities resulting from maltreatment. As a condition on eligibility for receipt of funds under section 106, the standards established under this paragraph shall be used by

States for the tracking and reporting of such fatalities under subsection (d) of such section.

“(2) MAINTENANCE OF STATE LAW.—Notwithstanding the uniform standards developed under paragraph (1), a State that defines or describes such fatalities for any purpose other than tracking and reporting under this subsection may continue to use that definition or description for such purpose.

“(3) NEGOTIATED RULEMAKING.—In developing regulations under paragraph (1), the Secretary shall submit such regulations to a negotiated rulemaking process, which shall include the participants described in paragraph (4).

“(4) PARTICIPANTS DESCRIBED.—The participants described in this paragraph are—

“(A) State and county officials responsible for administering the State plans under this Act and parts B and E of title IV of the Social Security Act (42 U.S.C. 621 et seq., 670 et seq.);

“(B) child welfare professionals with field experience;

“(C) child welfare researchers;

“(D) domestic violence researchers;

“(E) domestic violence professionals;

“(F) child development professionals;

“(G) mental health professionals;

“(H) pediatric emergency medicine physicians;

“(I) child abuse pediatricians, as certified by the American Board of Pediatrics, who specialize in treating victims of child abuse;

“(J) forensic pathologists;

“(K) public health administrators;

“(L) public health researchers;

“(M) law enforcement;

“(N) family court judges;

“(O) prosecutors;

“(P) medical examiners and coroners;

“(Q) a representative from the National Center for Fatality Review and Prevention; and

“(R) such other individuals and entities as the Secretary determines to be appropriate.”

#### SEC. 104. RESEARCH AND ASSISTANCE ACTIVITIES.

Section 104 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5105) is amended—

(1) in subsection (a)—

(A) by amending paragraph (1) to read as follows:

“(1) TOPICS.—The Secretary shall, in consultation with other Federal agencies and recognized experts in the field, carry out a continuing interdisciplinary program of research, including longitudinal research, that is designed to provide information needed to improve primary prevention of child abuse and neglect, better protect children from child abuse or neglect, and improve the well-being of victims of child abuse or neglect, with at least a portion of such research being field initiated. Such research program may focus on—

“(A) disseminating evidence-based treatment directed to individuals and families experiencing trauma due to child abuse and neglect, including efforts to improve the scalability of the treatments and programs being researched;

“(B) developing a set of evidence-based approaches to support child and family well-being and developing ways to identify, relieve, and mitigate stressors affecting families in rural, urban, and suburban communities;

“(C) establishing methods to promote racial equity in the child welfare system, including a focus on how neglect is defined, how services are provided, and the unique impact on Native American, Alaska Native, and Native Hawaiian communities;

“(D) improving service delivery or outcomes for child welfare service agencies engaged with families experiencing domestic violence, substance use disorder, or other complex needs;

“(E) the extent to which the number of unsubstantiated, unfounded, and false reported cases of child abuse or neglect have contributed to the inability of a State to respond effectively to serious cases of child abuse or neglect;

“(F) the extent to which the lack of adequate resources and the lack of adequate professional development of individuals required by law to report suspected cases of child abuse and neglect have contributed to the inability of a State to respond effectively to serious cases of child abuse and neglect;

“(G) the extent to which unsubstantiated reports return as more serious cases of child abuse or neglect;

“(H) the incidence and outcomes of child abuse and neglect allegations reported within the context of divorce, custody, or other family court proceedings, and the interaction between family courts and the child protective services system;

“(I) the information on the national incidence of child abuse and neglect specified in clauses (i) through (xi) of subparagraph (J); and

“(J) the national incidence of child abuse and neglect, including—

“(i) the extent to which incidents of child abuse and neglect are increasing or decreasing in number and severity;

“(ii) the incidence of substantiated and unsubstantiated reported child abuse and neglect cases;

“(iii) the number of substantiated cases that result in a judicial finding of child abuse or neglect or related criminal court convictions;

“(iv) the extent to which the number of unsubstantiated, unfounded and false reported cases of child abuse or neglect have contributed to the inability of a State to respond effectively to serious cases of child abuse or neglect;

“(v) the extent to which the lack of adequate resources and the lack of adequate education of individuals required by law to report suspected cases of child abuse and neglect have contributed to the inability of a State to respond effectively to serious cases of child abuse and neglect;

“(vi) the number of unsubstantiated, false, or unfounded reports that have resulted in a child being placed in substitute care, and the duration of such placement;

“(vii) the extent to which unsubstantiated reports return as more serious cases of child abuse or neglect;

“(viii) the incidence and prevalence of physical, sexual, and emotional abuse and physical and emotional neglect in substitute care;

“(ix) the incidence and prevalence of child maltreatment by a wide array of demographic characteristics such as age, sex, race, family structure, household relationship (including the living arrangement of the resident parent and family size), school enrollment and education attainment, disability, grandparents as caregivers, labor force status, work status in previous year, and income in previous year;

“(x) the extent to which reports of suspected or known instances of child abuse or neglect involving a potential combination of jurisdictions, such as intrastate, interstate, Federal-State, and State-Tribal, are being screened out solely on the basis of the cross-jurisdictional complications; and

“(xi) the incidence and outcomes of child abuse and neglect allegations reported within the context of divorce, custody, or other family court proceedings, and the interaction between family courts and the child protective services system.”;

(B) in paragraph (2), by striking “paragraph (1)(O)” and inserting “paragraph (1)(J)”;

(C) by amending paragraph (3) to read as follows:

“(3) REPORTING REQUIREMENTS.—

“(A) IN GENERAL.—Not later than 4 years after the date of the enactment of the Stronger Child Abuse Prevention and Treatment Act, the Secretary shall prepare and submit to the Committee on Education and Labor of the House of Representatives and the Committee on Health, Education, Labor and Pensions of the Senate a report that contains the results of the research conducted under paragraph (2).

“(B) NATIONAL INCIDENCE.—The Secretary shall ensure that research conducted, and data collected, under paragraph (1)(J) are reported in a way that will allow longitudinal comparisons as well as comparisons to the national incidence studies conducted under this title.”; and

(D) by striking the second paragraph (4);

(2) in subsection (b), by amending paragraph (2) to read as follows:

“(2) AREAS OF EMPHASIS.—Such technical assistance—

“(A) shall focus on—

“(i) implementing strategies that can leverage existing community-based and State funded resources to prevent child abuse and neglect and providing education for individuals involved in prevention activities;

“(ii) reducing racial bias in child welfare systems, including how such systems interact with health, law enforcement, and education systems;

“(iii) promoting best practices for families experiencing domestic violence, substance use disorder, or other complex needs; and

“(iv) providing professional development and other technical assistance to child welfare agencies to improve the understanding of and to help address the effects of trauma and adverse childhood experiences in parents and children in contact with the child welfare system; and

“(B) may include the identification of—

“(i) various methods and procedures for the investigation, assessment, and prosecution of child physical and sexual abuse cases;

“(ii) ways to mitigate psychological trauma to the child victim;

“(iii) effective programs carried out by the States under titles I and II; and

“(iv) effective approaches being utilized to link child protective service agencies with health care, mental health care, and developmental services and early intervention to improve forensic diagnosis and health evaluations, and barriers and shortages to such linkages.”;

(3) in subsection (c), by striking paragraph (3); and

(4) by striking subsection (e).

**SEC. 105. GRANTS TO STATES, INDIAN TRIBES OR TRIBAL ORGANIZATIONS, AND PUBLIC OR PRIVATE AGENCIES AND ORGANIZATIONS.**

Section 105 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106) is amended—

(1) in subsection (a)—

(A) by redesignating paragraph (7) as paragraph (11);

(B) by striking paragraphs (1) through (6) and inserting the following:

“(1) PREVENTION SERVICES.—The Secretary may award grants under this subsection to entities to establish or expand prevention services that reduce incidences of child maltreatment and strengthen families.

“(2) TRAUMATIC STRESS.—The Secretary may award grants under this subsection to entities to address instances of traumatic stress in families due to child abuse and neglect, especially for families with complex needs or families that exhibit high levels of adverse childhood experiences.

“(3) PROMOTING A HIGH-QUALITY WORKFORCE.—The Secretary may award grants under this subsection to entities to carry out programs or strategies that promote a high-quality workforce in the child welfare system through—

“(A) improvements to recruitment, support, or retention efforts; or

“(B) education for professionals and paraprofessionals in the prevention, identification, and treatment of child abuse and neglect.

“(4) IMPROVING COORDINATION.—The Secretary may award grants under this subsection to entities to carry out activities to improve intrastate coordination within the child welfare system. Such activities may include—

“(A) aligning information technology systems;

“(B) improving information sharing regarding child and family referrals;

or

“(C) creating collaborative voluntary partnerships among public and private agencies, the State’s child protective services, local social service agencies, community-based family support programs, State and local legal agencies, developmental disability agencies, substance use disorder treatment providers, health care providers and agencies, domestic violence prevention programs, mental health services, schools and early learning providers, religious entities, and other community-based programs.

“(5) PRIMARY PREVENTION.—The Secretary may award grants under this subsection to entities to carry out or expand primary prevention programs or strategies that address family or community protective factors.

“(6) NEGLECT DUE TO ECONOMIC INSECURITY.—The Secretary may award grants under this subsection to entities to carry out programs or strategies that reduce findings of child neglect due in full or in part to family economic insecurity.

“(7) EDUCATION OF MANDATORY REPORTERS.—The Secretary may award grants under this subsection to entities for projects that involve research-based strategies for innovative education of mandated child abuse and neglect reporters, and for victims to understand mandatory reporting.

“(8) SENTINEL INJURIES.—The Secretary may award grants under this subsection to entities to identify and test effective practices to improve early detection and management of injuries indicative of potential abuse in infants to prevent future cases of child abuse and related fatalities.

“(9) INNOVATIVE PARTNERSHIPS.—The Secretary may award grants under this subsection to entities to carry out innovative programs or strategies to coordinate the delivery of services to help reduce child abuse and neglect via partnerships among health, mental health, education (including early learning and care programs as appropriate), and child welfare agencies and providers.

“(10) REDUCING CHILD ABUSE AND NEGLECT DUE TO THE SUBSTANCE USE DISORDER OF A PARENT OR CAREGIVER.—The Secretary may award grants under this subsection to entities to carry out activities to reduce child abuse and neglect due to the substance use disorder of a parent or caregiver.”; and

(C) by adding at the end the following:

“(12) NATIONAL CHILD ABUSE HOTLINE.—

“(A) IN GENERAL.—The Secretary may award a grant under this subsection to a nonprofit entity to provide for the ongoing operation of a 24-hour, national, toll-free telephone hotline to provide information and assistance to youth victims of child abuse or neglect, parents, caregivers, mandated reporters, and other concerned community members, including through alternative modalities for communications (such as texting or chat services) with such victims and other information seekers.

“(B) PRIORITY.—In awarding grants described in this paragraph, the Secretary shall give priority to applicants with experience in operating a hotline that provides assistance to victims of child abuse, parents, caregivers, and mandated reporters.

“(C) APPLICATION.—To be eligible to receive a grant described in this paragraph, a nonprofit entity shall submit an application to the Secretary that shall—

“(i) contain such assurances and information, be in such form, and be submitted in such manner, as the Secretary shall prescribe;

“(ii) include a complete description of the entity’s plan for the operation of a national child abuse hotline, including descriptions of—

“(I) the professional development program for hotline personnel, including technology professional development to ensure that all persons affiliated with the hotline are able to effectively operate any technological systems used by the hotline;

“(II) the qualifications for hotline personnel;

“(III) the methods for the creation, maintenance, and updating of a comprehensive list of prevention and treatment service providers;

“(IV) a plan for publicizing the availability of the hotline throughout the United States;

“(V) a plan for providing service to non-English speaking callers, including service through hotline personnel who have non-English language capability;

“(VI) a plan for facilitating access to the hotline and alternative modality services by persons with hearing impairments and disabilities;

“(VII) a plan for providing crisis counseling, general assistance, and referrals to youth victims of child abuse; and

“(VIII) a plan to offer alternative services to calling, such as texting or live chat;

“(iii) demonstrate that the entity has the capacity and the expertise to maintain a child abuse hotline and a comprehensive list of service providers;

“(iv) demonstrate the ability to provide information and referrals for contacts, directly connect contacts to service providers, and employ crisis interventions;

“(v) demonstrate that the entity has a commitment to providing services to individuals in need; and

“(vi) demonstrate that the entity complies with State privacy laws and has established quality assurance practices.”; and

(2) by striking subsections (b) and (c) and inserting the following:

“(b) GOALS AND PERFORMANCE.—The Secretary shall ensure that each entity receiving a grant under this section—

“(1) establishes quantifiable goals for the outcome of the project funded with the grant; and

“(2) adequately measures the performance of the project relative to such goals.

“(c) PERFORMANCE REPORT REQUIRED.—

“(1) IN GENERAL.—Each entity that receives a grant under this section shall submit to the Secretary a performance report that includes—

“(A) an evaluation of the effectiveness of the project funded with the grant relative to the goals established for such project under subsection (b)(1); and

“(B) data supporting such evaluation.

“(2) SUBMISSION.—The report under paragraph (1) shall be submitted to the Secretary at such time, in such manner, and containing such information as the Secretary may require.

“(d) CONTINUING GRANTS.—The Secretary may only award a continuing grant to an entity under this section if such entity submits a performance report required under subsection (c) that demonstrates effectiveness of the project funded.”.

**SEC. 106. GRANTS TO STATES FOR CHILD ABUSE OR NEGLECT PREVENTION AND TREATMENT PROGRAMS.**

(a) DEVELOPMENT AND OPERATION GRANTS.—Subsection (a) of section 106 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a) is amended to read as follows:

“(a) DEVELOPMENT AND OPERATION GRANTS.—The Secretary shall make grants to the States, from allotments under subsection (f) for each State that applies for a grant under this section, for purposes of assisting the States in improving and implementing a child protective services system that is family-centered, integrates community services, and is capable of providing rapid response to high-risk cases, by carrying out the following:

“(1) Conducting the intake, assessment, screening, and investigation of reports of child abuse or neglect.

“(2) Ensuring that reports concerning a child’s living arrangements or subsistence needs are addressed through services or benefits and that no child is separated from such child’s parent for reasons of poverty.

“(3) Creating and improving the use of multidisciplinary teams and inter-agency, intra-agency, interstate, and intrastate protocols to enhance fair investigations; and improving legal preparation and representation.

“(4) Complying with the assurances in section 106(b)(2).

“(5) Establishing State and local networks of child and family service providers that support child and family well-being, which shall—

“(A) include child protective services, as well as agencies and service providers, that address family-strengthening, parenting skills, child development, early childhood care and learning, child advocacy, public health, mental health, substance use disorder treatment, domestic violence, developmental disabilities, housing, juvenile justice, elementary and secondary education, and child placement; and

“(B) address instances of child abuse and neglect by incorporating evaluations that assess the development of a child, including language and communication, cognitive, physical, and social and emotional development, the need for mental health services, including trauma-related services, trauma-informed care, and parental needs.

“(6) Ensuring child protective services is addressing the safety of children and responding to parent and family needs, which shall include—

“(A) family-oriented efforts that emphasize case assessment and follow up casework focused on child safety and child and parent well-being, which may include—

“(i) ensuring parents and children undergo physical and mental health assessments, as appropriate, and ongoing developmental monitoring;

“(ii) multidisciplinary approaches to assessing family needs and connecting the family with services, including prevention services under section 471 of the Social Security Act (42 U.S.C. 671);

“(iii) organizing a treatment team with the goal of preventing child abuse and neglect, and improving parent and child well-being;

“(iv) case monitoring that supports child well-being; and

“(v) differential response efforts; and

“(B) establishing and maintaining a rapid response system that responds promptly to all reports of child abuse or neglect, with special attention to cases involving children under 3 years of age.

“(7) Educating caseworkers, community service providers, attorneys, health care professionals, parents, and others engaged in the prevention, intervention, and treatment of child abuse and neglect, which shall include education on—

“(A) practices that help ensure child safety and well-being;

“(B) approaches to family-oriented prevention, intervention, and treatment of child abuse and neglect;

“(C) early childhood, child, and adolescent development, and the impact of adverse childhood experiences on such development;

“(D) the relationship between child abuse and domestic violence, and support for non-abusing parents;

“(E) strategies to work with families impacted by substance use disorder and mental health issues (and, when appropriate, be coordinated with prevention efforts funded under section 471 of the Social Security Act (42 U.S.C. 671));

“(F) effective use of multiple services to address family and child needs, including needs resulting from trauma;

“(G) efforts to improve family and child well-being;

“(H) support for child welfare workers affected by secondary trauma; and  
“(I) supporting families and caregivers to combat and prevent unsubstantiated, unfounded, or false reports, including through education on the rights of families and caregivers.

“(8) Creating or improving data systems that allow for—

“(A) the identification of cases requiring prompt responses;

“(B) real-time case monitoring that tracks assessments, service referrals, follow-up, case reviews, and progress toward parent and child goals; and

“(C) sharing basic identifying data with law enforcement, as necessary.

“(9) Improving the general child protective system by developing, improving, and implementing safety assessment tools, providing that such tools, protocols, and systems shall not authorize the separation of any child from the legal parent or guardian of such child solely on the basis of poverty, or without a judicial order, except in the case of imminent harm.”.

(b) ELIGIBILITY REQUIREMENTS.—

(1) STATE PLAN.—Paragraph (1) of section 106(b) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)) is amended to read as follows:

“(1) STATE PLAN.—

“(A) IN GENERAL.—To be eligible to receive a grant under this section, a State shall submit to the Secretary a State plan that—

“(i) specifies how the grant will be used, and the State’s strategic plan, to treat child abuse and neglect and enhance community-based, prevention-centered approaches that attempt to prevent child abuse and neglect while strengthening and supporting families whenever possible; and

“(ii) meets the requirements of this subsection.

“(B) COORDINATION AND CONSULTATION.—

“(i) COORDINATION.—Each State, to the maximum extent practicable, shall coordinate its State plan under this subsection with its State plan under part B of title IV of the Social Security Act (42 U.S.C. 621 et seq.) relating to child and family services and, in States electing to provide services under part E of title IV of the Social Security Act (42 U.S.C. 670 et seq.) relating to foster care prevention services, its State plan under such part E.

“(ii) CONSULTATION.—In developing a State plan under this subsection, a State shall consult with community-based prevention and service agencies, parents and families affected by child abuse or neglect in the State, law enforcement, family court judges, prosecutors who handle criminal child abuse cases, and medical professionals engaged in the treatment of child abuse and neglect.

“(C) DURATION AND SUBMISSION OF PLAN.—Each State plan shall—

“(i) be submitted not less than every 5 years; and

“(ii) if necessary, revised by the State to inform the Secretary of any substantive changes, including—

“(I) any changes to State law or regulations, relating to the prevention of child abuse and neglect that may affect the eligibility of the State under this section; or

“(II) any changes in the State’s activities, strategies, or programs under this section.”.

(2) CONTENTS.—Paragraph (2) of section 106(b) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)) is amended to read as follows:

“(2) CONTENTS.—A State plan submitted under paragraph (1) shall contain a description of the activities that the State will carry out using amounts received under the grant to achieve the objectives of this title, including—

“(A) an assurance in the form of a certification by the Governor of the State that the State has in effect and is enforcing a State law, or has in effect and is operating a statewide program, relating to child abuse and neglect that includes—

“(i) provisions or procedures for an individual to report known and suspected instances of child abuse and neglect, including a State law

for mandatory reporting by individuals required to report such instances;

“(ii) procedures for the immediate screening, risk and safety assessment, and prompt investigation of such reports of alleged abuse and neglect in order to ensure the well-being and safety of children;

“(iii) procedures for immediate steps to be taken to ensure and protect the safety of a victim of child abuse or neglect and of any other child under the same care who may also be in danger of child abuse or neglect and ensuring their placement in a safe environment;

“(iv) methods to preserve the confidentiality of all records in order to protect the rights of the child and of the child’s parents or guardians, including requirements ensuring that reports and records made and maintained pursuant to the purposes of this Act shall only be made available to—

“(I) individuals who are the subject of the report;

“(II) Federal, State, or local government entities, or any agent of such entities, as described in clause (xi) of this subparagraph;

“(III) child abuse citizen review panels;

“(IV) child fatality review panels;

“(V) a grand jury or court, upon a finding that information in the record is necessary for the determination of an issue before the court or grand jury; and

“(VI) other entities or classes of individuals statutorily authorized by the State to receive such information pursuant to a legitimate State purpose;

“(v) provisions and procedures requiring that in every case involving a victim of child abuse or neglect which results in a judicial proceeding, a guardian ad litem, who has received education appropriate to the role, including education in early childhood, child, and adolescent development, and domestic violence, and who may be an attorney or a court appointed special advocate who has received education appropriate to that role (or both), shall be appointed to represent the child (who, for purposes of this section, shall have any age limit elected by the State pursuant to section 475(8)(B)(iii) of the Social Security Act (42 U.S.C. 675(8)(B)(iii)) in such proceedings—

“(I) to obtain first-hand, a clear understanding of the situation and needs of such child; and

“(II) to make recommendations to the court concerning the best interests of such child;

“(vi) the establishment of citizen review panels in accordance with subsection (c);

“(vii) provisions and procedures to require that a representative of the child protective services agency shall, at the initial time of contact with the individual subject to a child abuse or neglect investigation, advise the individual of the complaints or allegations made against the individual, in a manner that is consistent with laws protecting the rights of the informant;

“(viii) provisions, procedures, and mechanisms—

“(I) for the expedited termination of parental rights in the case of any infant determined to be abandoned under State law; and

“(II) by which individuals who disagree with an official finding of child abuse or neglect can appeal such finding;

“(ix) provisions addressing the professional development of representatives of the child protective services system regarding the legal duties of the representatives, which may consist of various methods of informing such representatives of such duties (including providing such education in different languages if necessary), in order to protect the legal rights and safety of children and their parents and caregivers from the initial time of contact during investigation through treatment;

“(x) provisions for immunity from civil or criminal liability under State and local laws and regulations for individuals making good faith reports of suspected or known instances of child abuse or neglect, or who otherwise provide information or assistance, including medical evaluations or consultations, in connection with a report, investigation, or legal intervention pursuant to a good faith report of child abuse or neglect;

“(xi) provisions to require the State to disclose confidential information to any Federal, State, or local government entity, or any agent of such entity, that has a need for such information in order to carry out

its responsibilities under law to protect children from child abuse and neglect;

“(xii) provisions requiring, and procedures in place that facilitate the prompt expungement of any records that are accessible to the general public or are used for purposes of employment or other background checks in cases determined to be unsubstantiated or false, except that nothing in this section shall prevent State child protective services agencies from keeping information on unsubstantiated reports in their casework files to assist in future risk and safety assessment;

“(xiii) provisions and procedures for requiring criminal background record checks that meet the requirements of section 471(a)(20) of the Social Security Act (42 U.S.C. 671(a)(20)) for prospective foster and adoptive parents and other adult relatives and non-relatives residing in the household;

“(xiv) provisions for systems of technology that support the State child protective services system and track reports of child abuse and neglect from intake through final disposition;

“(xv) provisions and procedures requiring identification and assessment of all reports involving children known or suspected to be victims of sex trafficking (as defined in section 103(12) of the Trafficking Victims Protection Act of 2000 (22 U.S.C. 7102 (12)));

“(xvi) provisions, procedures, and mechanisms that assure that the State does not require reunification of a surviving child with a parent who has been found by a court of competent jurisdiction—

“(I) to have committed murder (which would have been an offense under section 1111(a) of title 18, United States Code, if the offense had occurred in the special maritime or territorial jurisdiction of the United States) of another child of such parent;

“(II) to have committed voluntary manslaughter (which would have been an offense under section 1112(a) of title 18, United States Code, if the offense had occurred in the special maritime or territorial jurisdiction of the United States) of another child of such parent;

“(III) to have aided or abetted, attempted, conspired, or solicited to commit such murder or voluntary manslaughter;

“(IV) to have committed a felony assault that results in the serious bodily injury to the surviving child or another child of such parent;

“(V) to have committed sexual abuse against the surviving child or another child of such parent; or

“(VI) to be required to register with a sex offender registry under section 113(a) of the Adam Walsh Child Protection and Safety Act of 2006 (42 U.S.C. 16913(a)); and

“(xvii) an assurance that, upon the implementation by the State of the provisions, procedures, and mechanisms under clause (xvi), conviction of any one of the felonies listed in clause (xvi) constitute grounds under State law for the termination of parental rights of the convicted parent as to the surviving children (although case-by-case determinations of whether or not to seek termination of parental rights shall be within the sole discretion of the State);

“(B) an assurance that the State has in place procedures for responding to the reporting of medical neglect (including instances of withholding of medically indicated treatment from infants with disabilities who have life-threatening conditions), procedures or programs, or both (within the State child protective services system), to provide for—

“(i) coordination and consultation with individuals designated by and within appropriate health-care facilities;

“(ii) prompt notification by individuals designated by and within appropriate health-care facilities of cases of suspected medical neglect (including instances of withholding of medically indicated treatment from infants with disabilities who have life-threatening conditions); and

“(iii) authority, under State law, for the State child protective services system to pursue any legal remedies, including the authority to initiate legal proceedings in a court of competent jurisdiction, as may be necessary to prevent the withholding of medically indicated treatment from infants with disabilities who have life-threatening conditions;

“(C) an assurance or certification that programs and education conducted under this title address the unique needs of unaccompanied homeless youth, including access to enrollment and support services and that such

youth are eligible for under parts B and E of title IV of the Social Security Act (42 U.S.C. 621 et seq., 670 et seq.) and meet the requirements of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11301 et seq.);

“(D) a description of—

“(i) policies and procedures (including appropriate referrals to child welfare service systems and for other appropriate services (including home visiting services and mutual support and parent partner programs)) to address the needs of infants born with and identified as being affected by substance use or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder, including a requirement that health care providers involved in the delivery or care of such infants notify the child welfare services system of the occurrence of such condition in such infants, except that such notification shall not be construed to—

“(I) establish a definition under Federal law of what constitutes child abuse or neglect; or

“(II) require prosecution for any illegal action;

“(ii) the development of a plan of safe care for the infant born and identified as being affected by substance use or withdrawal symptoms, or a Fetal Alcohol Spectrum Disorder to ensure the safety and well-being of such infant following release from the care of health care providers, including through—

“(I) addressing the health and substance use disorder treatment needs of the infant and affected family or caregiver; and

“(II) the development and implementation by the State of monitoring systems regarding the implementation of such plans to determine whether and in what manner local entities are providing, in accordance with State requirements, referrals to and delivery of appropriate services for the infant and affected family or caregiver;

“(iii) policies and procedures to make available to the public on the State website the data, findings, and information about all cases of child abuse or neglect resulting in a child fatality or near fatality, including a description of—

“(I) how the State will not create an exception to such public disclosure, except in a case in which—

“(aa) the State would like to delay public release of case-specific findings or information (including any previous reports of domestic violence and subsequent actions taken to assess and address such reports) while a criminal investigation or prosecution of such a fatality or near fatality is pending;

“(bb) the State is protecting the identity of a reporter of child abuse or neglect; or

“(cc) the State is withholding identifying information of members of the victim’s family who are not perpetrators of the fatality or near fatality; and

“(II) how the State will ensure that in providing the public disclosure required under this clause, the State will include—

“(aa) the cause and circumstances of the fatality or near fatality;

“(bb) the age and gender of the child; and

“(cc) any previous reports of child abuse or neglect investigations that are relevant to the child abuse or neglect that led to the fatality or near fatality;

“(iv) how the State will use data collected on child abuse or neglect to prevent child fatalities and near fatalities;

“(v) how the State will implement efforts to prevent child fatalities and near fatalities;

“(vi) the cooperation of State law enforcement officials, court of competent jurisdiction, and appropriate State agencies providing human services in the investigation, assessment, prosecution, and treatment of child abuse and neglect;

“(vii) the steps the State will take to improve the professional development, retention, and supervision of caseworkers and how the State will measure the effectiveness of such efforts;

“(viii) the State’s plan to ensure each child under the age of 3 who is involved in a substantiated case of child abuse or neglect will be referred to the State’s child find system under section 635(a)(5) of the Individuals with Disabilities Education Act (20 U.S.C. 1435(a)(5)) in order

to determine if the child is an infant or toddler with a disability (as defined in section 632(5) of such Act (20 U.S.C. 1432(5)));

“(ix) the State’s plan to improve, as part of a comprehensive State strategy led by law enforcement, professional development for child protective services workers and their appropriate role in identifying, assessing, and providing comprehensive services for children who are sex trafficking victims, in coordination with law enforcement, juvenile justice agencies, runaway and homeless youth shelters, and health, mental health, and other social service agencies and providers;

“(x) the services to be provided under the grant to individuals, families, or communities, either directly or through referrals, aimed at preventing the occurrence of child abuse and neglect;

“(xi) the State’s efforts to ensure professionals who are required to report suspected cases of child abuse and neglect are aware of their responsibilities under subparagraph (A)(i) and receive professional development relating to performing such responsibilities that is specific to their profession and workplace;

“(xii) policies and procedures encouraging the appropriate involvement of families in decisionmaking pertaining to children who experienced child abuse or neglect;

“(xiii) the State’s efforts to improve appropriate collaboration among child protective services agencies, domestic violence services agencies, substance use disorder treatment agencies, and other agencies in investigations, interventions, and the delivery of services and treatment provided to children and families affected by child abuse or neglect, including children exposed to domestic violence, where appropriate;

“(xiv) policies and procedures regarding the use of differential response, as applicable, to improve outcomes for children; and

“(xv) the State’s efforts to reduce racial bias in its child protective services system.”.

(3) LIMITATIONS.—Paragraph (3) of section 106(b) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)) is amended—

(A) in the paragraph heading, by striking “LIMITATION” and inserting “LIMITATIONS”;

(B) by striking “With regard to clauses (vi) and (vii) of paragraph (2)(B),” and inserting the following:

“(A) DISCLOSURE OF CERTAIN IDENTIFYING INFORMATION.—With regard to subparagraphs (A)(iv) and (D)(iii) of paragraph (2),”;

(C) by striking the period at the end and inserting “, and”; and

(D) by adding at the end the following:

“(B) PUBLIC ACCESS TO COURT PROCEEDINGS.—Nothing in paragraph (2) shall be construed to limit the State’s flexibility to determine State policies relating to public access to court proceedings to determine child abuse and neglect, except that such policies shall, at a minimum, ensure the safety and well-being of the child, parents, and families.”.

(4) DEFINITIONS.—Paragraph (4) of section 106(b) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)) is amended—

(A) in the paragraph heading, by striking “DEFINITIONS” and inserting “DEFINITION”;

(B) by striking “this subsection” and all that follows through “means an act” and inserting the following: “this subsection, the term ‘near fatality’ means an act”;

(C) by striking “, and” and inserting a period; and

(D) by striking subparagraph (B).

(c) CITIZEN REVIEW PANELS.—Section 106(c) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(c)) is amended—

(1) in paragraph (1)(B), by striking “EXCEPTIONS.” and all that follows through “A State may” and inserting “EXCEPTION.—A State may”;

(2) in paragraph (4)(A)—

(A) in the matter preceding clause (i), by striking “and where appropriate, specific cases,”; and

(B) in clause (iii)(I), by striking “foster care and adoption programs” and inserting “foster care, prevention, and permanency programs”; and

(3) by amending the first sentence of paragraph (6) to read as follows: “Each panel established under paragraph (1) shall prepare and make available to the State and the public, on an annual basis, a report containing a summary of the activities of the panel, the criteria used for determining which activities the panel engaged in, and recommendations or observations to improve the child

protective services system at the State and local levels, and the data upon which these recommendations or observations are based.”.

(d) ANNUAL STATE DATA REPORTS.—Section 106(d) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(d)) is amended—

(1) by amending paragraph (13) to read as follows:

“(13) The annual report containing the summary of the activities and recommendations of the citizen review panels of the State required by subsection (c)(6), and the actions taken by the State as a result of such recommendations.”;

(2) in paragraph (15), by striking “subsection (b)(2)(B)(ii)” and inserting “subsection (b)(2)(D)(i)”;

(3) in paragraph (16), by striking “subsection (b)(2)(B)(xxi)” and inserting “subsection (b)(2)(D)(viii)”;

(4) in paragraph (17), by striking “subsection (b)(2)(B)(xxiv)” and inserting “subsection (b)(2)(A)(xv)”;

(5) in paragraph (18)—

(A) in subparagraph (A), by striking “subsection (b)(2)(B)(ii)” and inserting “subsection (b)(2)(D)(i)”;

(B) in subparagraph (B), by striking “subsection (b)(2)(B)(iii)” and inserting “subsection (b)(2)(D)(ii)”;

(C) in subparagraph (C), by striking “subsection (b)(2)(B)(iii)” and inserting “subsection (b)(2)(D)(ii)”;

(6) by adding at the end the following:

“(19) The number of child fatalities and near fatalities from maltreatment and related information in accordance with the uniform standards established under section 103(d).”.

(e) ALLOTMENTS.—Section 106(f) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(f)) is amended by adding at the end the following:

“(6) LIMITATION.—For any fiscal year for which the amount allotted to a State or territory under this subsection exceeds the amount allotted to the State or territory under such subsection for fiscal year 2019, the State or territory may use not more than 2 percent of such excess amount for administrative expenses.”.

#### SEC. 107. MISCELLANEOUS REQUIREMENTS.

Section 108 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106d) is amended—

(1) in subsection (b), by inserting “Indian tribes, and tribal organizations,” after “States.”;

(2) by redesignating subsections (c) through (e) as subsections (d) through (f), respectively; and

(3) by inserting after subsection (b) the following:

“(c) PROTECTING AGAINST SYSTEMIC CHILD SEXUAL ABUSE.—

“(1) REPORTING AND TASK FORCE.—Not later than 24 months after the date of the enactment of the Stronger Child Abuse Prevention and Treatment Act, each State task force established under section 107(c) and expanded as described in paragraph (2) shall study and make recommendations on the following, with a focus on preventing systemic child sexual abuse:

“(A) How to detect systemic child sexual abuse that occurs in an organization.

“(B) How to prevent child sexual abuse and systemic child sexual abuse from occurring in organizations, which shall include recommendations to improve—

“(i) practices and policies for the education of parents, caregivers, and victims, and age appropriate education of children, about risk factors or signs of potential child sexual abuse; and

“(ii) the efficacy of applicable State laws and the role such laws play in deterring or preventing incidences of child sexual abuse.

“(C) The feasibility of making available the disposition of a perpetrator within an organization to—

“(i) the child alleging sexual abuse or the child’s family; or

“(ii) an adult who was a child at the time of the sexual abuse claim in question or the adult’s family.

“(2) TASK FORCE COMPOSITION.—For purposes of this subsection, a State task force shall include—

“(A) the members of the State task force described in section 107(c) for the State; and

“(B) the following:

“(i) Family court judges.

“(ii) Individuals from religious organizations.

“(iii) Individuals from youth-serving organizations, including youth athletics organizations.

“(3) REPORTING ON RECOMMENDATIONS.—Not later than 6 months after a State task force makes recommendations under paragraph (1), the State maintaining such State task force shall—

“(A) make public the recommendations of such report;

“(B) report to the Secretary on the status of adopting such recommendations; and

“(C) in a case in which the State declines to adopt a particular recommendation, make public the explanation for such declination.

“(4) DEFINITIONS.—For purposes of this subsection—

“(A) the terms ‘child sexual abuse’ and ‘sexual abuse’ shall not be limited to an act or a failure to act on the part of a parent or caretaker;

“(B) the term ‘organization’ means any entity that serves children; and

“(C) the term ‘systemic child sexual abuse’ means—

“(i) a pattern of informal or formal policy or de facto policy to not follow State and local requirements to report instances of child sexual abuse in violation of State and local mandatory reporting laws or policy; or

“(ii) a pattern of assisting individual perpetrators in maintaining their careers despite substantiated evidence of child sexual abuse.”.

**SEC. 108. REPORTS.**

(a) SCALING EVIDENCE-BASED TREATMENT OF CHILD ABUSE AND NEGLECT.—Section 110 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106f) is amended to read as follows:

**“SEC. 110. STUDY AND REPORT RELATING TO SCALING EVIDENCE-BASED TREATMENT OF CHILD ABUSE AND NEGLECT; STUDY AND REPORT ON MARITAL AGE OF CONSENT; STUDY AND REPORT ON STATE MANDATORY REPORTING LAWS.**

“(a) IN GENERAL.—The Secretary shall conduct a study that examines challenges to, and best practices for, the scalability of treatments that reduce the trauma resulting from child abuse and neglect and reduce the risk of revictimization, such as those allowable under sections 105 and 106.

“(b) CONTENT OF STUDY.—The study described in subsection (a) shall be completed in a manner that considers the variability among treatment programs and among populations vulnerable to child abuse and neglect. The study shall include, at minimum:

“(1) A detailed synthesis of the existing research literature examining barriers and challenges to, and best practices for the scalability of child welfare programs and services as well as programs and services for vulnerable children and families in related fields, including healthcare and education.

“(2) Data describing state and local providers’ experiences with scaling treatments that reduce the trauma resulting from child abuse and neglect and reduce the risk of revictimization.

“(3) Consultation with experts in child welfare, healthcare, and education.

“(c) REPORT.—Not later than 3 years after the date of the enactment of the Stronger Child Abuse Prevention and Treatment Act, the Secretary shall submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Education and Labor of the House of Representatives a report that contains the results of the study conducted under subsection (a), including recommendations for best practices for scaling treatments that reduce the trauma resulting from child abuse and neglect and reduce the risk of revictimization.

“(d) STUDY AND REPORT ON MARITAL AGE OF CONSENT.—

“(1) STUDY.—The Secretary shall study, with respect to each State—

“(A) the State law regarding the minimum marriage age; and

“(B) the prevalence of marriage involving a child who is under the age of such minimum marriage age.

“(2) FACTORS.—The study required under paragraph (1) shall include an examination of—

“(A) the extent to which any statutory exceptions to the minimum marriage age in such laws contribute to the prevalence of marriage involving a child described in paragraph (1)(B);

“(B) whether such exceptions allow such a child to be married without the consent of such child; and

“(C) the impact of such exceptions on the safety of such children.

“(3) REPORT.—Not later than 1 year after the date of enactment of the Stronger Child Abuse Prevention and Treatment Act, the Secretary shall submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Education and Labor of the House of Representatives a report

containing the findings of the study required by this subsection, including any best practices.

“(e) STUDY AND REPORT ON STATE MANDATORY REPORTING LAWS.—

“(1) STUDY.—The Secretary shall collect information on and otherwise study State laws for mandatory reporting of incidents of child abuse or neglect. Such study shall examine trends in referrals and investigations of child abuse and neglect due to differences in such State laws with respect to the inclusion, as mandatory reporters, of the following individuals:

“(A) Individuals licensed or certified to practice in any health-related field licensed by the State, employees of health care facilities or providers licensed by the State, who are engaged in the admission, examination, care or treatment of individuals, including mental health and emergency medical service providers.

“(B) Individuals employed by a school who have direct contact with children, including teachers, administrators, and independent contractors.

“(C) Peace officers and law enforcement personnel.

“(D) Clergy, including Christian Science practitioners, except where prohibited on account of clergy-penitent privilege.

“(E) Day care and child care operators and employees.

“(F) Employees of social services agencies who have direct contact with children in the course of employment.

“(G) Foster parents.

“(H) Court appointed special advocates (employees and volunteers).

“(I) Camp and after-school employees.

“(J) An individual, paid or unpaid, who, on the basis of the individual’s role as an integral part of a regularly scheduled program, activity, or service, accepts responsibility for a child.

“(2) REPORT.—Not later than 4 years after the date of enactment of the Stronger Child Abuse Prevention and Treatment Act, the Secretary shall submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Education and Labor of the House of Representatives a report containing the findings of the study required by this subsection, including any best practices related to the inclusion, as mandatory reporters, of individuals described in paragraph (1).”

(b) REPORT ON CHILD ABUSE AND NEGLECT IN INDIAN TRIBAL COMMUNITIES.—

(1) IN GENERAL.—Not later than 2 years after the date of the enactment of this Act, the Comptroller General, in consultation with the Indian tribes from each of the 12 regions of the Bureau of Indian Affairs, shall study child abuse and neglect in Indian Tribal communities for the purpose of identifying vital information and making recommendations concerning issues relating to child abuse and neglect in such communities, and submit to the Committee on Health, Education, Labor, and Pensions and the Committee on Indian Affairs of the Senate and the Committee on Education and Labor and the Committee on Natural Resources of the House of Representatives a report on such study, which shall include—

(A) the number of Indian tribes providing primary child abuse and neglect prevention activities;

(B) the number of Indian tribes providing secondary child abuse and neglect prevention activities;

(C) promising practices of Indian tribes with respect to child abuse and neglect prevention that are culturally-based or culturally-adapted;

(D) information and recommendations on how such culturally-based or culturally-adapted child abuse and neglect prevention activities could become evidence-based;

(E) the number of Indian tribes that have accessed Federal child abuse and neglect prevention programs;

(F) child abuse and neglect prevention activities that Indian tribes provide using State funds;

(G) child abuse and neglect prevention activities that Indian tribes provide using Tribal funds;

(H) Tribal access to State children’s trust fund resources, as described in section 202 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5116a);

(I) how a children’s trust fund model could be used to support prevention efforts regarding child abuse and neglect of American Indian and Alaska Native children;

(J) Federal agency technical assistance efforts to address child abuse and neglect prevention and treatment of American Indian and Alaska Native children;

(K) Federal agency cross-system collaboration to address child abuse and neglect prevention and treatment of American Indian and Alaska Native children;

(L) Tribal access to child abuse and neglect prevention research and demonstration grants under the Child Abuse Prevention and Treatment Act (42 U.S.C. 5101 et seq.); and

(M) an examination of child abuse and neglect data systems to identify what Tribal data is being submitted, barriers to submitting data, and recommendations on improving the collection of data from Indian Tribes.

(2) DEFINITIONS.—In this subsection—

(A) the term “Alaska Native” has the meaning given the term in section 111 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106g); and

(B) the terms “child abuse and neglect” and “Indian tribe” have the meaning given the terms in section 3 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5101 note).

**SEC. 109. AUTHORIZATION OF APPROPRIATIONS.**

Section 112(a) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106h(a)) is amended—

(1) in paragraph (1)—

(A) by striking “to carry out” through “fiscal year 2010” and inserting “to carry out this title \$270,000,000 for fiscal year 2020”; and

(B) by striking “2011 through 2015” and inserting “2021 through 2025”; and

(2) by striking paragraph (2)(A) and inserting the following:

“(A) IN GENERAL.—Of the amounts appropriated for a fiscal year under paragraph (1), the Secretary shall make available 30 percent of such amounts, or \$100,000,000, whichever is less, to fund discretionary activities under this title.”.

**SEC. 110. ELECTRONIC INTERSTATE DATA EXCHANGE SYSTEM.**

Title I of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5101 et seq.) is amended by adding at the end the following:

**“SEC. 115. ELECTRONIC INTERSTATE DATA EXCHANGE SYSTEM.**

“(a) INTERSTATE DATA EXCHANGE SYSTEM.—

“(1) IN GENERAL.—The Secretary of Health and Human Services shall consider the recommendations included in the reports required under paragraph (8)(A) and subsection (b)(2) in developing an electronic interstate data exchange system that allows State entities responsible under State law for maintaining child abuse and neglect registries to communicate information across State lines.

“(2) STANDARDS.—In developing the electronic interstate data exchange system under paragraph (1), the Secretary shall—

“(A) use interoperable standards developed and maintained by intergovernmental partnerships, such as the National Information Exchange Model;

“(B) develop policies and governance standards that—

“(i) ensure consistency in types of information shared and not shared;

and

“(ii) specify circumstances under which data should be shared through the interstate data exchange system; and

“(C) ensure that all standards and policies adhere to the privacy, security, and civil rights laws of each State and Federal law.

“(3) LIMITATION ON USE OF ELECTRONIC INTERSTATE DATA EXCHANGE SYSTEM.—The electronic interstate data exchange system may only be used for purposes relating to child safety.

“(4) PILOT PROGRAM.—

“(A) IMPLEMENTATION.—Not later than 6 months after the date of the enactment of this section, the Secretary of Health and Human Services shall begin implementation of a pilot program to generate recommendations for the full integration of the electronic interstate data exchange system. Such pilot program shall include not less than 10 States and not more than 15 States.

“(B) COMPLETION.—Not later than 30 months after the date of the enactment of this section, the Secretary of Health and Human Services shall complete the pilot program described in subparagraph (A).

“(5) INTEGRATION.—The Secretary of Health and Human Services may assist States in the integration of this system into the infrastructure of each State using funds appropriated under this subsection.

“(6) PARTICIPATION.—As a condition on eligibility for receipt of funds under section 106, each State shall—

“(A) participate in the electronic interstate data exchange system to the fullest extent possible in accordance with State law (as determined by the Secretary of Health and Human Services) not later than December 31, 2027; and

“(B) prior to the participation described in subparagraph (A), provide to the Secretary of Health and Human Services an assurance that the child abuse and neglect registry of such State provides procedural due process protections with respect to including individuals on such registry.

“(7) PROHIBITION.—The Secretary of Health and Human Services may not access or store data from the electronic interstate data exchange system, unless the State to which such data pertains voluntarily shares such data with the Secretary of Health and Human Services.

“(8) REPORTS.—The Secretary of Health and Human Services shall prepare and submit to Congress—

“(A) not later than 3 years after the date of the enactment of this section, a report on the recommendations from the pilot program described in paragraph (4); and

“(B) not later than January 31, 2025, a report on the progress made in implementing this subsection.

“(9) AUTHORIZATION OF APPROPRIATIONS.—Of the funds appropriated under section 112 for a fiscal year—

“(A) for each of fiscal years 2020 and 2021, \$2,000,000 shall be reserved to carry out this section; and

“(B) for each of fiscal years 2022 through 2025, \$1,000,000 shall be reserved to carry out this section.

“(b) WORKING GROUP.—

“(1) IN GENERAL.— Not later than 60 days after the date of the enactment of this section, the Secretary of Health and Human Services shall convene a working group to study and make recommendations on the following:

“(A) The feasibility of making publicly available on the website of each State definitions and standards of substantiated child abuse and neglect for the State.

“(B) Whether background check requirements under this Act, the Child Care and Development Block Grant Act of 1990 (42 U.S.C. 9858 et seq.), and part E of title IV of the Social Security Act (42 U.S.C. 670 et seq.) are complementary or if there are discrepancies that need to be addressed.

“(C) How to improve communication between and across States, including through the use of technology and the use of the electronic interstate data exchange system established under subsection (a), to allow for more accurate and efficient exchange of child abuse and neglect records.

“(D) How to reduce barriers and establish best practices for the State to provide timely responses to requests from other States for information contained in the State’s child abuse and neglect registry through the electronic interstate data exchange system established under subsection (a).

“(E) How to ensure due process for any individual included in a State’s child abuse and neglect registry, including the following:

“(i) The level of evidence necessary for inclusion in the State’s child abuse and neglect registry.

“(ii) The process for notifying such individual of inclusion in the State’s child abuse and neglect registry and the implications of such inclusion.

“(iii) The process for providing such individual the opportunity to challenge such inclusion, and the procedures for resolving such challenge.

“(iv) The length of time an individual’s record is to remain in the State’s child abuse and neglect registry, and the process for removing such individual’s record.

“(v) The criteria for when such individual’s child abuse and neglect registry record may be—

“(I) made accessible to the general public;

“(II) made available for purposes of an employment check; and

“(III) be shared for the purposes of participation in the electronic interstate data exchange system described in subsection (a).

“(2) REPORT.—Not later than 18 months after the date of the enactment of this section, the working group convened under paragraph (1) shall submit a report containing its recommendations to the Secretary of Health and Human Services, the Committee on Health, Education, Labor, and Pensions of the Sen-

ate, and the Committee on Education and Labor of the House of Representatives.

“(3) CONSTRUCTION.—There shall be no requirement for any State to adopt the recommendations of the working group, nor shall the Secretary of Health and Human Services incentivize or coerce any State to adopt any such recommendation.”.

**SEC. 111. TECHNICAL AND CONFORMING AMENDMENTS.**

(a) TECHNICAL AMENDMENTS.— The Child Abuse Prevention and Treatment Act (42 U.S.C. 5101 et seq.), as amended by the preceding provisions of this Act, is further amended—

(1) by striking “Committee on Education and the Workforce” each place it appears and inserting “Committee on Education and Labor”;

(2) in section 103(c)(1)(F), by striking “abused and neglected children” and inserting “victims of child abuse or neglect”; and

(3) in section 107(f), by striking “(42 U.S.C. 10603a)” and inserting “(34 U.S.C. 20104)”.

(b) CONFORMING AMENDMENTS.—

(1) SECTION 103.—Section 103(b)(5) (42 U.S.C. 5104(b)(5)) is amended by striking “section 106(b)(2)(B)(iii)” and inserting “section 106(b)(2)(D)(ii)”.

(2) SECTION 105.—Section 105(a)(11) (42 U.S.C. 5106(a)(11)) (as redesignated by section 105(1)(A) of this Act) is amended—

(A) in subparagraph (A), by striking “section 106(b)(2)(B)(iii)” and inserting “section 106(b)(2)(D)(ii)”;

(B) in subparagraph (C)—

(i) in clause (i)(II), by striking “section 106(b)(2)(B)(iii)” and inserting “section 106(b)(2)(D)(ii)”;

(ii) in clause (i)(IV), by striking “section 106(b)(2)(B)(iii)(II)” and inserting “section 106(b)(2)(D)(ii)(II)”;

(iii) in clause (ii), by striking “clauses (ii) and (iii) of section 106(b)(2)(B)” and inserting “clauses (i) and (ii) of section 106(b)(2)(D)”;

(C) in subparagraph (D)—

(i) in clause (i)(I), by striking “section 106(b)(2)(B)(iii)(I)” and inserting “section 106(b)(2)(D)(ii)(I)”;

(ii) in clause (ii)(I), by striking “section 106(b)(2)(B)(ii)” and inserting “section 106(b)(2)(D)(i)”;

(iii) in clause (ii)(II), by striking “section 106(b)(2)(B)(iii)” and inserting “section 106(b)(2)(D)(ii)(I)”;

(iv) in clause (iii)(I), by striking “section 106(b)(2)(B)(i)” and inserting “section 106(b)(2)(A)(i)”;

(v) in clause (iii)(IV), by striking “section 106(b)(2)(B)(iii)” and inserting “section 106(b)(2)(D)(ii)”;

(vi) in clause (v), by striking “section 106(b)(2)(B)(iii)” and inserting “section 106(b)(2)(D)(ii)”;

(D) in subparagraph (E), by striking “section 106(b)(2)(B)(ii)” and inserting “section 106(b)(2)(D)(i)”;

(E) in subparagraph (G)(ii), by striking “clauses (ii) and (iii) of section 106(b)(2)(B)” and inserting “clauses (i) and (ii) of section 106(b)(2)(D)”.

(3) SECTION 114.—Section 114(1)(B) (42 U.S.C. 5108(1)(B)) is amended by striking “clauses (ii) and (iii) of section 106(b)(2)(B)” and inserting “clauses (i) and (ii) of section 106(b)(2)(D)”.

(4) TABLE OF CONTENTS.—The table of contents in section 1(b) of the Child Abuse Prevention and Treatment Act is amended—

(A) by striking the items relating to sections 2 and 102;

(B) by inserting after the item relating to section 114 the following:

“Sec. 115. Electronic interstate data exchange system.”; and

(C) by striking the item relating to section 110, and inserting the following:

“Sec. 110. Study and report relating to scaling evidence-based treatment of child abuse and neglect; study and report on marital age of consent; study and report on State mandatory reporting laws.”.

## **TITLE II—COMMUNITY-BASED GRANTS FOR THE PREVENTION OF CHILD ABUSE AND NE- GLECT**

### **SEC. 201. PURPOSE AND AUTHORITY.**

Subsections (a) and (b) of section 201 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5116) are amended to read as follows:

“(a) **PURPOSE.**—The purposes of this title are—

“(1) to establish and maintain support for community-based family strengthening services and statewide systems-building approaches to the extent practicable, to ensure the development, operation, expansion, coordination, and evaluation of quality services, initiatives, programs, and activities to prevent child abuse and neglect; and

“(2) to promote improved access for diverse populations with demonstrated need, including low-income families, racial and ethnic minorities, families with children or caregivers with disabilities, underserved communities, and rural communities, to family strengthening services in order to more effectively prevent child abuse and neglect.

“(b) **AUTHORITY.**—The Secretary shall make grants under this title on a formula basis to the entity designated by the State as the lead entity (referred to in this title as the ‘lead entity’) under section 202(1) for the following purposes:

“(1) Providing programs, activities, and initiatives to help families build protective factors linked to the prevention of child abuse and neglect, such as knowledge of parenting and child development, parental resilience, social connections, time-limited and need-based concrete support, and social and emotional development of children, that—

“(A) are accessible to diverse populations, effective, and culturally appropriate;

“(B) build upon existing strengths;

“(C) offer assistance to families;

“(D) provide early, comprehensive support for parents;

“(E) promote the development of healthy familial relationships and parenting skills, especially in young parents and parents with very young children;

“(F) increase family stability;

“(G) improve family access to formal and informal community-based resources, including health and mental health services, time-limited and need-based concrete supports, and services and supports to meet the needs of families with children or caregivers with disabilities; and

“(H) support the additional needs of families with children with disabilities, including through respite care.

“(2) Fostering the development of a continuum of preventive services to strengthen families through State- and community-based collaborations and both public and private partnerships.

“(3) Financing the start-up, maintenance, expansion, or redesign of core services described in section 205, where communities have identified gaps and decided to prioritize the establishment of such services, to the extent practicable given funding levels and community priorities.

“(4) Maximizing funding through leveraging Federal, State, local, public, and private funds to carry out the purposes of this title.

“(5) Developing or enhancing statewide and local networks to operate, expand, or enhance community-based family strengthening services, initiatives, and activities that promote child, parent, family, and community health and well-being and prevent child abuse and neglect.

“(6) Promoting the development of, and coordination with, existing community coalitions of networks of family strengthening services that utilize culturally responsive providers in order to enhance child, family, and community well-being and prevent child abuse and neglect in all families.

“(7) Financing public information activities that focus on parent and child development and child abuse and neglect prevention.

“(8) To the extent practicable—

“(A) promoting the development and implementation of a statewide systems-building strategy to address the unmet needs identified in the inventory described in section 204(3), including the participation of public and private stakeholders, community-based organizations, legislators, parents and other relevant stakeholders, and State agencies, including the child welfare agency, the public health agency, housing agency, and the State

education agency, to scale evidence-based, evidence-informed, and promising programs that expand access to family strengthening services and reduce the numbers of children entering the foster care system;

“(B) developing comprehensive outreach strategies to engage families with various risk factors, including families who have experienced trauma or domestic violence, parents with substance use disorder, and families with children or caregivers with disabilities; and

“(C) providing capacity-building supports to local programs to improve desired outcomes for children and families, such as—

“(i) technical assistance, including support for local programs to collect outcome data that helps improve service delivery;

“(ii) professional development; and

“(iii) peer support networks, including through developing a problem-solving forum.”.

**SEC. 202. ELIGIBILITY.**

Section 202 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5116a) is amended—

(1) in paragraph (1)—

(A) by striking subparagraph (A) and inserting the following:

“(A) the Governor of the State has designated a lead entity to administer funds under this title for the purposes identified under the authority of this title, including to develop, implement, operate, enhance, or expand community-based family strengthening services designed to prevent child abuse and neglect;” and

(B) by striking subparagraph (D) and inserting the following:

“(D) the Governor of the State has given consideration to the capacity and expertise of all entities requesting to be designated under subparagraph (A);” and

(2) in paragraph (3)—

(A) by striking subparagraph (A) and inserting the following:

“(A) has demonstrated ongoing meaningful partnerships with parents in the development, operation, and oversight of State- and community-based family strengthening services designed to prevent child abuse and neglect;”;

(B) in subparagraph (B), by striking “community-based and prevention-focused programs and activities designed to strengthen and support families” and inserting “community-based family strengthening services designed”;

(C) by striking subparagraph (C) and inserting the following:

“(C) has the capacity to provide operational support (both financial and programmatic), professional development, technical assistance, and evaluation assistance, to community-based organizations;” and

(D) by striking subparagraph (D) and inserting the following:

“(D) will integrate efforts with individuals and organizations experienced in working in partnership with low-income families, racial and ethnic minorities, families with children or caregivers with disabilities, sexual and gender minority youth, victims of domestic violence, and with the child abuse and neglect prevention activities in the State, and demonstrate a financial commitment to those activities; and

“(E) will take into consideration access for diverse populations and unmet need when distributing funds to local programs under section 205.”.

**SEC. 203. AMOUNT OF GRANT.**

Section 203 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5116b) is amended—

(1) by striking subsection (a) and inserting the following:

“(a) RESERVATION.—For the purpose of making allotments to Indian tribes and tribal organizations and migrant programs, the Secretary shall reserve 5 percent of the amount appropriated under section 210(a) for each fiscal year, except that, if making such reservation would cause the total amount allotted to States under this section for a fiscal year to be less than such total for fiscal year 2019, the Secretary shall reserve 1 percent of the amount appropriated under section 210(a) for the year for such purpose.”; and

(2) by adding at the end the following:

“(d) LIMITATION.—For any fiscal year for which the amount allotted to a State under subsection (b) exceeds the amount allotted to the State under such subsection for fiscal year 2019, the State’s lead entity may use not more than 10 percent of such excess amount for administrative expenses.”.

**SEC. 204. APPLICATION.**

Section 204 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5116d) is amended—

(1) in the matter preceding paragraph (1), by striking “specified by the Secretary as essential to carrying out the provisions of section 202, including” and inserting “and assurances required in paragraphs (2) and (3) of section 202 and types of information specified by the Secretary as essential in carrying out the provisions of section 201(b), including”;

(2) in paragraphs (1), (2), and (4), by striking “community-based and prevention-focused programs and activities designed to strengthen and support families” and inserting “community-based family strengthening services designed”;

(3) in paragraph (3) by striking “community-based and prevention-focused programs and activities” and inserting “community-based family strengthening services designed”;

(4) in paragraph (5), by striking “and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect;” and inserting “services and statewide strategies designed to strengthen and support families to promote child, family, and community well-being and prevent child abuse and neglect;”;

(5) by striking paragraph (6) and inserting the following:

“(6) a description of the State’s capacity and commitment to ensure the meaningful involvement of parents who are or have been consumers of preventative supports, including the involvement of parents of diverse populations, such as low-income families, families with children or caregivers with disabilities, racial and ethnic minorities, and members of other underrepresented or underserved groups, family advocates, and adult victims of child abuse or neglect who can provide leadership in the planning, implementation, and evaluation of the programs and policy decisions of the applicant agency in accomplishing the desired outcomes for such efforts;”;

(6) by redesignating paragraph (12) as paragraph (15);

(7) by redesignating paragraphs (7) through (11) as paragraphs (8) through (12), respectively;

(8) by inserting after paragraph (6) the following:

“(7) a description of the process and criteria the lead entity will use to identify and select communities in which to build a continuum of family strengthening services, including an assurance that the process will ensure access for all families, including families in communities with high rates of child abuse and neglect relative to other communities in the State;”;

(9) by striking paragraph (9), as so redesignated, and inserting the following:

“(9) a description of outreach activities that the lead entity and local grantees will undertake to maximize the participation of low-income families, racial and ethnic minorities, families with children or caregivers with disabilities, sexual and gender minority youth, victims of domestic violence, homeless families and those at risk of homelessness, and members of other underserved or underrepresented groups;”.

(10) by striking paragraph (10), as so redesignated, and inserting the following:

“(10) a plan for providing operational support, professional development, and technical assistance to grantees, other State and local programs and providers, families, and other entities involved in strengthening families and preventing child abuse and neglect;”;

(11) in paragraph (11), as so redesignated, by striking “and its members (where appropriate)” and inserting “of community-based family strengthening services and statewide initiatives”; and

(12) by striking paragraph (12), as so redesignated, and inserting the following:

“(12) a description of the actions that the applicant entity will take to inform systemic changes in State policies, practices, procedures, and regulations to improve the delivery of community-based family strengthening services designed to promote child, family, and community well-being, and to prevent child abuse and neglect;”;

(13) a description of how the lead entity will incorporate research evidence in its process for selecting community-based family strengthening services;

(14) an assurance that, in issuing regulations to improve the delivery of community-based family strengthening services designed to promote child, family, and community well-being, and to prevent child abuse and neglect, the State will—

“(A) take into account how such regulations will impact activities funded under this Act; and

“(B) where appropriate, attempt to avoid duplication of efforts, minimize costs of compliance with such regulations, and maximize local flexibility with respect to such regulations; and”.

**SEC. 205. LOCAL PROGRAM REQUIREMENTS.**

Section 205 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5116e) is amended to read as follows:

**“SEC. 205. LOCAL PROGRAM REQUIREMENTS.**

“(a) **IN GENERAL.**—Grants from the lead entity made under this title shall be used to develop, implement, operate, expand, and enhance community-based family strengthening services designed to prevent child abuse and neglect that—

“(1) assess community assets and needs and develop a strategy to create a comprehensive continuum of effective services that strengthen and support families to prevent child abuse and neglect, through a planning process involving parents, local and public agencies, local nonprofit organizations and service providers, and private sector representatives in meaningful ways;

“(2) develop or enhance existing place-based family strengthening services, other parenting support services, and connections and coordination among key family services in the community by reaching spaces familiar to such families; and

“(3) help families build protective factors that support child and family well-being and help prevent child abuse and neglect, including knowledge of parenting and child development, parental resilience, social connections, time-limited and need-based concrete support, and social and emotional development of children.

“(b) **LOCAL CONSIDERATION.**—In awarding grants, the lead entity shall consider, consistent with the needs of the State and community, how the grantee—

“(1) demonstrates the ability to form collaborations across a range of services or initiatives and the commitment to engage in long-term planning and strategic development for community-based family strengthening services as well as provide on-going problem solving support;

“(2) involves parents, including parents of children with disabilities, diverse racial and ethnic groups, and members of other underrepresented or underserved populations, in the development, implementation, oversight, and evaluation of services;

“(3) addresses the need for place-based services and the need to reach families in hard-to-reach areas through approaches that provide core family strengthening services;

“(4) promotes improved access to family strengthening services for diverse populations and ensures that the services address identified needs of all families; and

“(5) demonstrates an understanding of the sources of child and family trauma and the strategies that mitigate the impact of and prevent adverse childhood experiences.

“(c) **LOCAL USES OF FUNDS.**—Grant funds from the lead entity shall be used for community-based family strengthening services designed to prevent child abuse and neglect, which may include the following:

“(1) Developing a strategy based on supporting a comprehensive continuum of preventive, family-centered services that strengthen and support families to prevent child abuse and neglect, especially to young parents, to parents with young children, and to parents who are adult victims of domestic violence or child abuse or neglect, through public-private partnerships.

“(2) Addressing the needs of families in hard-to-reach areas by creating access to place-based family strengthening services.

“(3) Performing an assessment of community needs, including by partnering, at the option of the grantee, with an organization that already has performed a needs assessment (such as a Maternal, Infant and Early Childhood Home Visiting program under section 511 of the Social Security Act (42 U.S.C. 711) or a Head Start program under the Head Start Act (42 U.S.C. 9831 et seq.).

“(4) Supporting outreach for services, including by coordinating with existing family strengthening services such as home visiting and other early intervention programs.

“(5) Providing, promoting the development or enhancement of, or connecting families to, core services that include—

“(A) parenting support and parent education programs, including services that help parents and other caregivers support children’s development;

“(B) parent leadership skills development programs that support parents’ personal growth as leaders in their families and communities;

“(C) mutual support groups for parents, children, and parent partners;

- “(D) respite and crisis care; and
- “(E) referrals to optional community and social services, including—
- “(i) domestic violence services;
  - “(ii) screening and referrals to early intervention;
  - “(iii) voluntary home visiting programs;
  - “(iv) health and mental health services, including referrals for information on the State Medicaid plan under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.);
  - “(v) early care and learning programs including child care and Head Start programs and Early Head Start programs under the Head Start Act (42 U.S.C. 9831 et seq.);
  - “(vi) nutrition programs, including the special supplemental nutrition program for women, infants, and children established under section 17 of the Child Nutrition Act of 1966 (42 U.S.C. 1786) and the supplemental nutrition assistance program established under the Food and Nutrition Act of 2008 (7 U.S.C. 2011 et seq.);
  - “(vii) education and workforce development programs, including adult literacy, child development, wellness, and family socioeconomic mobility programs; and
  - “(viii) services and supports to meet the needs of families with children or caregivers with disabilities, such as early intervention services for infants and toddlers with disabilities and their families, as early intervention services are defined in section 632 of the Individuals with Disabilities Education Act (20 U.S.C. 1432).
- “(6) Providing leadership in mobilizing local public and private resources to support the provision of community-based family strengthening services designed to prevent child abuse and neglect.
- “(7) Developing and maintaining meaningful partnerships with parents relating to the development, operation, evaluation, and oversight of the programs and services.
- “(8) Coordinating with other community-based family strengthening services designed to prevent child abuse and neglect in the development, operation, and expansion of networks where appropriate.
- “(d) PRIORITY.—When awarding grants, a lead entity shall give priority to effective community-based efforts that serve low-income communities and are focused on comprehensive approaches to serving young parents or parents with young children.”.

**SEC. 206. PERFORMANCE MEASURES.**

Section 206 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5116f) is amended—

- (1) in paragraphs (1), (5), (6), and (8), by striking “community-based and prevention-focused programs and activities designed to strengthen and support families” and inserting “community-based family strengthening services designed”;
- (2) in paragraph (1), by striking “meets” and inserting “meet”;
- (3) in paragraph (2), by striking “including core and optional services as described in section 202”;
- (4) by striking paragraph (3) and inserting the following:
 

“(3) shall demonstrate how they have addressed unmet needs identified by the inventory required under section 204.”.
- (5) by striking paragraph (4) and inserting the following:
 

“(4) shall describe the number of families served, including families with children or caregivers with disabilities, and the involvement of a diverse representation of families in the design, operation, and evaluation of both community-based family strengthening services and networks of such services;”;
- (6) by striking paragraph (7) and inserting the following:
 

“(7) shall describe—

  - “(A) the number of programs funded disaggregated by urban, suburban, and rural community type;
  - “(B) the number of children and families served under each such program disaggregated by urban, suburban, and rural community type; and
  - “(C) the number of programs that partner with outside entities and the services such outside entities provide;”;
- (7) in paragraph (8)—
  - (A) by striking “leadership of” and insert “partnership with”; and
  - (B) by striking the period at the end and inserting “; and”; and
- (8) by adding at the end the following:

“(9) shall describe the extent to which there is evidence to support the effectiveness of activities conducted under this title for the program’s intended purpose, or, in instances where such evidence is not available, shall describe barriers and challenges to developing evidence of effectiveness.”.

**SEC. 207. NATIONAL NETWORK FOR COMMUNITY-BASED FAMILY RESOURCE PROGRAMS.**

Section 207 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5116g) is amended—

(1) in the matter preceding paragraph (1), by striking “such sums as may be necessary” and inserting “not more than 5 percent”; and

(2) in paragraph (3), by striking “community-based and prevention-focused programs and activities designed to strengthen and support families” and inserting “community-based family strengthening services designed”.

**SEC. 208. DEFINITIONS.**

Section 208 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5116h) is amended—

(1) by redesignating paragraphs (1) and (2) as paragraphs (2) and (1), respectively, and transferring paragraph (1) as redesignated to appear before paragraph (2) as redesignated; and

(2) by striking paragraph (1) (as so redesignated) and inserting the following:  
 “(1) COMMUNITY-BASED FAMILY STRENGTHENING SERVICES.—The term ‘community-based family strengthening services’ includes organizations such as family resource programs, family support programs, voluntary home visiting programs, respite care services, parenting education, mutual support groups for parents, children, parent partner programs, and other community programs or networks of such programs that provide activities that are designed to prevent child abuse and neglect.”.

**SEC. 209. RULE OF CONSTRUCTION.**

(a) IN GENERAL.—Title II of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5116 et seq.) is amended—

- (1) by redesignating section 209 as section 210; and
- (2) by inserting after section 208 the following:

**“SEC. 209. RULE OF CONSTRUCTION.**

“Nothing in this title shall be construed to prohibit grandparents, kinship care providers, foster parents, adoptive parents, or any other individual in a parenting role from receiving or participating in services and programs under this title.”.

(b) CONFORMING AMENDMENT.—The table of contents in section 1(b) of the Child Abuse Prevention and Treatment Act is amended by striking the item relating to section 209 and inserting the following:

“Sec. 209. Rule of construction.

“Sec. 210. Authorization of appropriations.”.

**SEC. 210. AUTHORIZATION OF APPROPRIATIONS.**

Section 210 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5116 et seq.), as redesignated by section 209 of this Act, is amended—

- (1) by striking “There are” and inserting the following:

“(a) IN GENERAL.—There are”;

(2) by striking “to carry out” through “fiscal year 2010” and inserting “to carry out this title \$270,000,000 for fiscal year 2020”;

(3) by striking “2011 through 2015” and inserting “2021 through 2025”; and

(4) by adding at the end the following:

“(b) TREATMENT OF NON-FEDERAL FUNDS IN CERTAIN FISCAL YEARS.—For any fiscal year for which the amount appropriated under subsection (a) exceeds the amount appropriated under such subsection for fiscal year 2019, the Secretary shall consider non-Federal funds and in-kind contributions as part of the State contribution for the activities specified in section 204(4).”.

**SEC. 211. STUDY AND REPORT.**

(a) STUDY RELATING TO NEW PREVENTION PROGRAMS.—

(1) IN GENERAL.—The Comptroller General of the United States shall complete a study, using data reported by States to the Secretary of Health and Human Services under section 206 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5116f), as amended by this Act—

(A) to determine how many families and children in the first 3 years after the date of the enactment of this Act are served annually through programs funded under title II of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5116 et seq.); and

(B) to compare the number of such families and children served annually in the first 3 years after the date of the enactment of this Act to the number of such families and children served in fiscal year 2019.

(2) CONTENTS.—The study required under paragraph (1) shall include the following for each of the first 3 years after the date of the enactment of this Act:

(A) An examination of how many families received evidence-based programming under title II of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5116 et seq.).

(B) An examination of the extent to which local programs conduct evaluations using funds provided under such title and the findings of such evaluations.

(C) An examination of whether findings of effectiveness in evaluation studies vary by urban, suburban, or rural community type.

(D) An examination of whether programs partnering with other entities are more effective than those that do not partner with other entities.

(E) An examination of barriers to implement evidence-based programming or to conduct evaluations in instances where such activities do not occur.

(b) REPORT.—Not later than 4 years after the date of the enactment of this Act, the Comptroller General of the United States shall submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Education and Labor of the House of Representatives a report that contains the results of the study conducted under paragraph (1).

### TITLE III—ADOPTION OPPORTUNITIES

#### SEC. 301. PURPOSE.

Section 201 of the Child Abuse Prevention and Treatment and Adoption Reform Act of 1978 (42 U.S.C. 5111) is amended—

(1) in the section heading, by striking “CONGRESSIONAL FINDINGS AND DECLARATION OF PURPOSE” and inserting “PURPOSE”;

(2) by striking subsection (a); and

(3) in subsection (b)—

(A) by striking “(b) PURPOSE.—”;

(B) in the matter preceding paragraph (1), by inserting “sexual and gender minority youth” after “particularly older children, minority children,”; and

(C) in paragraph (1), by inserting “services and,” after “post-legal adoption”.

#### SEC. 302. REPORT AND GUIDANCE ON UNREGULATED CUSTODY TRANSFERS.

The Child Abuse Prevention and Treatment and Adoption Reform Act of 1978 (42 U.S.C. 5111 et seq.) is amended by inserting after section 201 the following:

##### “SEC. 202. REPORT AND GUIDANCE ON UNREGULATED CUSTODY TRANSFERS.

“(a) SENSE OF CONGRESS.—It is the sense of Congress that:

“(1) Some adopted children may be at risk of experiencing an unregulated custody transfer because the challenges associated with adoptions (including the child’s mental health needs and the difficulties many families face in acquiring support services) may lead families to seek out unregulated custody transfers.

“(2) Some adopted children experience trauma, and the disruption and placement in another home by unregulated custody transfer creates additional trauma and instability for children.

“(3) Children who experience an unregulated custody transfer may be placed with families who have not completed required child welfare or criminal background checks or clearances.

“(4) Social services agencies and courts are often unaware of the placement of children through unregulated custody transfer and therefore do not conduct assessments on the child’s safety and well-being in such placements.

“(5) Such lack of placement oversight places a child at risk for future abuse and increases the chance that the child may experience—

“(A) abuse or neglect;

“(B) contact with unsafe adults or youth; and

“(C) exposure to unsafe or isolated environments.

“(6) The caregivers with whom a child is placed through unregulated custody transfer often have no legal responsibility with respect to such child, placing the child at risk for additional unregulated custody transfers.

“(7) Such caregivers also may not have complete records with respect to such child, including the child’s birth, medical, or immigration records.

“(8) A child adopted through intercountry adoption may be at risk of not acquiring United States citizenship if an unregulated custody transfer occurs before the adoptive parents complete all necessary steps to finalize the adoption of such child.

“(9) Engaging in, or offering to engage in, unregulated custody transfer places children at risk of harm.

“(b) REPORT TO CONGRESS.—

“(1) IN GENERAL.—Not later than 1 year after the date of the enactment of this section, the Secretary of Health and Human Services shall provide to the Committee on Education and Labor of the House of Representatives, the Committee on Ways and Means of the House of Representatives, the Committee on Finance of the Senate, and the Committee on Health, Education, Labor and Pensions of the Senate a report on unregulated custody transfers of children, including of adopted children.

“(2) ELEMENTS.—The report required under paragraph (1) shall include—

“(A) the causes, methods, and characteristics of unregulated custody transfers, including the use of social media and the internet;

“(B) the effects of unregulated custody transfers on children, including the lack of assessment of a child’s safety and well-being by social services agencies and courts due to such unregulated custody transfer;

“(C) the prevalence of unregulated custody transfers within each State and across all States; and

“(D) recommended policies for preventing, identifying, and responding to unregulated custody transfers, including of adopted children, that include—

“(i) amendments to Federal and State law to address unregulated custody transfers;

“(ii) amendments to child protection practices to address unregulated custody transfers; and

“(iii) methods of providing the public information regarding adoption and child protection.

“(c) GUIDANCE TO STATES.—

“(1) IN GENERAL.—Not later than 180 days after the date specified in subsection (b)(1), the Secretary shall issue guidance and technical assistance to States related to preventing, identifying, and responding to unregulated custody transfers, including of adopted children.

“(2) ELEMENTS.—The guidance required under paragraph (1) shall include—

“(A) education materials related to preventing, identifying, and responding to unregulated custody transfers for employees of State, local, and Tribal agencies that provide child welfare services;

“(B) guidance on appropriate pre-adoption education and post-adoption services for domestic and international adoptive families to promote child permanency; and

“(C) the assistance available through the National Resource Center for Special Needs Adoption under section 203(b)(9).

“(d) DEFINITIONS.—In this section:

“(1) STATE.—The term ‘State’ means each of the several States, the District of Columbia, and any commonwealth, territory, or possession of the United States.

“(2) UNREGULATED CUSTODY TRANSFER.—The term ‘unregulated custody transfer’ means the abandonment of a child, by the child’s parent, legal guardian, or a person or entity acting on behalf, and with the consent, of such parent or guardian—

“(A) by placing a child with a person who is not—

“(i) the child’s parent, step-parent, grandparent, adult sibling, legal guardian, or other adult relative;

“(ii) a friend of the family who is an adult and with whom the child is familiar; or

“(iii) a member of the Federally recognized Indian tribe of which the child is also a member;

“(B) with the intent of severing the relationship between the child and the parent or guardian of such child; and

“(C) without—

“(i) reasonably ensuring the safety of the child and permanency of the placement of the child, including by conducting an official home study, background check, and supervision; and

“(ii) transferring the legal rights and responsibilities of parenthood or guardianship under applicable Federal and State law to a person described in subparagraph (A).”.

**SEC. 303. INFORMATION AND SERVICES.**

(a) NATIONAL RESOURCE CENTER FOR SPECIAL NEEDS ADOPTION.—Section 203(b)(9) of the Child Abuse Prevention and Treatment and Adoption Reform Act of 1978 (42 U.S.C. 5113(b)(9)) is amended by inserting “not later than 2 years after the date of the enactment of the Stronger Child Abuse Prevention and Treatment Act, establish and” before “maintain”.

(b) PLACEMENT WITH ADOPTIVE FAMILIES.—Section 203(b)(11)(C) of the Child Abuse Prevention and Treatment and Adoption Reform Act of 1978 (42 U.S.C. 5113(b)(11)(C)) is amended by striking “such children” and inserting “the children and youth described in the matter preceding paragraph (1) of section 201”.

(c) PRE-ADOPTION SERVICES.—Section 203(c)(1) of the Child Abuse Prevention and Treatment and Adoption Reform Act of 1978 (42 U.S.C. 5113(c)(1)) is amended by striking “post” and inserting “pre- and post-”.

(d) SERVICES.—Section 203(c)(2) of the Child Abuse Prevention and Treatment and Adoption Reform Act of 1978 (42 U.S.C. 5113(c)(2)) is amended by inserting “and the development of such services,” after “not supplant, services”.

(e) ELIMINATION OF BARRIERS TO ADOPTION ACROSS JURISDICTIONAL BOUNDARIES.—Section 203(e)(1) of the Child Abuse Prevention and Treatment and Adoption Reform Act of 1978 (42 U.S.C. 5113(e)(1)) is amended—

- (1) by striking “with, States,” and inserting “with States, Indian Tribes,”; and
- (2) by inserting “, including through the use of web-based tools such as the electronic interstate case-processing system referred to in section 437(g) of the Social Security Act (42 U.S.C. 629g(g))” before the period at the end.

**SEC. 304. STUDY AND REPORT ON SUCCESSFUL ADOPTIONS.**

Section 204 of the Child Abuse Prevention and Treatment and Adoption Reform Act of 1978 (42 U.S.C. 5114) is amended to read as follows:

**“SEC. 204. STUDY AND REPORT ON SUCCESSFUL ADOPTIONS.**

“(a) STUDY.—The Secretary shall conduct a study (directly or by grant to, or contract with, public or private nonprofit research agencies or organizations) on adoption outcomes and the factors (including parental substance use disorder) affecting those outcomes.

“(b) REPORT.—Not later than the date that is 36 months after the date of the enactment of the Stronger Child Abuse Prevention and Treatment Act the Secretary shall submit a report to Congress that includes the results of the study required under subsection (a).”.

**SEC. 305. AUTHORIZATION OF APPROPRIATIONS.**

Section 205(a) of the Child Abuse Prevention and Treatment and Adoption Reform Act of 1978 (42 U.S.C. 5115(a)) is amended—

- (1) by striking “fiscal year 2010” and inserting “fiscal year 2020”; and
- (2) by striking “fiscal years 2011 through 2015” and inserting “fiscal years 2021 through 2025”.

**PURPOSE AND SUMMARY**

The purpose of H.R. 2480 is to reauthorize and strengthen federal programs to prevent and treat child abuse and neglect. After three decades of steady declines in the rate of child abuse and neglect, the country has recently experienced a worrisome up-tick in the rate of children who are found to be victims of maltreatment. H.R. 2480 provides a bipartisan response to this emerging crisis by strengthening federal supports for the treatment of children affected by child abuse and neglect and authorizing expanded federal support for prevention.

H.R. 2480 makes significant updates to the *Child Abuse Prevention and Treatment Act*, P.L. 93–247 (CAPTA), to ensure states have the tools and resources to adequately respond to the recent rise in the rate of child abuse and neglect. The legislation increases the authorization for treatment services to support states in meeting the growing need for such services. It also directs the Secretary to engage in research efforts and provide technical assistance that

helps states effectively treat families who have experienced child abuse and neglect as a result of parental substance use disorder. The bill further addresses the unintended consequences of prior Congressional action to ensure that limited federal resources are directed to families best positioned to benefit from services. In addition, the legislation makes needed updates to the child abuse and neglect data infrastructure to both improve the integrity of available data and correct for shortcomings in current data sharing practices.

This legislation also represents a major modernization to the federal support for services that aim to prevent child abuse and neglect. Consistent with a growing research consensus that prevention services are critically important to keeping children safe from harm, H.R. 2480 increases the authorization level for prevention services to match that of treatment services. Moreover, by directing states to approach prevention through a public health perspective, the bill encourages the development of strong partnerships among the various public agencies that serve vulnerable families with the goal that services address the causes of child abuse and neglect at their root. Finally, H.R. 2480 makes needed updates to adoption assistance provisions to ensure all children are served and to examine and make recommendations to help states prevent unregulated child custody transfers.

#### COMMITTEE ACTION

##### 114TH CONGRESS

On May 11, 2016, the House agreed by a vote of 421–0 to suspend the rules and pass H.R. 4843, the *Infant Plan of Safe Care Improvement Act*, introduced by Committee member Rep. Lou Barletta (R–PA). The bill amended CAPTA section 103(b) to require the Secretary of Health and Human Services (Secretary) to maintain and disseminate best practices related to infant plans of safe care, amended section 106(b) to ensure that plans of safe care are not limited to infants exposed to illegal substances, and added a new section to CAPTA Title I requiring the Secretary to conduct additional monitoring and oversight of states receiving grants under CAPTA Title I. Provisions from H.R. 4843 were added to S. 524.

##### *Other Legislative Action*

On July 8, 2016, the House agreed by a vote of 407–5 to the conference report on S. 524, the *Comprehensive Addiction and Recovery Act* of 2016, introduced by Senator Sheldon Whitehouse (D–RI). The bill, which included multiple provisions addressing the opioid crisis generally, included the CAPTA amendments proposed in H.R. 4843. President Obama signed S. 524 into law on July 22, 2016.

##### 115TH CONGRESS

On November 8, 2017, the Subcommittees on Early Childhood, Elementary, and Secondary Education and Higher Education and Workforce Development held a joint hearing in Washington, DC titled “Close to Home: How Opioids Are Impacting Communities.” The purpose of the hearing was to understand the many ways the increasing prevalence of opioid abuse was affecting the lives of fam-

ilies and communities, including the impact of drug addiction on family life, child welfare and child maltreatment. Testifying before the Subcommittees were: Dr. Leana Wen, Commissioner, Baltimore City Health Department, Baltimore, MD; Mr. Tim Robinson, Founder And CEO, Addiction Recovery Care, Louisa, KY; Ms. Toni Miner, Family Support Partner, Jefferson County, CO; Dr. David Cox, Superintendent, Allegany County, MD.

On May 21, 2018, the House agreed by a vote of 406–3 to suspend the rules and pass H.R. 5890, the *Assisting States’ Implementation of Plans of Safe Care Act*, introduced by Rep. Tom Garrett (R–VA). The bill allowed for the Secretary of Health and Human Services to provide written guidance and, if appropriate, technical assistance to support states in complying with, and implementing CAPTA section 106. H.R. 5890 was considered at the same time as two other bills in the jurisdiction of the Committee dealing with the protection of children in the wake of the opioid crisis that did not directly reference CAPTA, H.R. 5889, the *Recognizing Early Childhood Trauma Related to Substance Abuse Act* of 2018, introduced by Committee member Rep. Dave Brat (R–VA), and H.R. 5991, the *Improving the Federal Response to Families Impacted by Substance Use Disorder Act*, introduced by Committee member Rep. Glenn Grothman (R–WI). Provisions from all three of these bills were included in the text of H.R. 6 (see below).

#### *Other Legislative Action*

On February 9, 2018 the House agreed to the Senate amendment to the House amendment to the Senate amendment of H.R. 1892, the *Bipartisan Budget Act* of 2018. Introduced by Rep. John Larsen (D–CT), H.R. 1892 included provisions from H.R. 253, the *Family First Prevention Services Act* of 2017, requiring states to develop a statewide plan to prevent child abuse and neglect fatalities, and increased funding for prevention activities. President Trump signed the bill into law on March 23, 2018.

On September 28, 2018, the House agreed to the Senate amendment to H.R. 6, the *Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act* (SUPPORT for Patients and Communities Act). H.R. 6, introduced by Rep. Greg Walden (R–OR) which included multiple provisions addressing the opioid crisis generally, specifically amended CAPTA section 105(a) to create a new grant program for states to improve and coordinate their response to ensure the safety, permanency, and well-being of infants affected by substance abuse. President Trump signed H.R. 6 into law on October 24, 2018.

#### 116TH CONGRESS

On March 26, 2019, the Subcommittee on Civil Rights and Human Services held a legislative hearing titled “Strengthening Prevention and Treatment of Child Abuse and Neglect,” which was used to inform the development of H.R. 2480. The Subcommittee heard testimony on the following issues: the prevalence of child abuse and neglect; effective prevention strategies to address child abuse and neglect before it occurs; and unmet need for treatment and prevention. The Subcommittee heard testimony from: Yo Jackson, Professor and Associate Director of the Child Maltreatment

Solutions Network at Penn State University, State College, PA; Judy King, Director of Family Support Programs at the Washington State Department of Children, Youth and Families, Olympia, WA; Bradley Thomas, CEO of Triple P America, Columbia, SC; and LaCrisha Rose, parent, Miami, WV.

On May 2, 2019, Rep. Kim Schrier (D-WA) introduced H.R. 2480, the *Stronger Child Abuse Prevention and Treatment Act*, with Reps. James Comer (R-KY), Lori Trahan (D-MA), Dusty Johnson (R-SD), Suzanne Bonamici (D-OR), Elise Stefanik (R-NY), Chairman Bobby Scott (D-VA), and Ranking Member Virginia Foxx (R-NC) as original co-sponsors. On May 8, 2019, the Committee considered H.R. 2480 in a legislative session and reported it favorably, as amended, to the House of Representative by a voice vote. The Committee considered and adopted the following amendments to H.R. 2480:

Rep. Bonamici offered an Amendment in the Nature of a Substitute (ANS) that made several improvements to H.R. 2480. The ANS narrowed the condition of receipt of funds in Section 103(d) to grants received through Section 106. In Section 106(a)(5)(A), housing agencies were added to the list of service providers participating in state and local networks supporting child and family well-being to establish connections between the child welfare system and agencies that support families in finding and securing stable housing.

The ANS made two important changes to support prevention efforts in tribal communities. The amendment added Indian tribes and tribal organizations to the list of entities that receive equitable distribution of assistance in Section 107 and required the Government Accountability Office (GAO) to examine and make recommendations about issues relating to child abuse and neglect in Indian tribal communities.

Several changes were made in Section 110 through the ANS to clarify the intent of and strengthen the electronic data exchange system. First, language was added to ensure that standards and policies governing the electronic interstate data exchange adhere to federal law in addition to state law. The ANS also clarified that the exchange can only be used for purposes of child safety and is not to be used for any other purpose. To this end, the ANS included a prohibition on the Secretary from accessing or storing data exchanged on the system. The ANS also required that each state provide the Secretary an assurance that its child abuse and neglect registry provides procedural due process for individuals placed on such a registry. Finally, the ANS modified the appropriations reservation for Section 110 such that out of annual funds appropriated in Title I, \$2 million per year for fiscal years 2020 and 2021 and \$1 million per year for fiscal years 2022 through 2025 are reserved for the development and implementation of the electronic data exchange system.

The ANS also included a change in Title II to raise the administrative cap on funds received in excess of fiscal year 2019 state allocations from four percent to ten percent to ensure lead entities are able to effectively monitor and provide oversight of prevention services. The ANS was adopted via voice vote.

During the legislative session the Committee considered several amendments to the ANS:

- Rep. Pramila Jayapal (D-WA) offered, in coordination with Rep. Brett Guthrie (R-KY), an amendment to the ANS ensuring that infants whose prenatal drug exposure is the result of maternal intake of drugs as prescribed by a physician are not reported to child protective services. The amendment was withdrawn with a commitment to work with Committee leadership to improve this language for inclusion in the bill.

- Rep. Lucy McBath (D-GA) offered, in coordination with Rep. Stefanik (R-NY), an amendment to the ANS allowing the Secretary to fund a national hotline for child abuse and neglect. The amendment was adopted via voice vote.

- Rep. Russ Fulcher (R-ID) offered an amendment to the amendment in the nature of the substitute requiring the working group established in Section 110 to generate best practices that ensure due process for individuals included in state child abuse and neglect registries. The amendment was adopted via voice vote.

- Rep. David Trone (D-MD) offered, in coordination with Rep. Ron Wright (R-TX), an amendment to the ANS allowing states to carry out programs or strategies that promote the recruitment, support, or retention of the child welfare workforce. The amendment was adopted via voice vote.

- Rep. Lloyd Smucker (R-PA) offered, in coordination with Rep. Lauren Underwood (D-PA), an amendment to the ANS ensuring the Secretary includes parent substance use disorder as a factor in the study examining adoption outcomes. The amendment was adopted via voice vote.

- Rep. Van Taylor (R-TX) offered, in coordination with Rep. Joe Morelle (D-NY), an amendment to the ANS requiring the Secretary to conduct a study of exemptions to state laws pertaining to the minimum age of marriage and examine how such exemptions affect child safety. The amendment was adopted via voice vote.

- Rep. Susan Wild (D-PA) offered, in coordination with Rep. Glenn “GT” Thompson (R-PA), an amendment to the ANS requiring the Secretary to conduct a study of mandatory reporter state laws and examine differences in rates of referrals related to such state laws. The amendment was adopted via voice vote.

- Rep. Steve Watkins (R-KS) offered, in coordination with Rep. Susie Lee (D-NV), an amendment to the ANS ensuring that no child protective services protocols or systems authorize the separation of a child from their family due solely to poverty. The amendment was adopted via voice vote.

- Rep. Josh Harder (D-CA) offered, in coordination with Rep. Dan Meuser (R-PA), an amendment to the ANS allowing states to carry out activities that reduce child abuse and neglect due to the substance use disorder of a parent. The amendment was adopted via voice vote.

## COMMITTEE VIEWS

### INTRODUCTION

Child abuse and neglect is a public health issue that affects as many as one in seven children in the United States.<sup>1</sup> Child abuse

<sup>1</sup>Centers for Disease Control. *Violence prevention: Child abuse and neglect*. Washington, DC: Author. <https://www.cdc.gov/violenceprevention/childabuseandneglect/riskprotectivefactors.html>.

and neglect, as defined in federal law, is the “act or failure to act on the part of a parent or caretaker that results in the death, serious physical or emotional harm, sexual abuse or exploitation of a child, or an act or failure to act that presents an imminent risk of serious harm.”<sup>2</sup> There are four common types of child abuse and neglect: physical abuse, sexual abuse, emotional abuse, and neglect.<sup>3</sup>

Child abuse and neglect has both short- and long-term negative effects on children and their families. In the short-term, children may suffer significant physical harm, such as cuts, bruises, or broken bones, as well as emotional and psychological harm that may disrupt normative development, causing anxiety and difficulty controlling emotions. In cases of neglect, children may suffer from malnutrition or deprivation from educational and cognitive stimulation.<sup>4</sup>

In the long-term, child abuse and neglect can alter the physical development of the brain itself.<sup>5</sup> Adults who experienced abuse as children are almost three times more likely to experience depressive symptoms than adults who did not experience abuse.<sup>6</sup> Child abuse and neglect can also be detrimental to academic performance—children who experience abuse or neglect are anywhere from 25 to 40 percent more likely to drop out of high school than their peers.<sup>7</sup> They are also nine times more likely to become involved with the criminal justice system.<sup>8</sup>

In addition to the trauma that child abuse and neglect inflicts on each individual child and family who experience maltreatment, child abuse and neglect carries a significant societal cost. In 2012, the Centers for Disease Control (CDC) estimated that each confirmed case of child abuse and neglect has a lifetime cost of \$830,928.<sup>9</sup> Such costs are incurred due to increased health care needs, increased criminal justice costs, increased special education costs, and reduced productivity. Altogether, the CDC estimated that confirmed cases of child abuse and neglect have a total annual cost of \$428 billion.<sup>10</sup>

The *Child Abuse Prevention and Treatment Act*,<sup>11</sup> (CAPTA), is the primary federal law that supports treatment and prevention of child abuse and neglect prior to child entry into the child welfare system. CAPTA provides funding and requirements for state responses to child abuse and neglect as well as funding for research

<sup>2</sup> Pub L. 93–247, 88 Stat. 4 (1974).

<sup>3</sup> Centers for Disease Control. *Violence prevention: Child abuse and neglect*. Washington, DC: Author. <https://www.cdc.gov/violenceprevention/childabuseandneglect/riskprotectivefactors.html>.

<sup>4</sup> *Ibid.*

<sup>5</sup> Child Welfare Information Gateway. (2013). *Long-term consequences of child abuse and neglect*. Washington, DC: U.S. Department of Health and Human Services, Children’s Bureau. [https://www.childwelfare.gov/pubpdfs/long\\_term\\_consequences.pdf](https://www.childwelfare.gov/pubpdfs/long_term_consequences.pdf).

<sup>6</sup> Chapman, D.P., et al. (2004). Adverse childhood experiences and the risk of depressive disorders in adulthood. *Journal of Affective Disorders*, 82, 217–225. <https://pdfs.semanticscholar.org/c8f5/4111f295a998ad4d39f6ad709785bbbca33a.pdf>.

<sup>7</sup> Diette, T.M., Goldsmith, A.H., Hamilton, D., & Darity, W.A. (2017). Child abuse, sexual assault, community violence and high school graduation. *Review of Behavioral Economics*, 4, 215–240.

<sup>8</sup> Child Welfare Information Gateway. (2013). *Long-term consequences of child abuse and neglect*. Washington, DC: U.S. Department of Health and Human Services, Children’s Bureau. [https://www.childwelfare.gov/pubpdfs/long\\_term\\_consequences.pdf](https://www.childwelfare.gov/pubpdfs/long_term_consequences.pdf).

<sup>9</sup> Peterson, C., Florence, C., & Klevens, J. (2018). The economic burden of child maltreatment in the United States, 2015. *Child Abuse and Neglect*, 86, 178–183. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6289633/>.

<sup>10</sup> *Ibid.*

<sup>11</sup> Pub L. 93–247, 88 Stat. 4 (1974).

and technical assistance related to child abuse and neglect. CAPTA also represents the sole federal source of funding for primary prevention of child abuse and neglect. CAPTA funding authorizations, extended most recently in 2010, expired in 2015. A worrisome rise in the rate of child abuse and neglect since the expiration of CAPTA authorizations called for a comprehensive reauthorization of the law to ensure states are meeting increased need for both responses to and prevention of child abuse and neglect.

ADDRESSING THE RISE IN THE PREVALENCE OF CHILD ABUSE AND  
NEGLECT ASSOCIATED WITH THE OPIOID CRISIS

Historically, the United States has generally experienced steady declines in the rate of child abuse and neglect. For the two decades between 1990 and 2009, rates of child abuse and neglect decreased continuously. However, starting at the turn of the decade, rates of abuse and neglect plateaued, and since 2013, rates have risen.<sup>12</sup> This rise has coincided with the emergence of the opioid crisis that has devastated communities across the country. Federal data show that the percentage of victims whose parents abuse drugs has increased rapidly since 2012, from 20 percent to 31 percent.<sup>13</sup> Moreover, data suggest that some of the states hit hardest by the opioid crisis, including New Mexico, Kentucky, and Oklahoma, have shown some of the greatest increases in rates of child abuse and neglect.<sup>14</sup>

The Committee has acted multiple times to address the effects of the opioid crisis on child safety through amendments to CAPTA in recent years.<sup>15</sup> Although prior Committee actions have led to improvements in the federal response to the opioid crisis, more needs to be done to address the full extent of this devastating crisis on vulnerable young children. In response to the 10 percent increase in child abuse and neglect reports the country experienced over the last six years, H.R. 2480 increases the authorization for treatment and response to \$270 million annually. States may direct such funds towards, among other activities, enhancing treatment quality to better serve the multiple needs of families facing substance use disorder or enhancing caseworker professional development to ensure workers are well prepared and fully supported to face the emotionally taxing work of supporting families affected by substance use. Research shows that in some states, as much as 40 percent of the child welfare workforce turns over each year.<sup>16</sup> Such high turnover rates can lead to lower quality services and poor outcomes for families and children who are in most need of quality supports. Provisions throughout H.R. 2480 promote caseworker education and professional development. When the Committee re-

<sup>12</sup>Child Help. (2017). *Child maltreatment: The latest report*. <https://www.childhelp.org/blog/child-maltreatment-latest-report/>.

<sup>13</sup>U.S. Department of Health and Human Services, Children's Bureau. (2013). *Child maltreatment 2012*. Washington, DC: Author. <https://www.acf.hhs.gov/cb/resource/child-maltreatment-2012>; U.S. Department of Health and Human Services, Children's Bureau. (2019). *Child maltreatment 2017*. Washington, DC: Author. <https://www.acf.hhs.gov/sites/default/files/cb/cm2017.pdf>.

<sup>14</sup>Collins, L. (2017). *What's behind the three-year rise in federal child abuse numbers?* Deseret News. <https://www.deseretnews.com/article/865672546/Federal-child-abuse-figures-rose-for-third-year-in-a-row-and-neglect-is-at-the-top-of-the-list.html>.

<sup>15</sup>See *supra* "Committee Actio

<sup>16</sup>Casey Family Programs. (2017). *How does turnover affect outcomes and what can be done to address retention?* Washington, DC: Author. <https://www.casey.org/turnover-costs-and-retention-strategies/>.

fers to professional development and education in Secs. 106(b)(2)(A)(v) and 106(b)(2)(D)(vii), the change from “training” to “education” or “professional development” is not meant to change current practice.

Several other provisions throughout H.R. 2480 also address the need for further Congressional action related to the rise in child abuse and neglect related to the opioid epidemic. For example, H.R. 2480 directs the Secretary to conduct research and provide technical assistance focused on improving service delivery for families experiencing substance use disorder so that such families receive effective treatment that ensures children’s safety and well-being. Moreover, H.R. 2480 provides the Secretary the discretion to award grants to states, Indian Tribes, or organizations to carry out strategies that reduce child abuse and neglect due to parental substance use and to establish a hotline where youth and adults seeking help can call for immediate support. H.R. 2480 also supports states in creating and expanding partnerships among public and private agencies that support families involved in the child welfare system, including substance use disorder treatment providers, so that families receive comprehensive supports to address their complex needs.

The Committee is also committed to addressing the unintended consequences of prior Congressional action on the issue of parental substance use disorder. Congress amended CAPTA through the *Comprehensive Addiction and Recovery Act of 2016*,<sup>17</sup> to ensure that plans of safe care were not limited to infants exposed to illegal substance abuse. Although this change was intended to support infants whose exposure to substance abuse resulted from legal opioid mediation, it has had unintendedly broad consequences. According to a report from the GAO, many states have interpreted this change in legislation to mean that any child exposed to any drug in utero should receive a plan of safe care and be reported to child protective services.<sup>18</sup> Further, 17 states now initiate child protective services investigations for all drug-affected infants, regardless of the type of substance to which such infants were exposed. This represents an overly broad interpretation of the law and has led to the misallocation of scant resources to families who do not need to be investigated. Moreover, these policies likely create a disincentive for mothers from taking needed prescription medication during pregnancy and may even deter mothers seeking critically important prenatal care. As was discussed at the Committee markup, we continue to work to ensure that plans of safe care continue to support vulnerable infants but do not have negative consequences for mothers who are taking the necessary steps to maintain their and their baby’s health intact during pregnancy.

#### STRENGTHENING THE FOCUS ON PREVENTION FOR STRONGER FAMILIES

In addition to supporting the treatment of children and families who have experienced child abuse or neglect, the federal government also plays a critical role in funding prevention efforts that protect vulnerable children from ever experiencing child abuse and

<sup>17</sup>Pub. L. 114–198, 130 Stat. 695 (2016).

<sup>18</sup>U.S. Government Accountability Office. (2018). *Substance-affected infants: Additional guidance would help states better implement protections for children*. Washington, DC: U.S. Government Printing Office.

neglect. Prevention efforts that focus on strengthening families have been shown to effectively reduce instances of child abuse and neglect, sparing children from the lifelong consequences of maltreatment.<sup>19</sup> Research shows that home visiting programs, for example, reduce instances of child abuse and neglect by as much as 22 percent state-wide.<sup>20</sup> Preliminary evidence also shows that peer-to-peer support groups can effectively reduce child abuse and neglect and increase parent resiliency.<sup>21</sup> Cost-benefit analyses demonstrate that investments in prevention yield significant savings as they reduce costs associated with increased health care and special education provisions, and criminal justice involvement.

Evidence shows that prevention strategies are effective and can yield significant cost-savings.<sup>22</sup> The Committee believes Congress should fund prevention at levels that can fully meet the need of families across the country. H.R. 2480 follows work from last Congress and represents the next step forward on this path toward better prevention. For example, the bill significantly strengthens the quality of prevention services by encouraging states to take a public health approach toward prevention of child abuse and neglect that builds strong connections between child welfare agencies and other public agencies that serve vulnerable populations. Comprehensively supporting the complex needs of vulnerable families is a vital component in tackling the root causes of child abuse and neglect.

In order to support increased quality in and scope of prevention services, H.R. 2480 increases the authorization for prevention activities to match the authorization level provided for treatment, which signals the Committee's acknowledgement that prevention is key to improving children's lives. Appropriation at the authorized amount will allow for an expansion of both primary and targeted services that could reach as many as 3 million children and families a year and yield as much as \$2.3 billion in savings annually.

#### IMPROVING DATA INFRASTRUCTURE TO BETTER UNDERSTAND AND RESPOND TO CHILD ABUSE AND NEGLECT

Much of the data on which Congress and experts across the country rely to understand the scope of child abuse and neglect comes directly from states. Although CAPTA requires states to provide data on child abuse and neglect to the Secretary, the law does not set guidelines for how such data should be measured or collected. This system provides states with the autonomy to gather and report data as they see fit. Differences in state methodologies for collecting data, though supportive of state flexibility, can represent a

<sup>19</sup> Fortson, B.L., Klevens, J., Merrick, M.T., Gilbert, L.K., & Alexander, S.P. (2016). *Preventing child abuse and neglect: A technical package for policy, norm, and programmatic activities*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. <https://www.cdc.gov/violenceprevention/pdf/CAN-Prevention-Technical-Package.pdf>.

<sup>20</sup> Administration for Children and Families. (n.d.). Reductions in child maltreatment. <https://homvee.acf.hhs.gov/Outcome/2/Reductions-in-Child-Maltreatment/4/1>; Fitzgerald, M. (2018). *New evidence suggests home visiting can prevent child neglect*. The Chronicle of Social Change. <https://chronicleofsocialchange.org/child-welfare-2/new-evidence-home-visiting-can-prevent-child-neglect>.

<sup>21</sup> The California Evidence-Based Clearinghouse. (2018). *Parents Anonymous*. <https://www.cebc4cw.org/program/parents-anonymous/>.

<sup>22</sup> Ringel, J.S. et al (2017). *Improving child welfare outcomes: Balancing investment in prevention and treatment*. Washington, DC: RAND Corporation; Evans, A. & Shoemaker, J.A. (2016). *Early childhood home visitation programs in Arizona: A benefit-cost analysis*. Phoenix, AZ: Arizona Department of Health Services.

significant limitation to our understanding of the true scope of child abuse and neglect. Recently, the Commission to Eliminate Child Abuse and Neglect Fatalities<sup>23</sup> reported that due to the lack of uniform standards for data collection, many states undercount the number of child fatalities and near fatalities that result from child abuse and neglect.<sup>24</sup> Estimates show that state data capture *only half* of all children who die following instances of abuse and neglect.<sup>25</sup>

Without the appropriate tools to truly understand how many young lives are affected by this issue, Congress cannot adequately respond. H.R. 2480 addresses this limitation by requiring the Secretary to develop uniform standards for the tracking and counting of fatalities and near fatalities so that all children whose lives are tragically lost to abuse and neglect are properly identified and the full scope of the issue is understood.

Another major limitation related to current child abuse and neglect data practices centers around the sharing of these data. States collect and store information related to child protective services cases on state-level child abuse and neglect registries. Such registries play a critical role in ensuring child safety by providing historical information that informs case workers' responses to new reports of abuse and neglect. Specifically, case workers can use the data on each family's history of child abuse and neglect to tailor their responses and better allocate scarce time and monetary resources to ensure the safety and well-being of all children.

It is vital for states to have access to the information contained in these registries. When parents or caregivers who have abused children move across state lines, that family's prior history is not known to the new state. As such, case workers in the new state are not able to respond to reports of abuse and neglect with the proper and necessary measures to keep children safe. This limitation has resulted in several fatal cases of child abuse and neglect.<sup>26</sup>

H.R. 2480 provides a bold response to this calamitous problem. The legislation ensures states are able to address shortcomings of current data infrastructure so that no more children are lost due to the inability to share data between states. Specifically, H.R. 2480 builds on state-level child welfare system data improvement initiatives enacted through the *Family First Prevention Services Act* to put in place the technological infrastructure for states to easily, quickly, and securely share data about families who have come into contact with child protective services. This will mean that when a family comes to the attention of child protective services in one state, case workers will have the tools to immediately learn whether the family has a history of child abuse and neglect in their prior states of residence.

<sup>23</sup> Established by the *Protect Our Kids Act of 2012*, Pub. L. No. 112-275, 126 Stat. 2460 (2013).

<sup>24</sup> Commission to Eliminate Child Abuse and Neglect Fatalities. (2016). *Within our reach: A national strategy to eliminate child abuse and neglect fatalities*. Washington, DC: Government Printing Office.

<sup>25</sup> *Ibid.*

<sup>26</sup> Edwards, J. (2018). Disabled 11-year-old girl was forced to stand for hours, beaten until she died, prosecutor says. *The Virginian-Pilot*. [https://pilotonline.com/news/local/crime/article\\_e07feb16-6431-11e8-998f-9f1e365c3e53.html](https://pilotonline.com/news/local/crime/article_e07feb16-6431-11e8-998f-9f1e365c3e53.html); Neuman, S. (2018). Family in SUV may have intentionally driven off cliff, police say. Washington, DC: NPR. <https://www.npr.org/sections/thetwo-way/2018/04/02/598754781/family-in-suv-may-have-intentionally-driven-off-cliff-police-say>.

The electronic data exchange system is meant to be limited solely to uses related to child safety. Only non-federal governmental entities will be allowed to access the electronic data exchange system and only in cases where doing so would contribute to the safety of a child. As outlined above, the intent of the electronic data exchange system will be for case workers to learn information about a family's prior history with child abuse and neglect in other states. Governmental agencies will also be allowed to use the electronic data exchange system for other activities as long as those activities are directly related to ensuring the safety of a child.

During the initial two years of implementation, the Secretary will conduct a pilot of the electronic data exchange system within a limited set of states. The goal of this pilot phase will be to generate recommendations for the policies and governance standards that undergird the electronic data exchange system to ensure the success of the full implementation of the electronic data exchange system. Full implementation, as described in the legislation, refers to the implementation of the electronic data exchange system across all states.

The Secretary will also convene a working group tasked with making recommendations on: (1) improving state-to-state communication through the electronic data exchange system; (2) reducing barriers to and establishing best practices for States to provide timely responses to requests made on the electronic data exchange system; (3) making publicly available on state websites the definitions and standards of substantiated child abuse and neglect in each state; (4) identifying similarities and discrepancies in background check requirements across CAPTA, the *Child Care and Development Block Grant Act of 1990*,<sup>27</sup> and part E of title IV of the *Social Security Act*;<sup>28</sup> and, (5) ensuring due process for individuals placed on state child abuse and neglect registries.

In drafting these provisions, the Committee was concerned that state child abuse and neglect registries may lack sufficient due process protections for individuals placed on such registries. In recognition of this fact, the Committee has taken steps to encourage improvements in due process in state child abuse and neglect registries prior to the full implementation of the electronic data exchange system. First, as described above, the working group will be tasked with providing recommendations on how to ensure due process in state child abuse and neglect registries. The working group will make recommendations concerning the level of evidence necessary for inclusion in the registry, the process for notifying individuals of inclusion in the registry, the process for individuals to challenge inclusion in the registry, and the length of time an individual's record should remain in the registry. The working group will be further tasked with providing recommendations for when records on the registry may be made accessible to: the public, those performing employment checks, and those accessing the electronic data exchange system. Following the provision of such recommendations and prior to states participating in the electronic data exchange system, each state will be required to provide to the Secretary an assurance that its child abuse and neglect registry

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<sup>27</sup> 42 U.S.C. 9858 et seq. (2012).

<sup>28</sup> 42 U.S.C. 670 et seq. (2012).

provides procedural due process protections to individuals placed on the registry. The Committee envisions these provisions as strong safeguards for due process protections.

The Secretary may rely on recommendations from the pilot and the working group to inform the full implementation of the electronic data exchange system nation-wide. States will have until December 31, 2027 to fully participate in the electronic data exchange system. In order to ensure a successful, thoughtful approach to the development and implementation of the electronic data exchange system, H.R. 2480 reserves \$2 million in appropriations per year for fiscal years 2020 and 2021 for activities related to the electronic data exchange system, particularly the completion of the pilot. The legislation reserves \$1 million in appropriations per year for fiscal years 2022 through 2025 for the full implementation of the electronic data exchange system.

#### KEEPING CHILDREN SAFE FROM SYSTEMIC CHILD SEXUAL ABUSE

Since the last CAPTA reauthorization, information regarding the prevalence of systemic child sexual abuse in organizations that serve children has come to the attention of Congress and the public generally. These acts occur in the shadows of the organizations Americans everywhere entrust their children with. This is the time to act to prevent any more children from falling prey to these abuses.

H.R. 2480 requires that each state task force established under current law examine and make recommendations focused on preventing systemic child sexual abuse. To do so, state task forces shall be expanded to include family court judges, individuals from religious organizations, and individuals from youth-serving organizations, such as those currently implicated in systemic sexual abuse cases across the nation. State task forces are also strengthened by the participation of representatives from Children's Advocacy Centers (CACs), the national experts supporting children when interacting with law enforcement. CACs help young victims successfully navigate cases related to sexual abuse without inflicting additional trauma on the victim.

H.R. 2480 charges state task forces with the important responsibility to examine how to help prevent child sexual abuse from occurring in any organization serving children. The bill charges the task forces with making recommendations on how to detect systemic child sexual abuse and how to prevent such abuse, including through an examination of the efficacy of State laws related to systemic child sexual abuse that deter or prevent such abuse. The Committee expects that this examination of deterrence required in the legislation will include examining statutes that provide remedies for victims of child sexual abuse.

#### SAFEGUARDING POPULATIONS VULNERABLE TO CHILD ABUSE AND NEGLECT

The tragedy of child abuse and neglect is not restricted to any particular background or socioeconomic status; it impacts children and families from all walks of life. Yet, certain populations have historically been more vulnerable to abuse and neglect than others. Understanding which populations are truly vulnerable allows states and the federal government to target resources to those most

at-risk, and determining which disparities are driven by bias will allow agencies to make systemic improvements to child welfare systems.

Children below age four, and in particular infants below the age of one, are at highest risk of becoming victims of child abuse and neglect.<sup>29</sup> Children under the age of four are three times more likely to be abused than older teenagers, and infants below age one are four times as likely.<sup>30</sup> Supporting parents during the transition into parenthood is one of the most effective strategies in the fight against child abuse and neglect. As such, several provisions in H.R. 2480 encourage states to focus prevention efforts on the parents of young children. The bill also allows the Secretary to fund demonstration projects aimed at identifying and testing effective practices to improve the detection and management of sentinel injuries, the injuries indicative of potential abuse in infants.

Research also demonstrates that Black and Native American children are disproportionately represented in the child protective services system.<sup>31</sup> Although Black children only represent 14 percent of the child population, they represent 23 percent of all child abuse and neglect victims. Native Americans represent 1.3 percent of all victims despite representing only 0.9 percent of the child population. Research shows that racial biases account for a large proportion of these disparities.<sup>32</sup> H.R. 2480 directs states to address such inequities by engaging in efforts to reduce racial bias in child protective services, and tasks the Secretary with providing technical assistance on such efforts and with establishing methods that promote racial equity in the child welfare system. The legislation also ensures that prevention funding goes towards improving access to such services for diverse populations, including racial and ethnic minorities.

Inequities by socioeconomic status also persist in child protective services.<sup>33</sup> Due to the complex association between neglect and socioeconomic status, many families who struggle to provide for their children can become at risk of entering the child welfare system. Yet this does a disservice to young children and their families. Removing children unnecessarily from loving homes can inflict long-lasting trauma. Instead, families struggling with poverty should receive services and benefits that empower them to become financially stable so that they can stay ensure a safe and healthy childhood for their children. H.R. 2480 promotes this approach by directing the Secretary to provide grants to entities to carry out programs or strategies that reduce child neglect due to economic insecurity. Further, provisions in H.R. 2480 ensure that children are not removed from their families due solely to poverty.

Although the youngest children are most vulnerable to child abuse and neglect, exemptions for the minimum age of marriage across almost every state in the nation place youth at risk of abuse at the hands of adult perpetrators. In 49 of the 50 states in the

<sup>29</sup> Centers for Disease Control. *Violence prevention: Child abuse and neglect*. Washington, DC: Author. <https://www.cdc.gov/violenceprevention/childabuseandneglect/riskprotectivefactors.html>.

<sup>30</sup> Child Trends. (2018). *Child maltreatment*. Bethesda, MD: Author. <https://www.childtrends.org/indicators/child-maltreatment>.

<sup>31</sup> Ibid.

<sup>32</sup> Child Welfare Information Gateway. (2016). *Racial disproportionality and disparity in child welfare*. [https://www.childwelfare.gov/pubpdfs/racial\\_disproportionality.pdf](https://www.childwelfare.gov/pubpdfs/racial_disproportionality.pdf).

<sup>33</sup> Eckenrode, J., Smith, E. G., McCarthy, M. E., & Dineen, M. (2014). Income inequality and child maltreatment in the United States. *Pediatrics*, 133, 454–461.

country, statutory exceptions allow children under the age of 18 to enter into marriage.<sup>34</sup> In seven states, the minimum age of marriage can be waived for girls who become pregnant.<sup>35</sup> Allowing for such provisions can have dangerous consequences for many young Americans. In many states around the country, an act that would be considered child sexual abuse in any other context is sanctioned if that young child is forced into marriage. H.R. 2480 seeks to shed light onto the effect of child marriage on the safety of children across the nation. The legislation requires the Secretary to examine state laws relating to the minimum marriage age and how such laws affect child safety. Such study will include an examination of state exceptions to the minimum marriage age as well, and a thorough investigation into whether such exceptions allow children to be married without their consent.

STRENGTHENING ADOPTIONS TO ENSURE THE SAFETY OF ADOPTED  
CHILDREN

In September 2013, an investigative report uncovered the quiet and devastating phenomenon of unregulated child custody transfers.<sup>36</sup> Also referred to as “re-homing,” unregulated child custody transfers occur when parents seek new homes for their children outside the purview of the courts or the child welfare system. A 2015 GAO report identified several social media sites in which parents across the country were looking to find new homes for their children outside legal mechanisms.<sup>37</sup>

The practice of placing children under the care of unvetted and oftentimes unknown adults can have grave consequences for already vulnerable children. The GAO found that many children who underwent unregulated custody transfers were internationally adopted children who suffered from serious behavioral and mental health conditions in need of specific and careful care to thrive.<sup>38</sup> The GAO found that the burden of taking care of children with such high needs was in many cases the leading factor in prompting parents to seek new homes. Placing high-needs children in new homes without providing the new caregivers any of the supports available through legal adoptions places children at even higher risk of failing to thrive.

H.R. 2480 is the first federal law to address the issue of unregulated custody transfers. In response to the lack of comprehensive data on unregulated custody transfers, the legislation requires the Secretary to examine the prevalence as well as the causes and effects of such transfers. In addition, the legislation requires the Secretary to provide guidance and technical assistance to states on policies that prevent, identify, and respond to unregulated custody transfers. H.R. 2480 also strengthens post-legal adoption services, which the GAO identified as important supports that may reduce instances of unregulated custody transfers. Moreover, the bill

<sup>34</sup> Tahirih Justice Center. (2018). Understanding state statutes on minimum marriage age and exceptions. Falls Church, VA: Author. <https://www.tahirih.org/wp-content/uploads/2016/11/2018-State-Marriage-Age-Requirements-Statutory-Compilation.pdf>.

<sup>35</sup> *Ibid.*

<sup>36</sup> Twohey, N. (2013). *Americans use the internet to abandon children adopted from overseas*. London, UK: Reuters News.

<sup>37</sup> U.S. Government Accountability Office. (2015). *Child welfare: Steps have been taken to address unregulated custody transfers of adopted children*. Washington, DC U.S. Government Printing Office.

<sup>38</sup> *Ibid.*

strengthens federal supports for adoptions of sexual and gender minority youth, who are disproportionately represented in the foster care system.

#### CONCLUSION

Congress has charged this Committee with the legislative responsibility to assist in eradicating the child abuse and neglect crisis. As the opioid epidemic continues to devastate families all across the country, Congress must do more to help vulnerable children. H.R. 2480 represents a bold, bipartisan response to this crisis. This legislation, which has received support from the American Academy of Pediatrics, the American Psychological Association, and the National Child Abuse Coalition,<sup>39</sup> will improve the lives of millions of children by ensuring that those who have experienced abuse or neglect receive high-quality treatment services and those at-risk of abuse or neglect receive prevention services that prevent harm from ever occurring. The legislation will also improve the child abuse and neglect data infrastructure to ensure that states collect accurate and reliable data on child fatalities and that states are able to access information on previous incidents to support data-informed responses to reports of child abuse and neglect. At the same time, H.R. 2480 strengthens due process protections and provides education for workers in the child protective services system about parent and family rights in order to ensure fair investigations and combat unfounded and false reports. The Committee recommends Congress adopt the amendments to H.R. 2480 passed at the Committee markup and pass this bill that will invest in families to improve the health and safety of our nation’s children.

#### SECTION-BY-SECTION ANALYSIS

##### *Section 1—Short title*

This Act is called “The Stronger Child Abuse Prevention and Treatment Act.”

##### *Section 2—Table of contents*

This section provides the table of contents of the bill.

#### TITLE I—GENERAL PROGRAM

##### *Section 101—Repeal of findings*

This section repeals Section 2 (Congressional Findings) of the “Child Abuse and Prevention Treatment Act” (CAPTA).

##### *Section 102—Repeal of Advisory Board on Child Abuse and Neglect*

This section repeals Section 102 (Advisory Board on Child Abuse and Neglect) of CAPTA.

<sup>39</sup> <https://edlabor.house.gov/download/american-academy-of-pediatrics-supports-the-stronger-child-abuse-prevention-and-treatment-act-capta>; <https://edlabor.house.gov/download/american-psychological-association-supports-the-stronger-child-abuse-prevention-and-treatment-act-capta>; <https://edlabor.house.gov/imo/media/doc/Coalition%20Letter%20on%20Stronger%20CAPTA.pdf>.

*Section 103—National clearinghouse for information relating to child abuse*

This section amends Section 103 of CAPTA to require the Secretary of Health and Human Services (HHS) to develop and issue regulations establishing uniform national standards for tracking and reporting of child fatalities and near-fatalities resulting from child abuse and neglect through negotiated rulemaking. This provision would permit all states to maintain current definitions or descriptions of such fatalities for all purposes other than tracking and reporting.

*Section 104—Research and assistance activities*

This section amends Section 104 of CAPTA to:

- Update and streamline allowed topics for research and technical assistance conducted by the Secretary of HHS to focus on issues that have been understudied and are relevant to current challenges faced by the child welfare workforce. These updated research topics include:
  - Disseminating evidence-based treatments for individuals and families experiencing trauma due to child abuse or neglect;
  - Improving outcomes for families experiencing domestic violence or substance use disorders; and
  - Determining methods for ensuring all families, regardless of racial background, are served in the child welfare system.
- Repeal demonstration grants, which will be funded through grants in Section 105.

*Section 105—Grants to States, Indian tribes or tribal organizations, and public or private agencies and organizations*

This section amends Section 105 of CAPTA to:

- Update and streamline the purposes of grants made under this section to focus on providing effective treatment and prevention services. Topics of focus for such grants include:
  - Providing professional development for workers in the prevention, identification, and treatment of child abuse and neglect;
  - Addressing traumatic stress in families who experience high levels of adverse childhood experiences;
  - Improving coordination within the child welfare system;
  - Reducing findings of child neglect due to the economic insecurity of a family;
  - Reducing findings of child neglect due to the substance use disorder of a parent or caregiver;
  - Improving primary prevention programs at the community level;
  - Providing for a 24-hour, national hotline; and
  - Developing education for mandatory reporters.
- Require that projects funded through grants under this section establish quantifiable goals and submit to the Secretary of HHS an evaluation of effectiveness.
- Require that the Secretary of HHS only award continuing grants to projects that demonstrate effectiveness.

*Section 106—Grants to States for child abuse or neglect prevention and treatment programs*

This section amends Section 106 of CAPTA to:

- Update and streamline the purposes of state grants meant to improve and support child protective service systems to focus on helping states provide effective services and develop an educated workforce.
- Update the requirements of state plans to ensure that states develop thorough, strategic plans to treat and prevent child abuse and neglect in consultation with families and professionals involved in child welfare systems.
- Require that states address reports concerning a child’s living arrangements or subsistence needs through services or benefits and that children are not removed from their homes due to poverty.
- Require that all states establish three citizen review panels and require that reports from citizen review panels to the state and the public include certain information.

*Section 107—Miscellaneous requirements*

This section amends Section 108 of CAPTA to require that state task forces established under Section 107 of current CAPTA law make recommendations to their state for how to detect and prevent systemic child sexual abuse. The recommendations will also:

- Highlight best practices for providing age appropriate education for children, and education for parents about risk factors or signs of potential child sexual abuse;
- Examine current state laws addressing child sexual abuse; and
- Examine the feasibility of making available the relationship of the perpetrator to the victim.

The task force is required to submit such recommendations to the state and the state is required to report to the Secretary of HHS the status of adopting such recommendations.

*Section 108—Reports*

This section amends Section 110 of CAPTA to repeal studies that have been previously completed and requires the Secretary of HHS to carry out four new studies. One study will examine the challenges to and best practices for the scalability of treatments that reduce the trauma resulting from child abuse and neglect and reduce revictimization. A second study will examine and make recommendations concerning child abuse and neglect in Indian Tribal communities. A third study will examine state laws related to mandatory reporting of child abuse and neglect and state differences in referrals and investigations of child abuse and neglect due to differences in such laws. A fourth study will examine state laws regarding the minimum marriage age, the prevalence of marriage involving a child under the minimum marriage age, and the extent to which exceptions to the minimum marriage age impact children’s safety.

*Section 109—Authorization of appropriations*

This section amends Section 112 of CAPTA to set the authorization level for Title I at \$270 million for fiscal year 2020 and such sums as may be necessary for fiscal years 2021 through 2025. The section also places a cap of \$100 million on discretionary activities

and requires states to use no more than two percent of appropriations exceeding fiscal year 2019 levels on administrative expenses.

*Section 110—National electronic interstate data exchange system*

This section requires the Secretary of HHS to establish an electronic interstate data exchange system that allows states to share information from their child abuse and neglect registries with other states for purposes of child safety. Prior to rolling out the data exchange system nationwide, the Secretary must convene a working group to provide recommendations on best practices for data sharing and due process on state registries and must conduct a pilot of the data exchange system. States that receive funds from grants outlined in Section 106 are required to participate in the electronic interstate data exchange system, to the fullest extent possible, by 2027 and must provide an assurance that their state child abuse and neglect registry provides due process for individuals placed on the registry. There are \$2 million reserved from funds appropriated in Section 109 to carry out the work of this section in each of fiscal years 2020 and 2021, and \$1 million in each of fiscal years 2022 through 2025.

*Section 111—Technical and conforming amendments*

This section makes technical and conforming amendments to CAPTA.

TITLE II—COMMUNITY-BASED GRANTS FOR THE PREVENTION OF CHILD ABUSE AND NEGLECT

*Section 201—Purpose and authority*

This section amends Section 201 of CAPTA to:

- Establish the purposes of Title II as: (1) establishing and maintaining support for community-based family strengthening services and statewide systems-building approaches that ensure the development, operation, expansion, coordination, and evaluation of services, initiatives, programs, and activities that prevent child abuse and neglect, and (2) promoting improved access for diverse populations.
- Update the purposes of Title II grants to focus on the development of statewide networks of family strengthening services that provide a continuum of preventive services.

*Section 202—Eligibility*

This section amends Section 202 of CAPTA to ensure Governors consider all entities requesting to be designated as lead entities and to ensure that the lead entity has demonstrated ongoing meaningful partnerships with parents and will work in partnership with vulnerable and diverse populations.

*Section 203—Amount of grant*

This section amends Section 203 of CAPTA to increase the reservation for Indian tribes and tribal organizations and migrant programs to five percent, except during years when increasing the reservation would cause the total amount allotted to states to be lower than the amount allotted in fiscal year 2019. This section also re-

quires the lead entity to use no more than 10 percent of appropriations exceeding fiscal year 2019 levels on administrative expenses.

*Section 204—Application*

This section amends Section 204 of CAPTA to:

- Update the term “community-based and prevention-focused programs and activities designed to strengthen and support families” to “community-based family strengthening services.”
- Require states to describe their capacity to involve parents in decision making and their plan for carrying out the requirements of this title.
- Require states to describe how they plan to incorporate evidence-based research in the process of selecting community-based programs.
- Require states to provide an assurance that when issuing regulations to improve community-based family strengthening services, states take into account how new regulations impact activities under this act in an effort to avoid duplication, minimize compliance costs, and maximize local flexibility, when appropriate.

*Section 205—Local program requirements*

This section amends Section 205 of CAPTA to:

- Require that grants from the lead agency be used to develop, implement, operate, expand, and enhance community-based family strengthening services designed to prevent child abuse and neglect.
- Require that, in awarding grants, the lead agency consider the grantee’s capacity to address the identified needs of the community and to form collaborations with parents and other service providers.
- Require that funds from the lead agency be used for community-based family-strengthening services designed to prevent child abuse and neglect, which may include a variety of activities.

*Section 206—Performance measures*

This section amends Section 206 of CAPTA to update the term “community-based and prevention-focused programs and activities designed to strengthen and support families” to “community-based family strengthening services” and to require that states report specific data on the number of programs funded and the number of families served to the Secretary of HHS.

*Section 207—National network for community-based family resource programs*

This section amends Section 207 of CAPTA to restrict funds for technical assistance to no more than 5 percent of appropriations for this title.

*Section 208—Definitions*

This section amends Section 208 of CAPTA to update the term “community-based and prevention-focused programs and activities to prevent child abuse and neglect” to “community-based family strengthening services.”

*Section 209—Rule of construction*

This section creates a special rule so that no grandparents, kinship care providers, foster parents, adoptive parents, or persons acting in a parental role can be prohibited from receiving or participating in services funded under this title.

*Section 210—Authorization of appropriations*

This section amends Section 209 of CAPTA to set the authorization level for Title II at \$270 million for fiscal year 2020 and such sums as may be necessary for fiscal years 2021 through 2025. This section also allows states to provide in-kind contributions towards the amount of the state match that exceeds the state match in fiscal year 2019.

*Section 211—Study and report*

This section requires the Secretary of HHS to carry out a new study examining: (1) how many families and children are served annually in relation to appropriations levels over the three years following the enactment of the reauthorization and (2) program effectiveness. The Secretary of HHS is required to provide the Committee on Education and Labor of the House of Representatives a report summarizing the results of the study no later than four years after the enactment of this Act.

## TITLE III—ADOPTION OPPORTUNITIES

*Section 301—Purpose*

This section repeals Subsection 201(a) (Findings) of CAPTA and amends Section 201(b) to include sexual and gender minority youth in the list of children who would benefit from adoption and includes post-legal adoption services in the purpose of this title.

*Section 302—Report and guidance on unregulated custody transfers*

This section requires the Secretary of HHS to draft a report examining unregulated custody transfers in the United States, including, among other information, recommendations for preventing, identifying, and responding to such transfers. The section further requires the Secretary of HHS to issue guidance and technical assistance to states based on the recommendations that arise from the report.

*Section 303—Information and services*

This section amends Section 203 of CAPTA to enhance adoption services and to include Indian tribes as possible grantees for funding aimed at improving cross-jurisdictional adoptions.

*Section 304—Study and report on successful adoptions*

This section amends Section 204 of CAPTA to repeal studies that have been previously completed and requires that the Secretary complete a study examining factors, one of which shall be parental substance use disorder, that affect adoption outcomes.

*Section 305—Authorization of appropriations*

This section amends Section 205 of CAPTA to extend the authorization from fiscal year 2020 through fiscal year 2025.

## EXPLANATION OF AMENDMENTS

The ANS is explained in other descriptive portions of this report.

## APPLICATION OF LAW TO THE LEGISLATIVE BRANCH

H.R. 2480 does not apply to terms and conditions of employment or to access to public services or accommodations within the legislative branch.

## UNFUNDED MANDATE STATEMENT

Pursuant to Section 423 of the *Congressional Budget and Impoundment Control Act* (as amended by Section 101(a)(2) of the *Unfunded Mandates Reform Act*, Pub. L. 104–4), the Committee adopts as its own the estimate of federal mandates regarding H.R. 2480, as amended, prepared by the Director of the Congressional Budget Office.

## EARMARK STATEMENT

In accordance with clause 9 of rule XXI of the Rules of the House of Representatives, H.R. 2480 does not contain any congressional earmarks, limited tax benefits, or limited tariff benefits as described in clauses 9(e), 9(f), and 9(g) of Rule XXI.

## ROLL CALL VOTES

In compliance with clause 3(b) of rule XIII of the Rules of the House of Representatives, the Committee advises that no roll call votes occurred during the Committee's consideration of H.R. 2480.

## STATEMENT OF PERFORMANCE GOALS AND OBJECTIVES

Pursuant to clause (3)(c) of rule XIII of the Rules of the House of Representatives, the goals of H.R. 2480 are to reauthorize and strengthen federal programs to prevent and treat child abuse and neglect.

## DUPLICATION OF FEDERAL PROGRAMS

Pursuant to clause 3(c)(5) of rule XIII of the Rules of the House of Representatives, the Committee states that no provision of H.R. 2480 establishes or reauthorizes a program of the Federal Government known to be duplicative of another federal program, a program that was included in any report from the Government Accountability Office to Congress pursuant to section 21 of Public Law 111–139, or a program related to a program identified in the most recent Catalog of Federal Domestic Assistance.

## HEARINGS

For the purposes of Section 103(i) of H. Res. 6 for the 116th Congress—

On March 26, 2019, the Subcommittee on Civil Rights and Human Services held a legislative hearing titled “Strengthening Prevention and Treatment of Child Abuse and Neglect,” which was used to inform the development of H.R. 2480. The Subcommittee heard testimony on the following topics: the prevalence of child abuse and neglect; effective prevention strategies to address child

abuse and neglect before it occurs; and unmet need for treatment and prevention. The Subcommittee heard testimony from: Yo Jackson, Professor and Associate Director of the Child Maltreatment Solutions Network at Penn State University, State College, PA; Judy King, Director of Family Support Programs at the Washington State Department of Children, Youth and Families, Olympia, WA; Bradley Thomas, CEO of Triple P America, Columbia, SC; and LaCrisha Rose, parent, Miami, WV.

STATEMENT OF OVERSIGHT FINDINGS AND RECOMMENDATIONS OF  
THE COMMITTEE

In compliance with Clause 3(c)(1) of rule XIII and Clause 2(b)(1) of rule X of the Rules of the House of Representatives, the Committee's oversight findings and recommendations are reflected in the descriptive portions of this report.

NEW BUDGET AUTHORITY AND CBO COST ESTIMATE

Pursuant to Clause 3(c)(2) of rule XIII of the Rules of the House of Representatives and Section 308(a) of the *Congressional Budget Act of 1974*, and pursuant to clause 3(c)(3) of rule XIII of the Rules of the House of Representatives and Section 402 of the *Congressional Budget Act of 1974*, the Committee has received the following estimate for H.R. 2480 from the Director of the Congressional Budget Office:

U.S. CONGRESS,  
CONGRESSIONAL BUDGET OFFICE,  
*Washington, DC, May 14, 2019.*

Hon. BOBBY SCOTT,  
*Chairman, Committee on Education and Labor,  
House of Representatives, Washington, DC.*

DEAR MR. CHAIRMAN: The Congressional Budget Office has prepared the enclosed cost estimate for H.R. 2480, the Stronger Child Abuse Prevention and Treatment Act.

If you wish further details on this estimate, we will be pleased to provide them. The CBO staff contact is Jennifer Gray.

Sincerely,

KEITH HALL,  
*Director.*

Enclosure.

<b>H.R. 2480, Stronger Child Abuse Prevention and Treatment Act</b>			
As ordered reported by the House Committee on Education and Labor on May 8, 2019			
By Fiscal Year, Millions of Dollars	2019	2019-2024	2019-2029
Direct Spending (Outlays)	0	0	0
Revenues	0	0	0
Deficit Effect	0	0	0
Spending Subject to Appropriation (Outlays)	0	2,055	3,665
Pay-as-you-go procedures apply?	No	<b>Mandate Effects</b>	
Increases on-budget deficits in any of the four consecutive 10-year periods beginning in 2030?	No	Contains intergovernmental mandate?	No
		Contains private-sector mandate?	No

H.R. 2480 would reauthorize and amend the Child Abuse Prevention and Treatment Act (CAPTA) and title II of the Child Abuse Prevention and Treatment and Adoption Reform Act of 1978. The bill would specifically authorize the appropriation of \$580 million in 2020 and whatever amounts are necessary for each year from 2021 through 2025 for programs in those acts. The authorizations for those programs expired at the end of 2015, although the Department of Health and Human Services has continued to allocate funds for those programs. In 2019, that allocation was about \$197 million. The bill would reauthorize and amend:

- CAPTA state grants and child abuse discretionary activities (title I of the bill),
- Community-based child abuse prevention (title II of the bill), and
- Adoption opportunities (title III of the bill).

For this estimate, CBO assumes that H.R. 2480 will be enacted before the beginning of fiscal year 2020 and that the amounts authorized for 2020 will be appropriated. For years 2021 through 2025, CBO estimates the authorization amount by inflating the 2020 amount consistent with CBO’s projections of inflation in the baseline. Estimated outlays are based on historical spending patterns for those or similar programs. On that basis, CBO estimates that implementing the bill would cost \$2.1 billion over the 2020–2024 period and \$1.6 billion after 2024.

The costs of the legislation, detailed in Table 1, fall within budget function 500 (education, training, employment, and social services).

TABLE 1—ESTIMATED INCREASES IN SPENDING SUBJECT TO APPROPRIATION

	By fiscal year, millions of dollars—													
	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2019–2024	2019–2029	
<b>Title I:</b>														
Estimated Authorization .....	0	270	276	281	287	293	299	0	0	0	0	1,407	1,706	
Estimated Outlays .....	0	28	82	152	221	280	286	260	205	133	59	763	1,706	
<b>Title II:</b>														
Estimated Authorization .....	0	270	276	281	287	293	299	0	0	0	0	1,407	1,706	
Estimated Outlays .....	0	81	218	263	276	287	294	208	59	15	5	1,125	1,706	

TABLE 1—ESTIMATED INCREASES IN SPENDING SUBJECT TO APPROPRIATION—Continued

	By fiscal year, millions of dollars—													
	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2019– 2024	2019– 2029	
Title III:														
Estimated Authorization .....	0	40	41	42	43	43	44	0	0	0	0	209	253	
Estimated Outlays .....	0	12	32	39	41	43	43	31	9	2	1	167	253	
Total Changes:														
Estimated Authorization .....	0	580	593	604	617	629	642	0	0	0	0	3,023	3,665	
Estimated Outlays .....	0	121	332	454	538	610	623	499	273	150	65	2,055	3,665	

The CBO staff contact for this estimate is Jennifer Gray. The estimate was reviewed by H. Samuel Papenfuss, Deputy Assistant Director for Budget Analysis.

COMMITTEE COST ESTIMATE

Clause 3(d)(1) of rule XIII of the Rules of the House of Representatives requires an estimate and a comparison of the costs that would be incurred in carrying out H.R. 2480. However, Clause 3(d)(2)(B) of that rule provides that this requirement does not apply when the committee has included in its report a timely submitted cost estimate of the bill prepared by the Director of the Congressional Budget Office under section 402 of the *Congressional Budget Act*.

CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

In compliance with Clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, H.R. 2480, as reported, are shown as follows:

CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italic, and existing law in which no change is proposed is shown in roman):

**CHILD ABUSE PREVENTION AND TREATMENT ACT**

**SECTION 1. SHORT TITLE AND TABLE OF CONTENTS.**

(a) **SHORT TITLE.**—This Act may be cited as the “Child Abuse Prevention and Treatment Act”.

(b) **TABLE OF CONTENTS.**—The table of contents is as follows:

TABLE OF CONTENTS

- Sec. 1. Short title and table of contents.
- [Sec. 2. Findings.]**
- Sec. 3. General definitions.

TITLE I—GENERAL PROGRAM

- Sec. 101. Office on Child Abuse and Neglect.
- [Sec. 102. Advisory Board on Child Abuse and Neglect.]**

\* \* \* \* \*

**[Sec. 110. Reports.]**

*Sec. 110. Study and report relating to scaling evidence-based treatment of child abuse and neglect; study and report on marital age of consent; study and report on State mandatory reporting laws.*

\* \* \* \* \*

*Sec. 114. Monitoring and oversight.*

*Sec. 115. Electronic interstate data exchange system.*

TITLE II—COMMUNITY-BASED GRANTS FOR THE PREVENTION OF CHILD ABUSE OR NEGLECT

\* \* \* \* \*

**[Sec. 209. Authorization of appropriations.]**

*Sec. 209. Rule of construction.*

*Sec. 210. Authorization of appropriations.*

\* \* \* \* \*

**[SEC. 2. FINDINGS.**

**[Congress finds that—**

**[(1) in fiscal year 2008, approximately 772,000 children were found by States to be victims of child abuse and neglect;**

**[(2)(A) more children suffer neglect than any other form of maltreatment and close to 1/3 of all child maltreatment-related fatalities in fiscal year 2008 were attributed to neglect alone; and**

**[(B) investigations have determined that approximately 71 percent of children who were victims of maltreatment in fiscal year 2008 suffered neglect, 16 percent suffered physical abuse, 9 percent suffered sexual abuse,, 7 percent suffered psychological maltreatment, 2 percent experienced medical neglect, and 9 percent were victims of other forms of maltreatment;**

**[(3)(A) child abuse or neglect can result in the death of a child;**

**[(B) in fiscal year 2008, an estimated 1,740 children were counted by child protection services to have died as a result of abuse or neglect; and**

**[(C) in fiscal year 2008, children younger than 1 year old comprised 45 percent of child maltreatment fatalities and 72 percent of child maltreatment fatalities were younger than 4 years of age;**

**[(4)(A) many of these children and their families fail to receive adequate protection and treatment; and**

**[(B) approximately 37 percent of victims of child abuse did not receive post-investigation services in fiscal year 2008;**

**[(5) African-American children, American Indian children, Alaska Native children, and children of multiple races and ethnicities experience the highest rates of child abuse or neglect;**

**[(6) the problem of child abuse and neglect requires a comprehensive approach that—**

**[(A) integrates the work of social service, legal, health, mental health, domestic violence services, education, and substance abuse agencies and community-based organizations;**

**[(B) strengthens coordination among all levels of government, and with private agencies, civic, religious, and professional organizations, and individual volunteers;**

[(C) emphasizes the need for abuse and neglect prevention, assessment, investigation, and treatment at the neighborhood level;

[(D) recognizes the need for properly trained staff with the qualifications needed to carry out their child protection duties; and

[(E) recognizes the diversity of ethnic, cultural, and religious beliefs and traditions that may impact child rearing patterns, while not allowing the differences in those beliefs and traditions to enable abuse or neglect;

[(7) the failure to coordinate and comprehensively prevent and treat child abuse and neglect threatens the futures of thousands of children and results in a cost to the Nation of billions of dollars in tangible expenditures, as well as significant intangible costs;

[(8) all elements of American society have a shared responsibility in responding to child abuse and neglect;

[(9) substantial reductions in the prevalence and incidence of child abuse and neglect and the alleviation of its consequences are matters of the highest national priority;

[(10) national policy should strengthen families to prevent child abuse and neglect, provide support for needed services to prevent the unnecessary removal of children from families, and promote the reunification of families where appropriate;

[(11) the child protection system should be comprehensive, child-centered, family-focused, and community-based, should incorporate all appropriate measures to prevent the occurrence or recurrence of child abuse and neglect, and should promote physical and psychological recovery and social re-integration in an environment that fosters the health, safety, self-respect, and dignity of the child;

[(12) because both child maltreatment and domestic violence occur in up to 60 percent of the families in which either is present, States and communities should adopt assessments and intervention procedures aimed at enhancing the safety both of children and victims of domestic violence;

[(13) because of the limited resources available in low-income communities, Federal aid for the child protection system should be distributed with due regard to the relative financial need of the communities;

[(14) the Federal Government should assist States and communities with the fiscal, human, and technical resources necessary to develop and implement a successful and comprehensive child and family protection strategy; and

[(15) the Federal Government should provide leadership and assist communities in their child and family protection efforts by—

[(A) promoting coordinated planning among all levels of government;

[(B) generating and sharing knowledge relevant to child and family protection, including the development of models for service delivery;

[(C) strengthening the capacity of States to assist communities;

[(D) allocating financial resources to assist States in implementing community plans;

[(E) helping communities to carry out their child and family protection plans by promoting the competence of professional, paraprofessional, and volunteer resources; and

[(F) providing leadership to end the abuse and neglect of the nation's children and youth.]

\* \* \* \* \*

## TITLE I—GENERAL PROGRAM

\* \* \* \* \*

### [SEC. 102. ADVISORY BOARD ON CHILD ABUSE AND NEGLECT.

[(a) APPOINTMENT.—The Secretary may appoint an advisory board to make recommendations to the Secretary and to the appropriate committees of Congress concerning specific issues relating to child abuse and neglect.

[(b) SOLICITATION OF NOMINATIONS.—The Secretary shall publish a notice in the Federal Register soliciting nominations for the appointment of members of the advisory board under subsection (a).

[(c) COMPOSITION.—In establishing the board under subsection (a), the Secretary shall appoint members from the general public who are individuals knowledgeable in child abuse and neglect prevention, intervention, treatment, or research, and with due consideration to representation of ethnic or racial minorities and diverse geographic areas, and who represent—

- [(1) law (including the judiciary);
- [(2) psychology (including child development);
- [(3) social services (including child protective services);
- [(4) health care providers (including pediatricians);
- [(5) State and local government;
- [(6) organizations providing services to disabled persons;
- [(7) organizations providing services to adolescents;
- [(8) teachers;
- [(9) parent self-help organizations;
- [(10) parents' groups;
- [(11) voluntary groups;
- [(12) family rights groups;
- [(13) children's rights advocates; and
- [(14) Indian tribes or tribal organizations.

[(d) VACANCIES.—Any vacancy in the membership of the board shall be filled in the same manner in which the original appointment was made.

[(e) ELECTION OF OFFICERS.—The board shall elect a chairperson and vice-chairperson at its first meeting from among the members of the board.

[(f) DUTIES.—Not later than 1 year after the establishment of the board under subsection (a), the board shall submit to the Secretary and the appropriate committees of Congress a report, or interim report, containing—

- [(1) recommendations on coordinating Federal, State, tribal, and local child abuse and neglect activities with similar activi-

ties at the Federal, State, tribal, and local level pertaining to family violence prevention;

【(2) specific modifications needed in Federal, State, and tribal laws and programs to reduce the number of unfounded or unsubstantiated reports of child abuse or neglect while enhancing the ability to identify and substantiate legitimate cases of child abuse or neglect which place a child in danger; and

【(3) recommendations for modifications needed to facilitate coordinated national data collection with respect to child protection and child welfare.】

**SEC. 103. NATIONAL CLEARINGHOUSE FOR INFORMATION RELATING TO CHILD ABUSE.**

(a) ESTABLISHMENT.—The Secretary shall through the Department, or by one or more contracts of not less than 3 years duration let through a competition, establish a national clearinghouse for information relating to child abuse and neglect.

(b) FUNCTIONS.—The Secretary shall, through the clearinghouse established by subsection (a)—

(1) maintain, coordinate, and disseminate information on effective programs, including *early learning programs* and private and community-based programs, that have demonstrated success with respect to the prevention, assessment, identification, and treatment of child abuse or neglect and hold the potential for broad-scale implementation and replication;

(2) maintain, coordinate, and disseminate information on the medical diagnosis and treatment of child abuse and neglect;

(3) maintain and disseminate information on best practices relating to differential response;

(4) maintain and disseminate information about the best practices used for achieving improvements in child protective systems;

(5) maintain and disseminate information about the requirements of 【section 106(b)(2)(B)(iii)】 *section 106(b)(2)(D)(ii)* and best practices relating to the development of plans of safe care as described in such section for infants born and identified as being affected by substance abuse or withdrawal symptoms, or a Fetal Alcohol Spectrum Disorder;

(6) maintain and disseminate information relating to—

(A) the incidence of cases of child abuse and neglect in the United States;

(B) the incidence of such cases in populations determined by the Secretary under section 105(a)(1) of the Child Abuse Prevention, Adoption, and Family Services Act of 1988 (42 U.S.C. 5105 note); and

(C) the incidence of any such cases related to substance abuse;

(7) provide technical assistance upon request that may include an evaluation or identification of—

(A) various methods and procedures for the investigation, assessment, and prosecution of child physical and sexual abuse cases;

(B) ways to mitigate psychological trauma to the child victim; and

(C) effective programs carried out by the States under this Act;

(8) collect and disseminate information relating to various training resources available at the State and local level to—

(A) individuals who are engaged, or who intend to engage, in the prevention, identification, and treatment of child abuse and neglect; and

(B) appropriate State and local officials to assist in training law enforcement, legal, judicial, medical, mental health, education, child welfare, substance abuse treatment services, and domestic violence services personnel; and

(9) collect and disseminate information, in conjunction with the National Resource Centers authorized in section 310(b) of the Family Violence Prevention and Services Act, on effective programs and best practices for developing and carrying out collaboration between entities providing child protective services and entities providing domestic violence services.

(c) COORDINATION WITH AVAILABLE RESOURCES.—

(1) IN GENERAL.—In establishing a national clearinghouse as required by subsection (a), the Secretary shall—

(A) consult with other Federal agencies that operate similar clearinghouses;

(B) consult with the head of each agency involved with child abuse and neglect on the development of the components for information collection and management of such clearinghouse and on the mechanisms for the sharing of such information with other Federal agencies and clearinghouses;

(C) develop a Federal data system involving the elements under subsection (b) which, to the extent practicable, coordinates existing Federal, State, tribal, regional, and local child welfare data systems which shall include—

(i) standardized data on false, unfounded, unsubstantiated, and substantiated reports;

(ii) information on the number of deaths due to child abuse and neglect;

(iii) information about the incidence and characteristics of child abuse and neglect in circumstances in which domestic violence is present; **[and]**

(iv) information about the incidence and characteristics of child abuse and neglect in cases related to substance abuse; and

(v) *the number of child fatalities and near fatalities due to maltreatment, as reported by States in accordance with the uniform standards established pursuant to subsection (d), and any other relevant information related to such fatalities;*

(D) through a national data collection and analysis program and in consultation with appropriate State and local agencies and experts in the field, collect, compile, and make available State child abuse and neglect reporting information which, to the extent practical, shall be universal and case specific and integrated with other case-based foster care and adoption data collected by the Secretary;

(E) compile, analyze, and publish a summary of the research conducted under section 104(a);

(F) collect and disseminate information that describes best practices being used throughout the Nation for making appropriate referrals related to, and addressing, the physical, developmental, and mental health needs of **[abused and neglected children]** *victims of child abuse or neglect*; and

(G) solicit public comment on the components of such clearinghouse.

(2) CONFIDENTIALITY REQUIREMENT.—In carrying out paragraph (1)(D), the Secretary shall ensure that methods are established and implemented to preserve the confidentiality of records relating to case specific data.

(d) *UNIFORM STANDARDS FOR TRACKING AND REPORTING OF CHILD FATALITIES RESULTING FROM MALTREATMENT.*—

(1) *REGULATIONS REQUIRED.*—*Not later than 24 months after the date of the enactment of the Stronger Child Abuse Prevention and Treatment Act, the Secretary shall develop and issue final regulations establishing uniform standards for the tracking and reporting of child fatalities and near-fatalities resulting from maltreatment. As a condition on eligibility for receipt of funds under section 106, the standards established under this paragraph shall be used by States for the tracking and reporting of such fatalities under subsection (d) of such section.*

(2) *MAINTENANCE OF STATE LAW.*—*Notwithstanding the uniform standards developed under paragraph (1), a State that defines or describes such fatalities for any purpose other than tracking and reporting under this subsection may continue to use that definition or description for such purpose.*

(3) *NEGOTIATED RULEMAKING.*—*In developing regulations under paragraph (1), the Secretary shall submit such regulations to a negotiated rulemaking process, which shall include the participants described in paragraph (4).*

(4) *PARTICIPANTS DESCRIBED.*—*The participants described in this paragraph are—*

(A) *State and county officials responsible for administering the State plans under this Act and parts B and E of title IV of the Social Security Act (42 U.S.C. 621 et seq., 670 et seq.);*

(B) *child welfare professionals with field experience;*

(C) *child welfare researchers;*

(D) *domestic violence researchers;*

(E) *domestic violence professionals;*

(F) *child development professionals;*

(G) *mental health professionals;*

(H) *pediatric emergency medicine physicians;*

(I) *child abuse pediatricians, as certified by the American Board of Pediatrics, who specialize in treating victims of child abuse;*

(J) *forensic pathologists;*

(K) *public health administrators;*

(L) *public health researchers;*

(M) *law enforcement;*

(N) *family court judges;*

(O) *prosecutors;*

(P) *medical examiners and coroners;*

(Q) a representative from the National Center for Fatality Review and Prevention; and  
 (R) such other individuals and entities as the Secretary determines to be appropriate.

**SEC. 104. RESEARCH AND ASSISTANCE ACTIVITIES.**

(a) RESEARCH.—

[(1) TOPICS.—The Secretary shall, in consultation with other Federal agencies and recognized experts in the field, carry out a continuing interdisciplinary program of research, including longitudinal research, that is designed to provide information needed to better protect children from child abuse or neglect and to improve the well-being of victims of child abuse or neglect, with at least a portion of such research being field initiated. Such research program may focus on—

[(A) the nature and scope of child abuse and neglect;

[(B) causes, prevention, assessment, identification, treatment, cultural and socio-economic distinctions, and the consequences of child abuse and neglect, including the effects of child abuse and neglect on a child's development and the identification of successful early intervention services or other services that are needed;

[(C) effective approaches to improving the relationship and attachment of infants and toddlers who experience child abuse or neglect with their parents or primary caregivers in circumstances where reunification is appropriate;

[(D) appropriate, effective and culturally sensitive investigative, administrative, and judicial systems, including multidisciplinary, coordinated decisionmaking procedures with respect to cases of child abuse and neglect;

[(E) the evaluation and dissemination of best practices, including best practices to meet the needs of special populations, consistent with the goals of achieving improvements in the child protective services systems of the States in accordance with paragraphs (1) through (14) of section 106(a);

[(F) effective approaches to interagency collaboration between the child protection system and the juvenile justice system that improve the delivery of services and treatment, including methods for continuity of treatment plan and services as children transition between systems;

[(G) effective practices and programs to improve activities such as identification, screening, medical diagnosis, forensic diagnosis, health evaluations, and services, including activities that promote collaboration between—

[(i) the child protective service system; and

[(ii)(I) the medical community, including providers of mental health and developmental disability services; and

[(II) providers of early childhood intervention services and special education for children who have been victims of child abuse or neglect;

[(H) an evaluation of the redundancies and gaps in the services in the field of child abuse and neglect prevention in order to make better use of resources;

[(I) effective collaborations, between the child protective system and domestic violence service providers, that provide for the safety of children exposed to domestic violence and their nonabusing parents and that improve the investigations, interventions, delivery of services, and treatments provided for such children and families;

[(J) the nature, scope, and practice of voluntary relinquishment for foster care or State guardianship of low-income children who need health services, including mental health services;

[(K) the impact of child abuse and neglect on the incidence and progression of disabilities;

[(L) the nature and scope of effective practices relating to differential response, including an analysis of best practices conducted by the States;

[(M) child abuse and neglect issues facing Indians, Alaska Natives, and Native Hawaiians, including providing recommendations for improving the collection of child abuse and neglect data from Indian tribes and Native Hawaiian communities;

[(N) the information on the national incidence of child abuse and neglect specified in clauses (i) through (x) of subparagraph (O); and

[(O) the national incidence of child abuse and neglect, including—

[(i) the extent to which incidents of child abuse and neglect are increasing or decreasing in number and severity;

[(ii) the incidence of substantiated and unsubstantiated reported child abuse and neglect cases;

[(iii) the number of substantiated cases that result in a judicial finding of child abuse or neglect or related criminal court convictions;

[(iv) the extent to which the number of unsubstantiated, unfounded and false reported cases of child abuse or neglect have contributed to the inability of a State to respond effectively to serious cases of child abuse or neglect;

[(v) the extent to which the lack of adequate resources and the lack of adequate training of individuals required by law to report suspected cases of child abuse and neglect have contributed to the inability of a State to respond effectively to serious cases of child abuse and neglect;

[(vi) the number of unsubstantiated, false, or unfounded reports that have resulted in a child being placed in substitute care, and the duration of such placement;

[(vii) the extent to which unsubstantiated reports return as more serious cases of child abuse or neglect;

[(viii) the incidence and prevalence of physical, sexual, and emotional abuse and physical and emotional neglect in substitute care;

[(ix) the incidence and prevalence of child maltreatment by a wide array of demographic characteristics

such as age, sex, race, family structure, household relationship (including the living arrangement of the resident parent and family size), school enrollment and education attainment, disability, grandparents as caregivers, labor force status, work status in previous year, and income in previous year;

[(x) the extent to which reports of suspected or known instances of child abuse or neglect involving a potential combination of jurisdictions, such as intrastate, interstate, Federal-State, and State-Tribal, are being screened out solely on the basis of the cross-jurisdictional complications; and

[(xi) the incidence and outcomes of child abuse and neglect allegations reported within the context of divorce, custody, or other family court proceedings, and the interaction between this venue and the child protective services system.]

(1) *TOPICS.—The Secretary shall, in consultation with other Federal agencies and recognized experts in the field, carry out a continuing interdisciplinary program of research, including longitudinal research, that is designed to provide information needed to improve primary prevention of child abuse and neglect, better protect children from child abuse or neglect, and improve the well-being of victims of child abuse or neglect, with at least a portion of such research being field initiated. Such research program may focus on—*

*(A) disseminating evidence-based treatment directed to individuals and families experiencing trauma due to child abuse and neglect, including efforts to improve the scalability of the treatments and programs being researched;*

*(B) developing a set of evidence-based approaches to support child and family well-being and developing ways to identify, relieve, and mitigate stressors affecting families in rural, urban, and suburban communities;*

*(C) establishing methods to promote racial equity in the child welfare system, including a focus on how neglect is defined, how services are provided, and the unique impact on Native American, Alaska Native, and Native Hawaiian communities;*

*(D) improving service delivery or outcomes for child welfare service agencies engaged with families experiencing domestic violence, substance use disorder, or other complex needs;*

*(E) the extent to which the number of unsubstantiated, unfounded, and false reported cases of child abuse or neglect have contributed to the inability of a State to respond effectively to serious cases of child abuse or neglect;*

*(F) the extent to which the lack of adequate resources and the lack of adequate professional development of individuals required by law to report suspected cases of child abuse and neglect have contributed to the inability of a State to respond effectively to serious cases of child abuse and neglect;*

(G) *the extent to which unsubstantiated reports return as more serious cases of child abuse or neglect;*

(H) *the incidence and outcomes of child abuse and neglect allegations reported within the context of divorce, custody, or other family court proceedings, and the interaction between family courts and the child protective services system;*

(I) *the information on the national incidence of child abuse and neglect specified in clauses (i) through (xi) of subparagraph (J); and*

(J) *the national incidence of child abuse and neglect, including—*

*(i) the extent to which incidents of child abuse and neglect are increasing or decreasing in number and severity;*

*(ii) the incidence of substantiated and unsubstantiated reported child abuse and neglect cases;*

*(iii) the number of substantiated cases that result in a judicial finding of child abuse or neglect or related criminal court convictions;*

*(iv) the extent to which the number of unsubstantiated, unfounded and false reported cases of child abuse or neglect have contributed to the inability of a State to respond effectively to serious cases of child abuse or neglect;*

*(v) the extent to which the lack of adequate resources and the lack of adequate education of individuals required by law to report suspected cases of child abuse and neglect have contributed to the inability of a State to respond effectively to serious cases of child abuse and neglect;*

*(vi) the number of unsubstantiated, false, or unfounded reports that have resulted in a child being placed in substitute care, and the duration of such placement;*

*(vii) the extent to which unsubstantiated reports return as more serious cases of child abuse or neglect;*

*(viii) the incidence and prevalence of physical, sexual, and emotional abuse and physical and emotional neglect in substitute care;*

*(ix) the incidence and prevalence of child maltreatment by a wide array of demographic characteristics such as age, sex, race, family structure, household relationship (including the living arrangement of the resident parent and family size), school enrollment and education attainment, disability, grandparents as caregivers, labor force status, work status in previous year, and income in previous year;*

*(x) the extent to which reports of suspected or known instances of child abuse or neglect involving a potential combination of jurisdictions, such as intrastate, interstate, Federal-State, and State-Tribal, are being screened out solely on the basis of the cross-jurisdictional complications; and*

*(xi) the incidence and outcomes of child abuse and neglect allegations reported within the context of divorce, custody, or other family court proceedings, and the interaction between family courts and the child protective services system.*

(2) RESEARCH.—The Secretary shall conduct research on the national incidence of child abuse and neglect, including the information on the national incidence on child abuse and neglect specified in clauses (i) through (xi) of **[paragraph (1)(O)] paragraph (1)(J)**.

**[(3) REPORT.—Not later than 4 years after the date of the enactment of the CAPTA Reauthorization Act of 2010, the Secretary shall prepare and submit to the Committee on Education and the Workforce of the House of Representatives and the Committee on Health, Education, Labor and Pensions of the Senate a report that contains the results of the research conducted under paragraph (2).]**

(3) REPORTING REQUIREMENTS.—

*(A) IN GENERAL.—Not later than 4 years after the date of the enactment of the Stronger Child Abuse Prevention and Treatment Act, the Secretary shall prepare and submit to the Committee on Education and Labor of the House of Representatives and the Committee on Health, Education, Labor and Pensions of the Senate a report that contains the results of the research conducted under paragraph (2).*

*(B) NATIONAL INCIDENCE.—The Secretary shall ensure that research conducted, and data collected, under paragraph (1)(J) are reported in a way that will allow longitudinal comparisons as well as comparisons to the national incidence studies conducted under this title.*

(4) PRIORITIES.—

*(A) IN GENERAL.—The Secretary shall establish research priorities for making grants or contracts for purposes of carrying out paragraph (1).*

*(B) PUBLIC COMMENT.—Not later than 1 years after the date of enactment of the CAPTA Reauthorization Act of 2010, and every 2 years thereafter, the Secretary shall provide an opportunity for public comment concerning the priorities proposed under subparagraph (A) and maintain an official record of such public comment.*

**[(4) STUDY ON SHAKEN BABY SYNDROME.—The Secretary shall conduct a study that—**

**[(A) identifies data collected on shaken baby syndrome;**

**[(B) determines the feasibility of collecting uniform, accurate data from all States regarding—**

**[(i) incidence rates of shaken baby syndrome;**

**[(ii) characteristics of perpetrators of shaken baby syndrome, including age, gender, relation to victim, access to prevention materials and resources, and history of substance abuse, domestic violence, and mental illness; and**

**[(iii) characteristics of victims of shaken baby syndrome, including gender, date of birth, date of injury, date of death (if applicable), and short- and long-term injuries sustained.]**

## (b) PROVISION OF TECHNICAL ASSISTANCE.—

(1) IN GENERAL.—The Secretary shall provide technical assistance to State and local public and private agencies and community-based organizations, including disability organizations and persons who work with children with disabilities and providers of mental health, substance abuse treatment, and domestic violence prevention services, to assist such agencies and organizations in planning, improving, developing, and carrying out programs and activities, including replicating successful program models, relating to the prevention, assessment, identification, and treatment of child abuse and neglect.

[(2) EVALUATION.—Such technical assistance may include an evaluation or identification of—

[(A) various methods and procedures for the investigation, assessment, and prosecution of child physical and sexual abuse cases;

[(B) ways to mitigate psychological trauma to the child victim;

[(C) effective programs carried out by the States under titles I and II; and

[(D) effective approaches being utilized to link child protective service agencies with health care, mental health care, and developmental services to improve forensic diagnosis and health evaluations, and barriers and shortages to such linkages.]

(2) AREAS OF EMPHASIS.—*Such technical assistance—*(A) *shall focus on—*

(i) *implementing strategies that can leverage existing community-based and State funded resources to prevent child abuse and neglect and providing education for individuals involved in prevention activities;*

(ii) *reducing racial bias in child welfare systems, including how such systems interact with health, law enforcement, and education systems;*

(iii) *promoting best practices for families experiencing domestic violence, substance use disorder, or other complex needs; and*

(iv) *providing professional development and other technical assistance to child welfare agencies to improve the understanding of and to help address the effects of trauma and adverse childhood experiences in parents and children in contact with the child welfare system; and*

(B) *may include the identification of—*

(i) *various methods and procedures for the investigation, assessment, and prosecution of child physical and sexual abuse cases;*

(ii) *ways to mitigate psychological trauma to the child victim;*

(iii) *effective programs carried out by the States under titles I and II; and*

(iv) *effective approaches being utilized to link child protective service agencies with health care, mental health care, and developmental services and early intervention to improve forensic diagnosis and health*

*evaluations, and barriers and shortages to such linkages.*

(3) DISSEMINATION.—The Secretary may provide for and disseminate information relating to various training resources available at the State and local level to—

(A) individuals who are engaged, or who intend to engage, in the prevention, identification, and treatment of child abuse and neglect; and

(B) appropriate State and local officials to assist in training law enforcement, legal, judicial, medical, mental health, education, child welfare, substance abuse, and domestic violence services personnel in appropriate methods of interacting during investigative, administrative, and judicial proceedings with children who have been subjected to, or whom the personnel suspect have been subjected to, child abuse or neglect.

(c) AUTHORITY TO MAKE GRANTS OR ENTER INTO CONTRACTS.—

(1) IN GENERAL.—The functions of the Secretary under this section may be carried out either directly or through grant or contract.

(2) DURATION.—Grants under this section shall be made for periods of not more than 5 years.

[(3) PREFERENCE FOR LONG-TERM STUDIES.—In making grants for purposes of conducting research under subsection (a), the Secretary shall give special consideration to applications for long-term projects.]

(d) PEER REVIEW FOR GRANTS.—

(1) ESTABLISHMENT OF PEER REVIEW PROCESS.—

(A) IN GENERAL.—To enhance the quality and usefulness of research in the field of child abuse and neglect, the Secretary shall, in consultation with experts in the field and other Federal agencies, establish a formal, rigorous, and meritorious peer review process for purposes of evaluating and reviewing applications for assistance through a grant or contract under this section and determining the relative merits of the project for which such assistance is requested.

(B) MEMBERS.—In establishing the process required by subparagraph (A), the Secretary shall only appoint to the peer review panels members who—

(i) are experts in the field of child abuse and neglect or related disciplines, with appropriate expertise related to the applications to be reviewed; and

(ii) are not individuals who are officers or employees of the Administration for Children and Families.

(C) MEETINGS.—The peer review panels shall meet as often as is necessary to facilitate the expeditious review of applications for grants and contracts under this section, but shall meet not less often than once a year.

(D) CRITERIA AND GUIDELINES.—The Secretary shall ensure that the peer review panel utilizes scientifically valid review criteria and scoring guidelines in the review of the applications for grants and contracts.

(2) REVIEW OF APPLICATIONS FOR ASSISTANCE.—Each peer review panel established under paragraph (1)(A) that reviews any application for a grant shall—

(A) determine and evaluate the merit of each project described in such application;

(B) rank such application with respect to all other applications it reviews in the same priority area for the fiscal year involved, according to the relative merit of all of the projects that are described in such application and for which financial assistance is requested; and

(C) make recommendations to the Secretary concerning whether the application for the project shall be approved. The Secretary shall award grants under this section on the basis of competitive review.

(3) NOTICE OF APPROVAL.—

(A) MERITORIOUS PROJECTS.—The Secretary shall provide grants and contracts under this section from among the projects which the peer review panels established under paragraph (1)(A) have determined to have merit.

(B) EXPLANATION.—In the instance in which the Secretary approves an application for a program without having approved all applications ranked above such application (as determined under paragraph (2)(B)), the Secretary shall append to the approved application a detailed explanation of the reasons relied on for approving the application and for failing to approve each pending application that is superior in merit, as indicated on the list under paragraph (2)(B).

[(e) DEMONSTRATION PROGRAMS AND PROJECTS.—The Secretary may award grants to, and enter into contracts with, entities that are States, Indian tribes or tribal organizations, or public or private agencies or organizations (or combinations of such entities) for time-limited, demonstration projects for the following:

[(1) PROMOTION OF SAFE, FAMILY-FRIENDLY PHYSICAL ENVIRONMENTS FOR VISITATION AND EXCHANGE.—The Secretary may award grants under this subsection to entities to assist such entities in establishing and operating safe, family-friendly physical environments—

[(A) for court-ordered, supervised visitation between children and abusing parents; and

[(B) to facilitate the safe exchange of children for visits with noncustodial parents in cases of domestic violence.

[(2) EDUCATION IDENTIFICATION, PREVENTION, AND TREATMENT.—The Secretary may award grants under this subsection to entities for projects that provide educational identification, prevention, and treatment services in cooperation with child care and early childhood education and care providers, preschools, and elementary and secondary schools.

[(3) RISK AND SAFETY ASSESSMENT TOOLS.—The Secretary may award grants under this subsection to entities for projects that provide for the development of research-based strategies for risk and safety assessments relating to child abuse and neglect.

[(4) TRAINING.—The Secretary may award grants under this subsection to entities for projects that involve research-based

strategies for innovative training for mandated child abuse and neglect reporters.】

**SEC. 105. GRANTS TO STATES, INDIAN TRIBES OR TRIBAL ORGANIZATIONS, AND PUBLIC OR PRIVATE AGENCIES AND ORGANIZATIONS.**

(a) GRANTS FOR PROGRAMS AND PROJECTS.—The Secretary may make grants to, and enter into contracts with, entities that are States, Indian tribes or tribal organizations, or public agencies or private agencies or organizations (or combinations of such entities) for programs and projects for the following purposes:

【(1) TRAINING PROGRAMS.—The Secretary may award grants to public or private organizations under this subsection—

【(A) for the training of professional and paraprofessional personnel in the fields of health care, medicine, law enforcement, judiciary, social work and child protection, education, child care, and other relevant fields, or individuals such as court appointed special advocates (CASAs) and guardian ad litem, who are engaged in, or intend to work in, the field of prevention, identification, and treatment of child abuse and neglect, including the links between domestic violence and child abuse and neglect;

【(B) to improve the recruitment, selection, and training of volunteers serving in public and private children, youth, and family service organizations in order to prevent child abuse and neglect;

【(C) for the establishment of resource centers for the purpose of providing information and training to professionals working in the field of child abuse and neglect;

【(D) for training to enhance linkages among child protective service agencies and health care agencies, entities providing physical and mental health services, community resources, and developmental disability agencies, to improve screening, forensic diagnosis, and health and developmental evaluations, and for partnerships between child protective service agencies and health care agencies that support the coordinated use of existing Federal, State, local, and private funding to meet the health evaluation needs of children who have been subjects of substantiated cases of child abuse or neglect;

【(E) for the training of personnel in best practices to meet the unique needs of children with disabilities, including promoting interagency collaboration;

【(F) for the training of personnel in best practices to promote collaboration with the families from the initial time of contact during the investigation through treatment;

【(G) for the training of personnel regarding the legal duties of such personnel and their responsibilities to protect the legal rights of children and families;

【(H) for the training of personnel in childhood development including the unique needs of children under age 3;

【(I) for improving the training of supervisory and non-supervisory child welfare workers;

【(J) for enabling State child welfare agencies to coordinate the provision of services with State and local health care agencies, alcohol and drug abuse prevention and

treatment agencies, mental health agencies, other public and private welfare agencies, and agencies that provide early intervention services to promote child safety, permanence, and family stability;

[(K) for cross training for child protective service workers in research-based strategies for recognizing situations of substance abuse, domestic violence, and neglect;

[(L) for developing, implementing, or operating information and education programs or training programs designed to improve the provision of services to infants or toddlers with disabilities with life-threatening conditions for—

[(i) professionals and paraprofessional personnel concerned with the welfare of infants or toddlers with disabilities with life-threatening conditions, including personnel employed in child protective services programs and health care facilities; and

[(ii) the parents of such infants; and

[(M) for the training of personnel in best practices relating to the provision of differential response.

[(2) TRIAGE PROCEDURES.—The Secretary may award grants under this subsection to public and private agencies that demonstrate innovation in responding to reports of child abuse and neglect, including programs of collaborative partnerships between the State child protective services agency, community social service agencies and family support programs, law enforcement agencies, developmental disability agencies, substance abuse treatment entities, health care entities, domestic violence prevention entities, mental health service entities, schools, churches and synagogues, and other community agencies, to allow for the establishment of a triage system that—

[(A) accepts, screens, and assesses reports received to determine which such reports require an intensive intervention and which require voluntary referral to another agency, program, or project;

[(B) provides, either directly or through referral, a variety of community-linked services to assist families in preventing child abuse and neglect; and

[(C) provides further investigation and intensive intervention when the child's safety is in jeopardy.

[(3) MUTUAL SUPPORT PROGRAMS.—The Secretary may award grants to private organizations to establish or maintain a national network of mutual support, leadership, and self-help programs as a means of strengthening families in partnership with their communities.

[(4) KINSHIP CARE.—The Secretary may award grants to public and private entities to assist such entities in developing or implementing procedures using adult relatives as the preferred placement for children removed from their home, where such relatives are determined to be capable of providing a safe nurturing environment for the child and where such relatives comply with the State child protection standards.

[(5) LINKAGES AMONG CHILD PROTECTIVE SERVICE AGENCIES AND PUBLIC HEALTH, MENTAL HEALTH, SUBSTANCE ABUSE, DEVELOPMENTAL DISABILITIES, AND DOMESTIC VIOLENCE SERVICE

AGENCIES.—The Secretary may award grants to entities that provide linkages among State or local child protective service agencies and public health, mental health, substance abuse, developmental disabilities, and domestic violence service agencies, and entities that carry out community-based programs, for the purpose of establishing linkages that are designed to ensure that a greater number of substantiated victims of child maltreatment have their physical health, mental health, and developmental needs appropriately diagnosed and treated, in accordance with all applicable Federal and State privacy laws.

【(6) COLLABORATIONS BETWEEN CHILD PROTECTIVE SERVICE ENTITIES AND DOMESTIC VIOLENCE SERVICE ENTITIES.—The Secretary may award grants to public or private agencies and organizations under this section to develop or expand effective collaborations between child protective service entities and domestic violence service entities to improve collaborative investigation and intervention procedures, provision for the safety of the nonabusing parent involved and children, and provision of services to children exposed to domestic violence that also support the caregiving role of the non-abusing parent.】

(1) *PREVENTION SERVICES.*—*The Secretary may award grants under this subsection to entities to establish or expand prevention services that reduce incidences of child maltreatment and strengthen families.*

(2) *TRAUMATIC STRESS.*—*The Secretary may award grants under this subsection to entities to address instances of traumatic stress in families due to child abuse and neglect, especially for families with complex needs or families that exhibit high levels of adverse childhood experiences.*

(3) *PROMOTING A HIGH-QUALITY WORKFORCE.*—*The Secretary may award grants under this subsection to entities to carry out programs or strategies that promote a high-quality workforce in the child welfare system through—*

(A) *improvements to recruitment, support, or retention efforts; or*

(B) *education for professionals and paraprofessionals in the prevention, identification, and treatment of child abuse and neglect.*

(4) *IMPROVING COORDINATION.*—*The Secretary may award grants under this subsection to entities to carry out activities to improve intrastate coordination within the child welfare system. Such activities may include—*

(A) *aligning information technology systems;*

(B) *improving information sharing regarding child and family referrals; or*

(C) *creating collaborative voluntary partnerships among public and private agencies, the State's child protective services, local social service agencies, community-based family support programs, State and local legal agencies, developmental disability agencies, substance use disorder treatment providers, health care providers and agencies, domestic violence prevention programs, mental health services, schools and early learning providers, religious entities, and other community-based programs.*

(5) *PRIMARY PREVENTION.*—The Secretary may award grants under this subsection to entities to carry out or expand primary prevention programs or strategies that address family or community protective factors.

(6) *NEGLECT DUE TO ECONOMIC INSECURITY.*—The Secretary may award grants under this subsection to entities to carry out programs or strategies that reduce findings of child neglect due in full or in part to family economic insecurity.

(7) *EDUCATION OF MANDATORY REPORTERS.*—The Secretary may award grants under this subsection to entities for projects that involve research-based strategies for innovative education of mandated child abuse and neglect reporters, and for victims to understand mandatory reporting.

(8) *SENTINEL INJURIES.*—The Secretary may award grants under this subsection to entities to identify and test effective practices to improve early detection and management of injuries indicative of potential abuse in infants to prevent future cases of child abuse and related fatalities.

(9) *INNOVATIVE PARTNERSHIPS.*—The Secretary may award grants under this subsection to entities to carry out innovative programs or strategies to coordinate the delivery of services to help reduce child abuse and neglect via partnerships among health, mental health, education (including early learning and care programs as appropriate), and child welfare agencies and providers.

(10) *REDUCING CHILD ABUSE AND NEGLECT DUE TO THE SUBSTANCE USE DISORDER OF A PARENT OR CAREGIVER.*—The Secretary may award grants under this subsection to entities to carry out activities to reduce child abuse and neglect due to the substance use disorder of a parent or caregiver.

[(7)] (11) *GRANTS TO STATES TO IMPROVE AND COORDINATE THEIR RESPONSE TO ENSURE THE SAFETY, PERMANENCY, AND WELL-BEING OF INFANTS AFFECTED BY SUBSTANCE USE.*—

(A) *PROGRAM AUTHORIZED.*—The Secretary is authorized to make grants to States for the purpose of assisting child welfare agencies, social services agencies, substance use disorder treatment agencies, hospitals with labor and delivery units, medical staff, public health and mental health agencies, and maternal and child health agencies to facilitate collaboration in developing, updating, implementing, and monitoring plans of safe care described in [section 106(b)(2)(B)(iii)] *section 106(b)(2)(D)(ii)*. Section 112(a)(2) shall not apply to the program authorized under this paragraph.

(B) *DISTRIBUTION OF FUNDS.*—

(i) *RESERVATIONS.*—Of the amounts made available to carry out subparagraph (A), the Secretary shall reserve—

(I) no more than 3 percent for the purposes described in subparagraph (G); and

(II) up to 3 percent for grants to Indian Tribes and tribal organizations to address the needs of infants born with, and identified as being affected by, substance abuse or withdrawal symptoms resulting from prenatal drug exposure or a fetal al-

cohol spectrum disorder and their families or caregivers, which to the extent practicable, shall be consistent with the uses of funds described under subparagraph (D).

(ii) ALLOTMENTS TO STATES AND TERRITORIES.—The Secretary shall allot the amount made available to carry out subparagraph (A) that remains after application of clause (i) to each State that applies for such a grant, in an amount equal to the sum of—

(I) \$500,000; and

(II) an amount that bears the same relationship to any funds made available to carry out subparagraph (A) and remaining after application of clause (i), as the number of live births in the State in the previous calendar year bears to the number of live births in all States in such year.

(iii) RATABLE REDUCTION.—If the amount made available to carry out subparagraph (A) is insufficient to satisfy the requirements of clause (ii), the Secretary shall ratably reduce each allotment to a State.

(C) APPLICATION.—A State desiring a grant under this paragraph shall submit an application to the Secretary at such time and in such manner as the Secretary may require. Such application shall include—

(i) a description of—

(I) the impact of substance use disorder in such State, including with respect to the substance or class of substances with the highest incidence of abuse in the previous year in such State, including—

(aa) the prevalence of substance use disorder in such State;

(bb) the aggregate rate of births in the State of infants affected by substance abuse or withdrawal symptoms or a fetal alcohol spectrum disorder (as determined by hospitals, insurance claims, claims submitted to the State Medicaid program, or other records), if available and to the extent practicable; and

(cc) the number of infants identified, for whom a plan of safe care was developed, and for whom a referral was made for appropriate services, as reported under section 106(d)(18);

(II) the challenges the State faces in developing, implementing, and monitoring plans of safe care in accordance with [section 106(b)(2)(B)(iii)] *section 106(b)(2)(D)(ii)*;

(III) the State's lead agency for the grant program and how that agency will coordinate with relevant State entities and programs, including the child welfare agency, the substance use disorder treatment agency, hospitals with labor and delivery units, health care providers, the public health and mental health agencies, programs funded by the Substance Abuse and Mental

Health Services Administration that provide substance use disorder treatment for women, the State Medicaid program, the State agency administering the block grant program under title V of the Social Security Act (42 U.S.C. 701 et seq.), the State agency administering the programs funded under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.), the maternal, infant, and early childhood home visiting program under section 511 of the Social Security Act (42 U.S.C. 711), the State judicial system, and other agencies, as determined by the Secretary, and Indian Tribes and tribal organizations, as appropriate, to implement the activities under this paragraph;

(IV) how the State will monitor local development and implementation of plans of safe care, in accordance with **section 106(b)(2)(B)(iii)(II)** *section 106(b)(2)(D)(i)(II)*, including how the State will monitor to ensure plans of safe care address differences between substance use disorder and medically supervised substance use, including for the treatment of a substance use disorder;

(V) if applicable, how the State plans to utilize funding authorized under part E of title IV of the Social Security Act (42 U.S.C. 670 et seq.) to assist in carrying out any plan of safe care, including such funding authorized under section 471(e) of such Act (as in effect on October 1, 2018) for mental health and substance abuse prevention and treatment services and in-home parent skill-based programs and funding authorized under such section 472(j) (as in effect on October 1, 2018) for children with a parent in a licensed residential family-based treatment facility for substance abuse; and

(VI) an assessment of the treatment and other services and programs available in the State to effectively carry out any plan of safe care developed, including identification of needed treatment, and other services and programs to ensure the well-being of young children and their families affected by substance use disorder, such as programs carried out under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.) and comprehensive early childhood development services and programs such as Head Start programs;

(ii) a description of how the State plans to use funds for activities described in subparagraph (D) for the purposes of ensuring State compliance with requirements under **clauses (ii) and (iii) of section 106(b)(2)(B)** *clauses (i) and (ii) of section 106(b)(2)(D)*; and

(iii) an assurance that the State will comply with requirements to refer a child identified as substance-exposed to early intervention services as required pursuant to a grant under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.).

(D) USES OF FUNDS.—Funds awarded to a State under this paragraph may be used for the following activities, which may be carried out by the State directly, or through grants or subgrants, contracts, or cooperative agreements:

(i) Improving State and local systems with respect to the development and implementation of plans of safe care, which—

(I) shall include parent and caregiver engagement, as required under **[section 106(b)(2)(B)(iii)(I)]** *section 106(b)(2)(D)(ii)(I)*, regarding available treatment and service options, which may include resources available for pregnant, perinatal, and postnatal women; and

(II) may include activities such as—

(aa) developing policies, procedures, or protocols for the administration or development of evidence-based and validated screening tools for infants who may be affected by substance use withdrawal symptoms or a fetal alcohol spectrum disorder and pregnant, perinatal, and postnatal women whose infants may be affected by substance use withdrawal symptoms or a fetal alcohol spectrum disorder;

(bb) improving assessments used to determine the needs of the infant and family;

(cc) improving ongoing case management services;

(dd) improving access to treatment services, which may be prior to the pregnant woman's delivery date; and

(ee) keeping families safely together when it is in the best interest of the child.

(ii) Developing policies, procedures, or protocols in consultation and coordination with health professionals, public and private health facilities, and substance use disorder treatment agencies to ensure that—

(I) appropriate notification to child protective services is made in a timely manner, as required under **[section 106(b)(2)(B)(ii)]** *section 106(b)(2)(D)(i)*;

(II) a plan of safe care is in place, in accordance with **[section 106(b)(2)(B)(iii)]** *section 106(b)(2)(D)(ii)(I)*, before the infant is discharged from the birth or health care facility; and

(III) such health and related agency professionals are trained on how to follow such protocols and are aware of the supports that may be provided under a plan of safe care.

(iii) Training health professionals and health system leaders, child welfare workers, substance use disorder treatment agencies, and other related professionals such as home visiting agency staff and law enforcement in relevant topics including—

(I) State mandatory reporting laws established under **[section 106(b)(2)(B)(i)]** *section 106(b)(2)(A)(i)* and the referral and process requirements for notification to child protective services when child abuse or neglect reporting is not mandated;

(II) the co-occurrence of pregnancy and substance use disorder, and implications of prenatal exposure;

(III) the clinical guidance about treating substance use disorder in pregnant and postpartum women;

(IV) appropriate screening and interventions for infants affected by substance use disorder, withdrawal symptoms, or a fetal alcohol spectrum disorder and the requirements under **[section 106(b)(2)(B)(iii)]** *section 106(b)(2)(D)(ii)*; and

(V) appropriate multigenerational strategies to address the mental health needs of the parent and child together.

(iv) Establishing partnerships, agreements, or memoranda of understanding between the lead agency and other entities (including health professionals, health facilities, child welfare professionals, juvenile and family court judges, substance use and mental disorder treatment programs, early childhood education programs, maternal and child health and early intervention professionals (including home visiting providers), peer-to-peer recovery programs such as parent mentoring programs, and housing agencies) to facilitate the implementation of, and compliance with, section 106(b)(2) and clause (ii) of this subparagraph, in areas which may include—

(I) developing a comprehensive, multi-disciplinary assessment and intervention process for infants, pregnant women, and their families who are affected by substance use disorder, withdrawal symptoms, or a fetal alcohol spectrum disorder, that includes meaningful engagement with and takes into account the unique needs of each family and addresses differences between medically supervised substance use, including for the treatment of substance use disorder, and substance use disorder;

(II) ensuring that treatment approaches for serving infants, pregnant women, and perinatal and postnatal women whose infants may be affected by substance use, withdrawal symptoms, or a fetal alcohol spectrum disorder, are designed to, where appropriate, keep infants with their moth-

ers during both inpatient and outpatient treatment; and

(III) increasing access to all evidence-based medication-assisted treatment approved by the Food and Drug Administration, behavioral therapy, and counseling services for the treatment of substance use disorders, as appropriate.

(v) Developing and updating systems of technology for improved data collection and monitoring under **【section 106(b)(2)(B)(iii)】** *section 106(b)(2)(D)(ii)*, including existing electronic medical records, to measure the outcomes achieved through the plans of safe care, including monitoring systems to meet the requirements of this Act and submission of performance measures.

(E) REPORTING.—Each State that receives funds under this paragraph, for each year such funds are received, shall submit a report to the Secretary, disaggregated by geographic location, economic status, and major racial and ethnic groups, except that such disaggregation shall not be required if the results would reveal personally identifiable information on, with respect to infants identified under **【section 106(b)(2)(B)(ii)】** *section 106(b)(2)(D)(i)*—

(i) the number who experienced removal associated with parental substance use;

(ii) the number who experienced removal and subsequently are reunified with parents, and the length of time between such removal and reunification;

(iii) the number who are referred to community providers without a child protection case;

(iv) the number who receive services while in the care of their birth parents;

(v) the number who receive post-reunification services within 1 year after a reunification has occurred; and

(vi) the number who experienced a return to out-of-home care within 1 year after reunification.

(F) SECRETARY'S REPORT TO CONGRESS.—The Secretary shall submit an annual report to the Committee on Health, Education, Labor, and Pensions and the Committee on Appropriations of the Senate and the **【Committee on Education and the Workforce】** *Committee on Education and Labor* and the Committee on Appropriations of the House of Representatives that includes the information described in subparagraph (E) and recommendations or observations on the challenges, successes, and lessons derived from implementation of the grant program.

(G) ASSISTING STATES' IMPLEMENTATION.—The Secretary shall use the amount reserved under subparagraph (B)(i)(I) to provide written guidance and technical assistance to support States in complying with and implementing this paragraph, which shall include—

(i) technical assistance, including programs of in-depth technical assistance, to additional States, territories, and Indian Tribes and tribal organizations in

accordance with the substance-exposed infant initiative developed by the National Center on Substance Abuse and Child Welfare;

(ii) guidance on the requirements of this Act with respect to infants born with and identified as being affected by substance use or withdrawal symptoms or fetal alcohol spectrum disorder, as described in **【**clauses (ii) and (iii) of section 106(b)(2)(B)**】** *clauses (i) and (ii) of section 106(b)(2)(D)*, including by—

(I) enhancing States' understanding of requirements and flexibilities under the law, including by clarifying key terms;

(II) addressing state-identified challenges with developing, implementing, and monitoring plans of safe care, including those reported under subparagraph (C)(i)(II);

(III) disseminating best practices on implementation of plans of safe care, on such topics as differential response, collaboration and coordination, and identification and delivery of services for different populations, while recognizing needs of different populations and varying community approaches across States; and

(IV) helping States improve the long-term safety and well-being of young children and their families;

(iii) supporting State efforts to develop information technology systems to manage plans of safe care; and

(iv) preparing the Secretary's report to Congress described in subparagraph (F).

(H) SUNSET.—The authority under this paragraph shall sunset on September 30, 2023.

(12) NATIONAL CHILD ABUSE HOTLINE.—

(A) *IN GENERAL.*—The Secretary may award a grant under this subsection to a nonprofit entity to provide for the ongoing operation of a 24-hour, national, toll-free telephone hotline to provide information and assistance to youth victims of child abuse or neglect, parents, caregivers, mandated reporters, and other concerned community members, including through alternative modalities for communications (such as texting or chat services) with such victims and other information seekers.

(B) *PRIORITY.*—In awarding grants described in this paragraph, the Secretary shall give priority to applicants with experience in operating a hotline that provides assistance to victims of child abuse, parents, caregivers, and mandated reporters.

(C) *APPLICATION.*—To be eligible to receive a grant described in this paragraph, a nonprofit entity shall submit an application to the Secretary that shall—

(i) contain such assurances and information, be in such form, and be submitted in such manner, as the Secretary shall prescribe;

(ii) include a complete description of the entity's plan for the operation of a national child abuse hotline, including descriptions of—

(I) the professional development program for hotline personnel, including technology professional development to ensure that all persons affiliated with the hotline are able to effectively operate any technological systems used by the hotline;

(II) the qualifications for hotline personnel;

(III) the methods for the creation, maintenance, and updating of a comprehensive list of prevention and treatment service providers;

(IV) a plan for publicizing the availability of the hotline throughout the United States;

(V) a plan for providing service to non-English speaking callers, including service through hotline personnel who have non-English language capability;

(VI) a plan for facilitating access to the hotline and alternative modality services by persons with hearing impairments and disabilities;

(VII) a plan for providing crisis counseling, general assistance, and referrals to youth victims of child abuse; and

(VIII) a plan to offer alternative services to calling, such as texting or live chat;

(iii) demonstrate that the entity has the capacity and the expertise to maintain a child abuse hotline and a comprehensive list of service providers;

(iv) demonstrate the ability to provide information and referrals for contacts, directly connect contacts to service providers, and employ crisis interventions;

(v) demonstrate that the entity has a commitment to providing services to individuals in need; and

(vi) demonstrate that the entity complies with State privacy laws and has established quality assurance practices.

**[(b) DISCRETIONARY GRANTS.—**In addition to grants or contracts made under subsection (a), grants or contracts under this section may be used for the following:

**[(1)** Respite and crisis nursery programs provided by community-based organizations under the direction and supervision of hospitals.

**[(2)** Respite and crisis nursery programs provided by community-based organizations.

**[(3)** Programs based within children's hospitals or other pediatric and adolescent care facilities, that provide model approaches for improving medical diagnosis of child abuse and neglect and for health evaluations of children for whom a report of maltreatment has been substantiated.

**[(4)(A)** Providing hospital-based information and referral services to—

**[(i)** parents of children with disabilities; and

**[(ii)** children who have been victims of child abuse or neglect and their parents.

[(B) Except as provided in subparagraph (C)(iii), services provided under a grant received under this paragraph shall be provided at the hospital involved—

[(i) upon the birth or admission of a child with disabilities; and

[(ii) upon the treatment of a child for child abuse and neglect.

[(C) Services, as determined as appropriate by the grantee, provided under a grant received under this paragraph shall be hospital-based and shall consist of—

[(i) the provision of notice to parents that information relating to community services is available;

[(ii) the provision of appropriate information to parents of a child with disabilities regarding resources in the community, particularly parent training resources, that will assist such parents in caring for their child;

[(iii) the provision of appropriate information to parents of a child who has been a victim of child abuse or neglect regarding resources in the community, particularly parent training resources, that will assist such parents in caring for their child and reduce the possibility of child abuse and neglect;

[(iv) the provision of appropriate follow-up services to parents of a child described in subparagraph (B) after the child has left the hospital; and

[(v) where necessary, assistance in coordination of community services available to parents of children described in subparagraph (B).

The grantee shall assure that parental involvement described in this subparagraph is voluntary.

[(D) For purposes of this paragraph, a qualified grantee is an acute care hospital that—

[(i) is in a combination with—

[(I) a health-care provider organization;

[(II) a child welfare organization;

[(III) a disability organization; and

[(IV) a State child protection agency;

[(ii) submits an application for a grant under this paragraph that is approved by the Secretary;

[(iii) maintains an office in the hospital involved for purposes of providing services under such grant;

[(iv) provides assurances to the Secretary that in the conduct of the project the confidentiality of medical, social, and personal information concerning any person described in subparagraph (A) or (B) shall be maintained, and shall be disclosed only to qualified persons providing required services described in subparagraph (C) for purposes relating to conduct of the project; and

[(v) assumes legal responsibility for carrying out the terms and conditions of the grant.

[(E) In awarding grants under this paragraph, the Secretary shall—

[(i) give priority under this section for two grants under this paragraph, provided that one grant shall be made to

provide services in an urban setting and one grant shall be made to provide services in rural setting; and

[(ii) encourage qualified grantees to combine the amounts received under the grant with other funds available to such grantees.

[(5) Such other innovative programs and projects that show promise of preventing and treating cases of child abuse and neglect as the Secretary may approve.

[(c) EVALUATION.—In making grants for projects under this section, the Secretary shall require all such projects to be evaluated for their effectiveness. Funding for such evaluations shall be provided either as a stated percentage of a demonstration grant or as a separate grant or contract entered into by the Secretary for the purpose of evaluating a particular demonstration project or group of projects. In the case of an evaluation performed by the recipient of a grant, the Secretary shall make available technical assistance for the evaluation, where needed, including the use of a rigorous application of scientific evaluation techniques.]

(b) GOALS AND PERFORMANCE.—*The Secretary shall ensure that each entity receiving a grant under this section—*

(1) *establishes quantifiable goals for the outcome of the project funded with the grant; and*

(2) *adequately measures the performance of the project relative to such goals.*

(c) PERFORMANCE REPORT REQUIRED.—

(1) IN GENERAL.—*Each entity that receives a grant under this section shall submit to the Secretary a performance report that includes—*

(A) *an evaluation of the effectiveness of the project funded with the grant relative to the goals established for such project under subsection (b)(1); and*

(B) *data supporting such evaluation.*

(2) SUBMISSION.—*The report under paragraph (1) shall be submitted to the Secretary at such time, in such manner, and containing such information as the Secretary may require.*

(d) CONTINUING GRANTS.—*The Secretary may only award a continuing grant to an entity under this section if such entity submits a performance report required under subsection (c) that demonstrates effectiveness of the project funded.*

**SEC. 106. GRANTS TO STATES FOR CHILD ABUSE OR NEGLECT PREVENTION AND TREATMENT PROGRAMS.**

[(a) DEVELOPMENT AND OPERATION GRANTS.—The Secretary shall make grants to the States, from allotments made under subsection (f) for each State that applies for a grant under this section, for purposes of assisting the States in improving the child protective services system of each such State in—

[(1) the intake, assessment, screening, and investigation of reports of child abuse or neglect;

[(2)(A) creating and improving the use of multidisciplinary teams and interagency, intra-agency, interstate, and intrastate protocols to enhance investigations; and

[(B) improving legal preparation and representation, including—

[(i) procedures for appealing and responding to appeals of substantiated reports of child abuse or neglect; and

- [(ii) provisions for the appointment of an individual appointed to represent a child in judicial proceedings;
- [(3) case management, including ongoing case monitoring, and delivery of services and treatment provided to children and their families;
- [(4) enhancing the general child protective system by developing, improving, and implementing risk and safety assessment tools and protocols, including the use of differential response;
- [(5) developing and updating systems of technology that support the program and track reports of child abuse and neglect from intake through final disposition and allow interstate and intrastate information exchange;
- [(6) developing, strengthening, and facilitating training including—
  - [(A) training regarding research-based strategies, including the use of differential response, to promote collaboration with the families;
  - [(B) training regarding the legal duties of such individuals;
  - [(C) personal safety training for case workers; and
  - [(D) training in early childhood, child, and adolescent development;
- [(7) improving the skills, qualifications, and availability of individuals providing services to children and families, and the supervisors of such individuals, through the child protection system, including improvements in the recruitment and retention of caseworkers;
- [(8) developing, facilitating the use of, and implementing research-based strategies and training protocols for individuals mandated to report child abuse and neglect;
- [(9) developing, implementing, or operating programs to assist in obtaining or coordinating necessary services for families of disabled infants with life-threatening conditions, including—
  - [(A) existing social and health services;
  - [(B) financial assistance;
  - [(C) services necessary to facilitate adoptive placement of any such infants who have been relinquished for adoption; and
  - [(D) the use of differential response in preventing child abuse and neglect;
- [(10) developing and delivering information to improve public education relating to the role and responsibilities of the child protection system and the nature and basis for reporting suspected incidents of child abuse and neglect, including the use of differential response;
- [(11) developing and enhancing the capacity of community-based programs to integrate shared leadership strategies between parents and professionals to prevent and treat child abuse and neglect at the neighborhood level;
- [(12) supporting and enhancing interagency collaboration between the child protection system and the juvenile justice system for improved delivery of services and treatment, including methods for continuity of treatment plan and services as children transition between systems;

[(13) supporting and enhancing interagency collaboration among public health agencies, agencies in the child protective service system, and agencies carrying out private community-based programs—

[(A) to provide child abuse and neglect prevention and treatment services (including linkages with education systems), and the use of differential response; and

[(B) to address the health needs, including mental health needs, of children identified as victims of child abuse or neglect; including supporting prompt, comprehensive health and developmental evaluations for children who are the subject of substantiated child maltreatment reports; or

[(14) developing and implementing procedures for collaboration among child protective services, domestic violence services, and other agencies in—

[(A) investigations, interventions, and the delivery of services and treatment provided to children and families, including the use of differential response, where appropriate; and

[(B) the provision of services that assist children exposed to domestic violence, and that also support the caregiving role of their nonabusing parents.]

(a) *DEVELOPMENT AND OPERATION GRANTS.—The Secretary shall make grants to the States, from allotments under subsection (f) for each State that applies for a grant under this section, for purposes of assisting the States in improving and implementing a child protective services system that is family-centered, integrates community services, and is capable of providing rapid response to high-risk cases, by carrying out the following:*

(1) *Conducting the intake, assessment, screening, and investigation of reports of child abuse or neglect.*

(2) *Ensuring that reports concerning a child's living arrangements or subsistence needs are addressed through services or benefits and that no child is separated from such child's parent for reasons of poverty.*

(3) *Creating and improving the use of multidisciplinary teams and interagency, intra-agency, interstate, and intrastate protocols to enhance fair investigations; and improving legal preparation and representation.*

(4) *Complying with the assurances in section 106(b)(2).*

(5) *Establishing State and local networks of child and family service providers that support child and family well-being, which shall—*

(A) *include child protective services, as well as agencies and service providers, that address family-strengthening, parenting skills, child development, early childhood care and learning, child advocacy, public health, mental health, substance use disorder treatment, domestic violence, developmental disabilities, housing, juvenile justice, elementary and secondary education, and child placement; and*

(B) *address instances of child abuse and neglect by incorporating evaluations that assess the development of a child, including language and communication, cognitive, physical, and social and emotional development, the need for*

*mental health services, including trauma-related services, trauma-informed care, and parental needs.*

*(6) Ensuring child protective services is addressing the safety of children and responding to parent and family needs, which shall include—*

*(A) family-oriented efforts that emphasize case assessment and follow up casework focused on child safety and child and parent well-being, which may include—*

*(i) ensuring parents and children undergo physical and mental health assessments, as appropriate, and ongoing developmental monitoring;*

*(ii) multidisciplinary approaches to assessing family needs and connecting the family with services, including prevention services under section 471 of the Social Security Act (42 U.S.C. 671);*

*(iii) organizing a treatment team with the goal of preventing child abuse and neglect, and improving parent and child well-being;*

*(iv) case monitoring that supports child well-being;*

*and*

*(v) differential response efforts; and*

*(B) establishing and maintaining a rapid response system that responds promptly to all reports of child abuse or neglect, with special attention to cases involving children under 3 years of age.*

*(7) Educating caseworkers, community service providers, attorneys, health care professionals, parents, and others engaged in the prevention, intervention, and treatment of child abuse and neglect, which shall include education on—*

*(A) practices that help ensure child safety and well-being;*

*(B) approaches to family-oriented prevention, intervention, and treatment of child abuse and neglect;*

*(C) early childhood, child, and adolescent development, and the impact of adverse childhood experiences on such development;*

*(D) the relationship between child abuse and domestic violence, and support for non-abusing parents;*

*(E) strategies to work with families impacted by substance use disorder and mental health issues (and, when appropriate, be coordinated with prevention efforts funded under section 471 of the Social Security Act (42 U.S.C. 671));*

*(F) effective use of multiple services to address family and child needs, including needs resulting from trauma;*

*(G) efforts to improve family and child well-being;*

*(H) support for child welfare workers affected by secondary trauma; and*

*(I) supporting families and caregivers to combat and prevent unsubstantiated, unfounded, or false reports, including through education on the rights of families and caregivers.*

*(8) Creating or improving data systems that allow for—*

*(A) the identification of cases requiring prompt responses;*

*(B) real-time case monitoring that tracks assessments, service referrals, follow-up, case reviews, and progress toward parent and child goals; and*

*(C) sharing basic identifying data with law enforcement, as necessary.*

*(9) Improving the general child protective system by developing, improving, and implementing safety assessment tools, providing that such tools, protocols, and systems shall not authorize the separation of any child from the legal parent or guardian of such child solely on the basis of poverty, or without a judicial order, except in the case of imminent harm.*

(b) ELIGIBILITY REQUIREMENTS.—

[(1) STATE PLAN.—

[(A) IN GENERAL.—To be eligible to receive a grant under this section, a State shall submit to the Secretary a State plan that specifies the areas of the child protective services system described in subsection (a) that the State will address with amounts received under the grant.

[(B) DURATION OF PLAN.—Each State plan shall—

[(i) remain in effect for the duration of the State's participation under this section; and

[(ii) be periodically reviewed and revised as necessary by the State to reflect changes in the State's strategies and programs under this section.

[(C) ADDITIONAL INFORMATION.—The State shall provide notice to the Secretary—

[(i) of any substantive changes, including any change to State law or regulations, relating to the prevention of child abuse and neglect that may affect the eligibility of the State under this section; and

[(ii) of any significant changes in how funds provided under this section are used to support activities described in this section, which may differ from the activities described in the current State application.

[(2) CONTENTS.—A State plan submitted under paragraph (1) shall contain a description of the activities that the State will carry out using amounts received under the grant to achieve the objectives of this title, including—

[(A) an assurance that the State plan, to the maximum extent practicable, is coordinated with the State plan under part B of title IV of the Social Security Act (42 U.S.C. 621 et seq.) relating to child welfare services and family preservation and family support services;

[(B) an assurance in the form of a certification by the Governor of the State that the State has in effect and is enforcing a State law, or has in effect and is operating a statewide program, relating to child abuse and neglect that includes—

[(i) provisions or procedures for an individual to report known and suspected instances of child abuse and neglect, including a State law for mandatory reporting by individuals required to report such instances;

[(ii) policies and procedures (including appropriate referrals to child protection service systems and for other appropriate services) to address the needs of in-

infants born with and identified as being affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder, including a requirement that health care providers involved in the delivery or care of such infants notify the child protective services system of the occurrence of such condition in such infants, except that such notification shall not be construed to—

【(I) establish a definition under Federal law of what constitutes child abuse or neglect; or

【(II) require prosecution for any illegal action;

【(iii) the development of a plan of safe care for the infant born and identified as being affected by substance abuse or withdrawal symptoms, or a Fetal Alcohol Spectrum Disorder to ensure the safety and well-being of such infant following release from the care of health care providers, including through—

【(I) addressing the health and substance use disorder treatment needs of the infant and affected family or caregiver; and

【(II) the development and implementation by the State of monitoring systems regarding the implementation of such plans to determine whether and in what manner local entities are providing, in accordance with State requirements, referrals to and delivery of appropriate services for the infant and affected family or caregiver;

【(iv) procedures for the immediate screening, risk and safety assessment, and prompt investigation of such reports;

【(v) triage procedures, including the use of differential response, for the appropriate referral of a child not at risk of imminent harm to a community organization or voluntary preventive service;

【(vi) procedures for immediate steps to be taken to ensure and protect the safety of a victim of child abuse or neglect and of any other child under the same care who may also be in danger of child abuse or neglect and ensuring their placement in a safe environment;

【(vii) provisions for immunity from civil or criminal liability under State and local laws and regulations for individuals making good faith reports of suspected or known instances of child abuse or neglect, or who otherwise provide information or assistance, including medical evaluations or consultations, in connection with a report, investigation, or legal intervention pursuant to a good faith report of child abuse or neglect;

【(viii) methods to preserve the confidentiality of all records in order to protect the rights of the child and of the child's parents or guardians, including requirements ensuring that reports and records made and maintained pursuant to the purposes of this Act shall only be made available to—

【(I) individuals who are the subject of the report;

[(II) Federal, State, or local government entities, or any agent of such entities, as described in clause (ix);

[(III) child abuse citizen review panels;

[(IV) child fatality review panels;

[(V) a grand jury or court, upon a finding that information in the record is necessary for the determination of an issue before the court or grand jury; and

[(VI) other entities or classes of individuals statutorily authorized by the State to receive such information pursuant to a legitimate State purpose;

[(ix) provisions to require a State to disclose confidential information to any Federal, State, or local government entity, or any agent of such entity, that has a need for such information in order to carry out its responsibilities under law to protect children from child abuse and neglect;

[(x) provisions which allow for public disclosure of the findings or information about the case of child abuse or neglect which has resulted in a child fatality or near fatality;

[(xi) the cooperation of State law enforcement officials, court of competent jurisdiction, and appropriate State agencies providing human services in the investigation, assessment, prosecution, and treatment of child abuse and neglect;

[(xii) provisions requiring, and procedures in place that facilitate the prompt expungement of any records that are accessible to the general public or are used for purposes of employment or other background checks in cases determined to be unsubstantiated or false, except that nothing in this section shall prevent State child protective services agencies from keeping information on unsubstantiated reports in their case-work files to assist in future risk and safety assessment;

[(xiii) provisions and procedures requiring that in every case involving a victim of child abuse or neglect which results in a judicial proceeding, a guardian ad litem, who has received training appropriate to the role, including training in early childhood, child, and adolescent development, and who may be an attorney or a court appointed special advocate who has received training appropriate to that role (or both), shall be appointed to represent the child in such proceedings—

[(I) to obtain first-hand, a clear understanding of the situation and needs of the child; and

[(II) to make recommendations to the court concerning the best interests of the child;

[(xiv) the establishment of citizen review panels in accordance with subsection (c);

[(xv) provisions, procedures, and mechanisms—

[(I) for the expedited termination of parental rights in the case of any infant determined to be abandoned under State law; and

[(II) by which individuals who disagree with an official finding of child abuse or neglect can appeal such finding;

[(xvi) provisions, procedures, and mechanisms that assure that the State does not require reunification of a surviving child with a parent who has been found by a court of competent jurisdiction—

[(I) to have committed murder (which would have been an offense under section 1111(a) of title 18, United States Code, if the offense had occurred in the special maritime or territorial jurisdiction of the United States) of another child of such parent;

[(II) to have committed voluntary manslaughter (which would have been an offense under section 1112(a) of title 18, United States Code, if the offense had occurred in the special maritime or territorial jurisdiction of the United States) of another child of such parent;

[(III) to have aided or abetted, attempted, conspired, or solicited to commit such murder or voluntary manslaughter;

[(IV) to have committed a felony assault that results in the serious bodily injury to the surviving child or another child of such parent;

[(V) to have committed sexual abuse against the surviving child or another child of such parent; or

[(VI) to be required to register with a sex offender registry under section 113(a) of the Adam Walsh Child Protection and Safety Act of 2006 (42 U.S.C. 16913(a));

[(xvii) an assurance that, upon the implementation by the State of the provisions, procedures, and mechanisms under clause (xvi), conviction of any one of the felonies listed in clause (xvi) constitute grounds under State law for the termination of parental rights of the convicted parent as to the surviving children (although case-by-case determinations of whether or not to seek termination of parental rights shall be within the sole discretion of the State);

[(xviii) provisions and procedures to require that a representative of the child protective services agency shall, at the initial time of contact with the individual subject to a child abuse or neglect investigation, advise the individual of the complaints or allegations made against the individual, in a manner that is consistent with laws protecting the rights of the informant;

[(xix) provisions addressing the training of representatives of the child protective services system regarding the legal duties of the representatives, which may consist of various methods of informing such rep-

representatives of such duties, in order to protect the legal rights and safety of children and families from the initial time of contact during investigation through treatment;

[(xx) provisions and procedures for improving the training, retention, and supervision of caseworkers;

[(xxi) provisions and procedures for referral of a child under the age of 3 who is involved in a substantiated case of child abuse or neglect to early intervention services funded under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.);

[(xxii) provisions and procedures for requiring criminal background record checks that meet the requirements of section 471(a)(20) of the Social Security Act (42 U.S.C. 671(a)(20)) for prospective foster and adoptive parents and other adult relatives and non-relatives residing in the household;

[(xxiii) provisions for systems of technology that support the State child protective service system described in subsection (a) and track reports of child abuse and neglect from intake through final disposition;

[(xxiv) provisions and procedures requiring identification and assessment of all reports involving children known or suspected to be victims of sex trafficking (as defined in section 103(10) of the Trafficking Victims Protection Act of 2000 (22 U.S.C. 7102 (10))); and

[(xxv) provisions and procedures for training child protective services workers about identifying, assessing, and providing comprehensive services for children who are sex trafficking victims, including efforts to coordinate with State law enforcement, juvenile justice, and social service agencies such as runaway and homeless youth shelters to serve this population;

[(C) an assurance that the State has in place procedures for responding to the reporting of medical neglect (including instances of withholding of medically indicated treatment from infants with disabilities who have life-threatening conditions), procedures or programs, or both (within the State child protective services system), to provide for—

[(i) coordination and consultation with individuals designated by and within appropriate health-care facilities;

[(ii) prompt notification by individuals designated by and within appropriate health-care facilities of cases of suspected medical neglect (including instances of withholding of medically indicated treatment from infants with disabilities who have life-threatening conditions); and

[(iii) authority, under State law, for the State child protective services system to pursue any legal remedies, including the authority to initiate legal proceedings in a court of competent jurisdiction, as may

be necessary to prevent the withholding of medically indicated treatment from infants with disabilities who have life-threatening conditions;

[(D) a description of—

[(i) the services to be provided under the grant to individuals, families, or communities, either directly or through referrals aimed at preventing the occurrence of child abuse and neglect;

[(ii) the training to be provided under the grant to support direct line and supervisory personnel in report taking, screening, assessment, decision making, and referral for investigating suspected instances of child abuse and neglect;

[(iii) the training to be provided under the grant for individuals who are required to report suspected cases of child abuse and neglect;

[(iv) policies and procedures encouraging the appropriate involvement of families in decisionmaking pertaining to children who experienced child abuse or neglect;

[(v) policies and procedures that promote and enhance appropriate collaboration among child protective service agencies, domestic violence service agencies, substance abuse treatment agencies, and other agencies in investigations, interventions, and the delivery of services and treatment provided to children and families affected by child abuse or neglect, including children exposed to domestic violence, where appropriate; and

[(vi) policies and procedures regarding the use of differential response, as applicable;

[(E) an assurance or certification that the programs or projects relating to child abuse and neglect carried out under part B of title IV of the Social Security Act (42 U.S.C. 621 et seq.) comply with the requirements set forth in paragraph (1) and this paragraph;

[(F) an assurance or certification that programs and training conducted under this title address the unique needs of unaccompanied homeless youth, including access to enrollment and support services and that such youth are eligible for under parts B and E of title IV of the Social Security Act (42 U.S.C. 621 et seq., 670 et seq.) and meet the requirements of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11301 et seq.); and

[(G) an assurance that the State, in developing the State plan described in paragraph (1), has collaborated with community-based prevention agencies and with families affected by child abuse or neglect.

Nothing in subparagraph (B) shall be construed to limit the State's flexibility to determine State policies relating to public access to court proceedings to determine child abuse and neglect, except that such policies shall, at a minimum, ensure the safety and well-being of the child, parents, and families.】

(1) *STATE PLAN.*—

(A) *IN GENERAL.*—To be eligible to receive a grant under this section, a State shall submit to the Secretary a State plan that—

(i) specifies how the grant will be used, and the State's strategic plan, to treat child abuse and neglect and enhance community-based, prevention-centered approaches that attempt to prevent child abuse and neglect while strengthening and supporting families whenever possible; and

(ii) meets the requirements of this subsection.

(B) *COORDINATION AND CONSULTATION.*—

(i) *COORDINATION.*—Each State, to the maximum extent practicable, shall coordinate its State plan under this subsection with its State plan under part B of title IV of the Social Security Act (42 U.S.C. 621 et seq.) relating to child and family services and, in States electing to provide services under part E of title IV of the Social Security Act (42 U.S.C. 670 et seq.) relating to foster care prevention services, its State plan under such part E.

(ii) *CONSULTATION.*—In developing a State plan under this subsection, a State shall consult with community-based prevention and service agencies, parents and families affected by child abuse or neglect in the State, law enforcement, family court judges, prosecutors who handle criminal child abuse cases, and medical professionals engaged in the treatment of child abuse and neglect.

(C) *DURATION AND SUBMISSION OF PLAN.*—Each State plan shall—

(i) be submitted not less than every 5 years; and

(ii) if necessary, revised by the State to inform the Secretary of any substantive changes, including—

(I) any changes to State law or regulations, relating to the prevention of child abuse and neglect that may affect the eligibility of the State under this section; or

(II) any changes in the State's activities, strategies, or programs under this section.

(2) *CONTENTS.*—A State plan submitted under paragraph (1) shall contain a description of the activities that the State will carry out using amounts received under the grant to achieve the objectives of this title, including—

(A) an assurance in the form of a certification by the Governor of the State that the State has in effect and is enforcing a State law, or has in effect and is operating a state-wide program, relating to child abuse and neglect that includes—

(i) provisions or procedures for an individual to report known and suspected instances of child abuse and neglect, including a State law for mandatory reporting by individuals required to report such instances;

(ii) procedures for the immediate screening, risk and safety assessment, and prompt investigation of such re-

ports of alleged abuse and neglect in order to ensure the well-being and safety of children;

(iii) procedures for immediate steps to be taken to ensure and protect the safety of a victim of child abuse or neglect and of any other child under the same care who may also be in danger of child abuse or neglect and ensuring their placement in a safe environment;

(iv) methods to preserve the confidentiality of all records in order to protect the rights of the child and of the child's parents or guardians, including requirements ensuring that reports and records made and maintained pursuant to the purposes of this Act shall only be made available to—

(I) individuals who are the subject of the report;  
 (II) Federal, State, or local government entities, or any agent of such entities, as described in clause (xi) of this subparagraph;

(III) child abuse citizen review panels;

(IV) child fatality review panels;

(V) a grand jury or court, upon a finding that information in the record is necessary for the determination of an issue before the court or grand jury; and

(VI) other entities or classes of individuals statutorily authorized by the State to receive such information pursuant to a legitimate State purpose;

(v) provisions and procedures requiring that in every case involving a victim of child abuse or neglect which results in a judicial proceeding, a guardian ad litem, who has received education appropriate to the role, including education in early childhood, child, and adolescent development, and domestic violence, and who may be an attorney or a court appointed special advocate who has received education appropriate to that role (or both), shall be appointed to represent the child (who, for purposes of this section, shall have any age limit elected by the State pursuant to section 475(8)(B)(iii) of the Social Security Act (42 U.S.C. 675(8)(B)(iii)) in such proceedings—

(I) to obtain first-hand, a clear understanding of the situation and needs of such child; and

(II) to make recommendations to the court concerning the best interests of such child;

(vi) the establishment of citizen review panels in accordance with subsection (c);

(vii) provisions and procedures to require that a representative of the child protective services agency shall, at the initial time of contact with the individual subject to a child abuse or neglect investigation, advise the individual of the complaints or allegations made against the individual, in a manner that is consistent with laws protecting the rights of the informant;

(viii) provisions, procedures, and mechanisms—

(I) for the expedited termination of parental rights in the case of any infant determined to be abandoned under State law; and

(II) by which individuals who disagree with an official finding of child abuse or neglect can appeal such finding;

(ix) provisions addressing the professional development of representatives of the child protective services system regarding the legal duties of the representatives, which may consist of various methods of informing such representatives of such duties (including providing such education in different languages if necessary), in order to protect the legal rights and safety of children and their parents and caregivers from the initial time of contact during investigation through treatment;

(x) provisions for immunity from civil or criminal liability under State and local laws and regulations for individuals making good faith reports of suspected or known instances of child abuse or neglect, or who otherwise provide information or assistance, including medical evaluations or consultations, in connection with a report, investigation, or legal intervention pursuant to a good faith report of child abuse or neglect;

(xi) provisions to require the State to disclose confidential information to any Federal, State, or local government entity, or any agent of such entity, that has a need for such information in order to carry out its responsibilities under law to protect children from child abuse and neglect;

(xii) provisions requiring, and procedures in place that facilitate the prompt expungement of any records that are accessible to the general public or are used for purposes of employment or other background checks in cases determined to be unsubstantiated or false, except that nothing in this section shall prevent State child protective services agencies from keeping information on unsubstantiated reports in their casework files to assist in future risk and safety assessment;

(xiii) provisions and procedures for requiring criminal background record checks that meet the requirements of section 471(a)(20) of the Social Security Act (42 U.S.C. 671(a)(20)) for prospective foster and adoptive parents and other adult relatives and non-relatives residing in the household;

(xiv) provisions for systems of technology that support the State child protective services system and track reports of child abuse and neglect from intake through final disposition;

(xv) provisions and procedures requiring identification and assessment of all reports involving children known or suspected to be victims of sex trafficking (as defined in section 103(12) of the Trafficking Victims Protection Act of 2000 (22 U.S.C. 7102 (12)));

*(xvi) provisions, procedures, and mechanisms that assure that the State does not require reunification of a surviving child with a parent who has been found by a court of competent jurisdiction—*

*(I) to have committed murder (which would have been an offense under section 1111(a) of title 18, United States Code, if the offense had occurred in the special maritime or territorial jurisdiction of the United States) of another child of such parent;*

*(II) to have committed voluntary manslaughter (which would have been an offense under section 1112(a) of title 18, United States Code, if the offense had occurred in the special maritime or territorial jurisdiction of the United States) of another child of such parent;*

*(III) to have aided or abetted, attempted, conspired, or solicited to commit such murder or voluntary manslaughter;*

*(IV) to have committed a felony assault that results in the serious bodily injury to the surviving child or another child of such parent;*

*(V) to have committed sexual abuse against the surviving child or another child of such parent; or*

*(VI) to be required to register with a sex offender registry under section 113(a) of the Adam Walsh Child Protection and Safety Act of 2006 (42 U.S.C. 16913(a)); and*

*(xvii) an assurance that, upon the implementation by the State of the provisions, procedures, and mechanisms under clause (xvi), conviction of any one of the felonies listed in clause (xvi) constitute grounds under State law for the termination of parental rights of the convicted parent as to the surviving children (although case-by-case determinations of whether or not to seek termination of parental rights shall be within the sole discretion of the State);*

*(B) an assurance that the State has in place procedures for responding to the reporting of medical neglect (including instances of withholding of medically indicated treatment from infants with disabilities who have life-threatening conditions), procedures or programs, or both (within the State child protective services system), to provide for—*

*(i) coordination and consultation with individuals designated by and within appropriate health-care facilities;*

*(ii) prompt notification by individuals designated by and within appropriate health-care facilities of cases of suspected medical neglect (including instances of withholding of medically indicated treatment from infants with disabilities who have life-threatening conditions); and*

*(iii) authority, under State law, for the State child protective services system to pursue any legal remedies, including the authority to initiate legal proceedings in a court of competent jurisdiction, as may be necessary*

*to prevent the withholding of medically indicated treatment from infants with disabilities who have life-threatening conditions;*

*(C) an assurance or certification that programs and education conducted under this title address the unique needs of unaccompanied homeless youth, including access to enrollment and support services and that such youth are eligible for under parts B and E of title IV of the Social Security Act (42 U.S.C. 621 et seq., 670 et seq.) and meet the requirements of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11301 et seq.);*

*(D) a description of—*

*(i) policies and procedures (including appropriate referrals to child welfare service systems and for other appropriate services (including home visiting services and mutual support and parent partner programs)) to address the needs of infants born with and identified as being affected by substance use or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder, including a requirement that health care providers involved in the delivery or care of such infants notify the child welfare services system of the occurrence of such condition in such infants, except that such notification shall not be construed to—*

*(I) establish a definition under Federal law of what constitutes child abuse or neglect; or*

*(II) require prosecution for any illegal action;*

*(ii) the development of a plan of safe care for the infant born and identified as being affected by substance use or withdrawal symptoms, or a Fetal Alcohol Spectrum Disorder to ensure the safety and well-being of such infant following release from the care of health care providers, including through—*

*(I) addressing the health and substance use disorder treatment needs of the infant and affected family or caregiver; and*

*(II) the development and implementation by the State of monitoring systems regarding the implementation of such plans to determine whether and in what manner local entities are providing, in accordance with State requirements, referrals to and delivery of appropriate services for the infant and affected family or caregiver;*

*(iii) policies and procedures to make available to the public on the State website the data, findings, and information about all cases of child abuse or neglect resulting in a child fatality or near fatality, including a description of—*

*(I) how the State will not create an exception to such public disclosure, except in a case in which—*

*(aa) the State would like to delay public release of case-specific findings or information (including any previous reports of domestic violence and subsequent actions taken to assess*

and address such reports) while a criminal investigation or prosecution of such a fatality or near fatality is pending;

(bb) the State is protecting the identity of a reporter of child abuse or neglect; or

(cc) the State is withholding identifying information of members of the victim's family who are not perpetrators of the fatality or near fatality; and

(II) how the State will ensure that in providing the public disclosure required under this clause, the State will include—

(aa) the cause and circumstances of the fatality or near fatality;

(bb) the age and gender of the child; and

(cc) any previous reports of child abuse or neglect investigations that are relevant to the child abuse or neglect that led to the fatality or near fatality;

(iv) how the State will use data collected on child abuse or neglect to prevent child fatalities and near fatalities;

(v) how the State will implement efforts to prevent child fatalities and near fatalities;

(vi) the cooperation of State law enforcement officials, court of competent jurisdiction, and appropriate State agencies providing human services in the investigation, assessment, prosecution, and treatment of child abuse and neglect;

(vii) the steps the State will take to improve the professional development, retention, and supervision of caseworkers and how the State will measure the effectiveness of such efforts;

(viii) the State's plan to ensure each child under the age of 3 who is involved in a substantiated case of child abuse or neglect will be referred to the State's child find system under section 635(a)(5) of the Individuals with Disabilities Education Act (20 U.S.C. 1435(a)(5)) in order to determine if the child is an infant or toddler with a disability (as defined in section 632(5) of such Act (20 U.S.C. 1432(5)));

(ix) the State's plan to improve, as part of a comprehensive State strategy led by law enforcement, professional development for child protective services workers and their appropriate role in identifying, assessing, and providing comprehensive services for children who are sex trafficking victims, in coordination with law enforcement, juvenile justice agencies, runaway and homeless youth shelters, and health, mental health, and other social service agencies and providers;

(x) the services to be provided under the grant to individuals, families, or communities, either directly or through referrals, aimed at preventing the occurrence of child abuse and neglect;

(xi) the State's efforts to ensure professionals who are required to report suspected cases of child abuse and neglect are aware of their responsibilities under subparagraph (A)(i) and receive professional development relating to performing such responsibilities that is specific to their profession and workplace;

(xii) policies and procedures encouraging the appropriate involvement of families in decisionmaking pertaining to children who experienced child abuse or neglect;

(xiii) the State's efforts to improve appropriate collaboration among child protective services agencies, domestic violence services agencies, substance use disorder treatment agencies, and other agencies in investigations, interventions, and the delivery of services and treatment provided to children and families affected by child abuse or neglect, including children exposed to domestic violence, where appropriate;

(xiv) policies and procedures regarding the use of differential response, as applicable, to improve outcomes for children; and

(xv) the State's efforts to reduce racial bias in its child protective services system.

(3) **[LIMITATION] LIMITATIONS.**—**[With regard to clauses (vi) and (vii) of paragraph (2)(B),]**

(A) **DISCLOSURE OF CERTAIN IDENTIFYING INFORMATION.**—*With regard to subparagraphs (A)(iv) and (D)(iii) of paragraph (2), nothing in this section shall be construed as restricting the ability of a State to refuse to disclose identifying information concerning the individual initiating a report or complaint alleging suspected instances of child abuse or neglect, except that the State may not refuse such a disclosure where a court orders such disclosure after such court has reviewed, in camera, the record of the State related to the report or complaint and has found it has reason to believe that the reporter knowingly made a false report[.]; and*

(B) **PUBLIC ACCESS TO COURT PROCEEDINGS.**—*Nothing in paragraph (2) shall be construed to limit the State's flexibility to determine State policies relating to public access to court proceedings to determine child abuse and neglect, except that such policies shall, at a minimum, ensure the safety and well-being of the child, parents, and families.*

(4) **[DEFINITIONS] DEFINITION.**—For purposes of **[this subsection—]**

**[(A) the term “near fatality” means an act] this subsection, the term “near fatality” means an act that, as certified by a physician, places the child in serious or critical condition[; and].**

**[(B) the term “serious bodily injury” means bodily injury which involves substantial risk of death, extreme physical pain, protracted and obvious disfigurement, or protracted loss or impairment of the function of a bodily member, organ, or mental faculty.]**

(c) **CITIZEN REVIEW PANELS.**—

## (1) ESTABLISHMENT.—

(A) IN GENERAL.—Except as provided in subparagraph (B), each State to which a grant is made under this section shall establish not less than 3 citizen review panels.

## (B) EXCEPTIONS.—

[(i) ESTABLISHMENT OF PANELS BY STATES RECEIVING MINIMUM ALLOTMENT.—A State that receives the minimum allotment of \$175,000 under section 203(b)(1)(A) for a fiscal year shall establish not less than 1 citizen review panel.]

[(ii) DESIGNATION OF EXISTING ENTITIES.—A State may] *EXCEPTION.*—A State may designate as panels for purposes of this subsection one or more existing entities established under State or Federal law, such as child fatality panels or foster care review panels, if such entities have the capacity to satisfy the requirements of paragraph (4) and the State ensures that such entities will satisfy such requirements.

(2) MEMBERSHIP.—Each panel established pursuant to paragraph (1) shall be composed of volunteer members who are broadly representative of the community in which such panel is established, including members who have expertise in the prevention and treatment of child abuse and neglect, and may include adult former victims of child abuse or neglect.

(3) MEETINGS.—Each panel established pursuant to paragraph (1) shall meet not less than once every 3 months.

## (4) FUNCTIONS.—

(A) IN GENERAL.—Each panel established pursuant to paragraph (1) shall, by examining the policies, procedures, and practices of State and local agencies [and where appropriate, specific cases,] evaluate the extent to which State and local child protection system agencies are effectively discharging their child protection responsibilities in accordance with—

- (i) the State plan under subsection (b);
- (ii) the child protection standards set forth in subsection (b); and
- (iii) any other criteria that the panel considers important to ensure the protection of children, including—

(I) a review of the extent to which the State and local child protective services system is coordinated with the [foster care and adoption programs] *foster care, prevention, and permanency programs* established under part E of title IV of the Social Security Act (42 U.S.C. 670 et seq.); and

(II) a review of child fatalities and near fatalities (as defined in subsection (b)(4)).

## (B) CONFIDENTIALITY.—

(i) IN GENERAL.—The members and staff of a panel established under paragraph (1)—

(I) shall not disclose to any person or government official any identifying information about

any specific child protection case with respect to which the panel is provided information; and

(II) shall not make public other information unless authorized by State statute.

(ii) CIVIL SANCTIONS.—Each State that establishes a panel pursuant to paragraph (1) shall establish civil sanctions for a violation of clause (i).

(C) PUBLIC OUTREACH.—Each panel shall provide for public outreach and comment in order to assess the impact of current procedures and practices upon children and families in the community and in order to meet its obligations under subparagraph (A).

(5) STATE ASSISTANCE.—Each State that establishes a panel pursuant to paragraph (1)—

(A) shall provide the panel access to information on cases that the panel desires to review if such information is necessary for the panel to carry out its functions under paragraph (4); and

(B) shall provide the panel, upon its request, staff assistance for the performance of the duties of the panel.

(6) REPORTS.—~~Each panel established under paragraph (1) shall prepare and make available to the State and the public, on an annual basis, a report containing a summary of the activities of the panel and recommendations to improve the child protection services system at the State and local levels.~~ *Each panel established under paragraph (1) shall prepare and make available to the State and the public, on an annual basis, a report containing a summary of the activities of the panel, the criteria used for determining which activities the panel engaged in, and recommendations or observations to improve the child protective services system at the State and local levels, and the data upon which these recommendations or observations are based.* Not later than 6 months after the date on which a report is submitted by the panel to the State, the appropriate State agency shall submit a written response to State and local child protection systems and the citizen review panel that describes whether or how the State will incorporate the recommendations of such panel (where appropriate) to make measurable progress in improving the State and local child protective system.

(d) ANNUAL STATE DATA REPORTS.—Each State to which a grant is made under this section shall annually work with the Secretary to provide, to the maximum extent practicable, a report that includes the following:

(1) The number of children who were reported to the State during the year as victims of child abuse or neglect.

(2) Of the number of children described in paragraph (1), the number with respect to whom such reports were—

- (A) substantiated;
- (B) unsubstantiated; or
- (C) determined to be false.

(3) Of the number of children described in paragraph (2)—

(A) the number that did not receive services during the year under the State program funded under this section or an equivalent State program;

- (B) the number that received services during the year under the State program funded under this section or an equivalent State program; and
- (C) the number that were removed from their families during the year by disposition of the case.
- (4) The number of families that received preventive services, including use of differential response, from the State during the year.
- (5) The number of deaths in the State during the year resulting from child abuse or neglect.
- (6) Of the number of children described in paragraph (5), the number of such children who were in foster care.
- (7)(A) The number of child protective service personnel responsible for the—
- (i) intake of reports filed in the previous year;
  - (ii) screening of such reports;
  - (iii) assessment of such reports; and
  - (iv) investigation of such reports.
- (B) The average caseload for the workers described in subparagraph (A).
- (8) The agency response time with respect to each such report with respect to initial investigation of reports of child abuse or neglect.
- (9) The response time with respect to the provision of services to families and children where an allegation of child abuse or neglect has been made.
- (10) For child protective service personnel responsible for intake, screening, assessment, and investigation of child abuse and neglect reports in the State—
- (A) information on the education, qualifications, and training requirements established by the State for child protective service professionals, including for entry and advancement in the profession, including advancement to supervisory positions;
  - (B) data on the education, qualifications, and training of such personnel;
  - (C) demographic information of the child protective service personnel; and
  - (D) information on caseload or workload requirements for such personnel, including requirements for average number and maximum number of cases per child protective service worker and supervisor.
- (11) The number of children reunited with their families or receiving family preservation services that, within five years, result in subsequent substantiated reports of child abuse or neglect, including the death of the child.
- (12) The number of children for whom individuals were appointed by the court to represent the best interests of such children and the average number of out of court contacts between such individuals and children.
- [(13) The annual report containing the summary of the activities of the citizen review panels of the State required by subsection (c)(6).]
- (13) The annual report containing the summary of the activities and recommendations of the citizen review panels of the*

*State required by subsection (c)(6), and the actions taken by the State as a result of such recommendations.*

(14) The number of children under the care of the State child protection system who are transferred into the custody of the State juvenile justice system.

(15) The number of children referred to a child protective services system under **【subsection (b)(2)(B)(ii)】** *subsection (b)(2)(D)(i)*.

(16) The number of children determined to be eligible for referral, and the number of children referred, under **【subsection (b)(2)(B)(xxi)】** *subsection (b)(2)(D)(viii)*, to agencies providing early intervention services under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.).

(17) The number of children determined to be victims described in **【subsection (b)(2)(B)(xxiv)】** *subsection (b)(2)(A)(xv)*.

(18) The number of infants—

(A) identified under **【subsection (b)(2)(B)(ii)】** *subsection (b)(2)(D)(i)*;

(B) for whom a plan of safe care was developed under **【subsection (b)(2)(B)(iii)】** *subsection (b)(2)(D)(ii)*; and

(C) for whom a referral was made for appropriate services, including services for the affected family or caregiver, under **【subsection (b)(2)(B)(iii)】** *subsection (b)(2)(D)(ii)*.

(19) *The number of child fatalities and near fatalities from maltreatment and related information in accordance with the uniform standards established under section 103(d).*

(e) ANNUAL REPORT BY THE SECRETARY.—Within 6 months after receiving the State reports under subsection (d), the Secretary shall prepare a report based on information provided by the States for the fiscal year under such subsection and shall make the report and such information available to the Congress and the national clearinghouse for information relating to child abuse and neglect.

(f) ALLOTMENTS.—

(1) DEFINITIONS.—In this subsection:

(A) FISCAL YEAR 2009 GRANT FUNDS.—The term “fiscal year 2009 grant funds” means the amount appropriated under section 112 for fiscal year 2009, and not reserved under section 112(a)(2).

(B) GRANT FUNDS.—The term “grant funds” means the amount appropriated under section 112 for a fiscal year and not reserved under section 112(a)(2).

(C) STATE.—The term “State” means each of the several States, the District of Columbia, and the Commonwealth of Puerto Rico.

(D) TERRITORY.—The term “territory” means Guam, American Samoa, the United States Virgin Islands, and the Commonwealth of the Northern Mariana Islands.

(2) IN GENERAL.—Except as otherwise provided in this section, the Secretary shall make allotments to each State and territory that applies for a grant under this section in an amount equal to the sum of—

(A) \$50,000; and

(B) an amount that bears the same relationship to any grant funds remaining after all such States and territories have received \$50,000, as the number of children under

the age of 18 in the State or territory bears to the number of such children in all States and territories that apply for such a grant.

(3) ALLOTMENTS FOR DECREASED APPROPRIATION YEARS.—In the case where the grant funds for a fiscal year are less than the fiscal year 2009 grant funds, the Secretary shall ratably reduce each of the allotments under paragraph (2) for such fiscal year.

(4) ALLOTMENTS FOR INCREASED APPROPRIATION YEARS.—

(A) MINIMUM ALLOTMENTS TO STATES FOR INCREASED APPROPRIATIONS YEARS.—In any fiscal year for which the grant funds exceed the fiscal year 2009 grant funds by more than \$1,000,000, the Secretary shall adjust the allotments under paragraph (2), as necessary, such that no State that applies for a grant under this section receives an allotment in an amount that is less than—

(i) \$100,000, for a fiscal year in which the grant funds exceed the fiscal year 2009 grant funds by more than \$1,000,000 but less than \$2,000,000;

(ii) \$125,000, for a fiscal year in which the grant funds exceed the fiscal year 2009 grant funds by at least \$2,000,000 but less than \$3,000,000; and

(iii) \$150,000, for a fiscal year in which the grant funds exceed the fiscal year 2009 grant funds by at least \$3,000,000.

(B) ALLOTMENT ADJUSTMENT.—In the case of a fiscal year for which subparagraph (A) applies and the grant funds are insufficient to satisfy the requirements of such subparagraph (A), paragraph (2), and paragraph (5), the Secretary shall, subject to paragraph (5), ratably reduce the allotment of each State for which the allotment under paragraph (2) is an amount that exceeds the applicable minimum under subparagraph (A), as necessary to ensure that each State receives the applicable minimum allotment under subparagraph (A).

(5) HOLD HARMLESS.—Notwithstanding paragraphs (2) and (4), except as provided in paragraph (3), no State or territory shall receive a grant under this section in an amount that is less than the amount such State or territory received under this section for fiscal year 2009.

(6) LIMITATION.—*For any fiscal year for which the amount allotted to a State or territory under this subsection exceeds the amount allotted to the State or territory under such subsection for fiscal year 2019, the State or territory may use not more than 2 percent of such excess amount for administrative expenses.*

**SEC. 107. GRANTS TO STATES FOR PROGRAMS RELATING TO THE INVESTIGATION AND PROSECUTION OF CHILD ABUSE AND NEGLECT CASES.**

(a) GRANTS TO STATES.—The Secretary, in consultation with the Attorney General, is authorized to make grants to the States for the purpose of assisting States in developing, establishing, and operating programs designed to improve—

(1) the assessment and investigation of suspected child abuse and neglect cases, including cases of suspected child sexual

abuse and exploitation, in a manner that limits additional trauma to the child and the child's family;

(2) the assessment and investigation of cases of suspected child abuse-related fatalities and suspected child neglect-related fatalities;

(3) the investigation and prosecution of cases of child abuse and neglect, including child sexual abuse and exploitation; and

(4) the assessment and investigation of cases involving children with disabilities or serious health-related problems who are suspected victims of child abuse or neglect.

(b) **ELIGIBILITY REQUIREMENTS.**—In order for a State to qualify for assistance under this section, such State shall—

(1) fulfill the requirements of section 106(b);

(2) establish a task force as provided in subsection (c);

(3) fulfill the requirements of subsection (d);

(4) submit annually an application to the Secretary at such time and containing such information and assurances as the Secretary considers necessary, including an assurance that the State will—

(A) make such reports to the Secretary as may reasonably be required; and

(B) maintain and provide access to records relating to activities under subsections (a) and (b); and

(5) submit annually to the Secretary a report on the manner in which assistance received under this program was expended throughout the State, with particular attention focused on the areas described in paragraphs (1) through (3) of subsection (a).

(c) **STATE TASK FORCES.**—

(1) **GENERAL RULE.**—Except as provided in paragraph (2), a State requesting assistance under this section shall establish or designate, and maintain, a State multidisciplinary task force on children's justice (hereinafter referred to as "State task force") composed of professionals with knowledge and experience relating to the criminal justice system and issues of child physical abuse, child neglect, child sexual abuse and exploitation, and child maltreatment related fatalities. The State task force shall include—

(A) individuals representing the law enforcement community;

(B) judges and attorneys involved in both civil and criminal court proceedings related to child abuse and neglect (including individuals involved with the defense as well as the prosecution of such cases);

(C) child advocates, including both attorneys for children and, where such programs are in operation, court appointed special advocates;

(D) health and mental health professionals;

(E) individuals representing child protective service agencies;

(F) individuals experienced in working with children with disabilities;

(G) parents;

(H) representatives of parents' groups;

(I) adult former victims of child abuse or neglect; and

(J) individuals experienced in working with homeless children and youths (as defined in section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a)).

(2) EXISTING TASK FORCE.—As determined by the Secretary, a State commission or task force established after January 1, 1983, with substantially comparable membership and functions, may be considered the State task force for purposes of this subsection.

(d) STATE TASK FORCE STUDY.—Before a State receives assistance under this section, and at three year intervals thereafter, the State task force shall comprehensively—

(1) review and evaluate State investigative, administrative and both civil and criminal judicial handling of cases of child abuse and neglect, including child sexual abuse and exploitation, as well as cases involving suspected child maltreatment related fatalities and cases involving a potential combination of jurisdictions, such as intrastate, interstate, Federal-State, and State-Tribal; and

(2) make policy and training recommendations in each of the categories described in subsection (e).

The task force may make such other comments and recommendations as are considered relevant and useful.

(e) ADOPTION OF STATE TASK FORCE RECOMMENDATIONS.—

(1) GENERAL RULE.—Subject to the provisions of paragraph (2), before a State receives assistance under this section, a State shall adopt recommendations of the State task force in each of the following categories—

(A) investigative, administrative, and judicial handling of cases of child abuse and neglect, including child sexual abuse and exploitation, as well as cases involving suspected child maltreatment related fatalities and cases involving a potential combination of jurisdictions, such as intrastate, interstate, Federal-State, and State-Tribal, in a manner which reduces the additional trauma to the child victim and the victim's family and which also ensures procedural fairness to the accused;

(B) experimental, model, and demonstration programs for testing innovative approaches and techniques which may improve the prompt and successful resolution of civil and criminal court proceedings or enhance the effectiveness of judicial and administrative action in child abuse and neglect cases, particularly child sexual abuse and exploitation cases, including the enhancement of performance of court-appointed attorneys and guardians ad litem for children, and which also ensure procedural fairness to the accused; and

(C) reform of State laws, ordinances, regulations, protocols, and procedures to provide comprehensive protection for children, which may include those children involved in reports of child abuse or neglect with a potential combination of jurisdictions, such as intrastate, interstate, Federal-State, and State-Tribal, from child abuse and neglect, including child sexual abuse and exploitation, while ensuring fairness to all affected persons.

(2) EXEMPTION.—As determined by the Secretary, a State shall be considered to be in fulfillment of the requirements of this subsection if—

(A) the State adopts an alternative to the recommendations of the State task force, which carries out the purpose of this section, in each of the categories under paragraph (1) for which the State task force's recommendations are not adopted; or

(B) the State is making substantial progress toward adopting recommendations of the State task force or a comparable alternative to such recommendations.

(f) FUNDS AVAILABLE.—For grants under this section, the Secretary shall use the amount authorized by section 1404A of the Victims of Crime Act of 1984 [(42 U.S.C. 10603a)] (34 U.S.C. 20104).

**SEC. 108. MISCELLANEOUS REQUIREMENTS RELATING TO ASSISTANCE.**

(a) CONSTRUCTION OF FACILITIES.—

(1) RESTRICTION ON USE OF FUNDS.—Assistance provided under this Act may not be used for construction of facilities.

(2) LEASE, RENTAL, OR REPAIR.—The Secretary may authorize the use of funds received under this Act—

(A) where adequate facilities are not otherwise available, for the lease or rental of facilities; or

(B) for the repair or minor remodeling or alteration of existing facilities.

(b) GEOGRAPHICAL DISTRIBUTION.—The Secretary shall establish criteria designed to achieve equitable distribution of assistance under this Act among the States, *Indian tribes, and tribal organizations*, among geographic areas of the Nation, and among rural and urban areas of the Nation. To the extent possible, the Secretary shall ensure that the citizens of each State receive assistance from at least one project under this Act.

(c) PROTECTING AGAINST SYSTEMIC CHILD SEXUAL ABUSE.—

(1) REPORTING AND TASK FORCE.—*Not later than 24 months after the date of the enactment of the Stronger Child Abuse Prevention and Treatment Act, each State task force established under section 107(c) and expanded as described in paragraph (2) shall study and make recommendations on the following, with a focus on preventing systemic child sexual abuse:*

(A) *How to detect systemic child sexual abuse that occurs in an organization.*

(B) *How to prevent child sexual abuse and systemic child sexual abuse from occurring in organizations, which shall include recommendations to improve—*

(i) *practices and policies for the education of parents, caregivers, and victims, and age appropriate education of children, about risk factors or signs of potential child sexual abuse; and*

(ii) *the efficacy of applicable State laws and the role such laws play in deterring or preventing incidences of child sexual abuse.*

(C) *The feasibility of making available the disposition of a perpetrator within an organization to—*

(i) *the child alleging sexual abuse or the child's family; or*

- (ii) *an adult who was a child at the time of the sexual abuse claim in question or the adult's family.*
- (2) **TASK FORCE COMPOSITION.**—*For purposes of this subsection, a State task force shall include—*
  - (A) *the members of the State task force described in section 107(c) for the State; and*
  - (B) *the following:*
    - (i) *Family court judges.*
    - (ii) *Individuals from religious organizations.*
    - (iii) *Individuals from youth-serving organizations, including youth athletics organizations.*
- (3) **REPORTING ON RECOMMENDATIONS.**—*Not later than 6 months after a State task force makes recommendations under paragraph (1), the State maintaining such State task force shall—*
  - (A) *make public the recommendations of such report;*
  - (B) *report to the Secretary on the status of adopting such recommendations; and*
  - (C) *in a case in which the State declines to adopt a particular recommendation, make public the explanation for such declination.*
- (4) **DEFINITIONS.**—*For purposes of this subsection—*
  - (A) *the terms “child sexual abuse” and “sexual abuse” shall not be limited to an act or a failure to act on the part of a parent or caretaker;*
  - (B) *the term “organization” means any entity that serves children; and*
  - (C) *the term “systemic child sexual abuse” means—*
    - (i) *a pattern of informal or formal policy or de facto policy to not follow State and local requirements to report instances of child sexual abuse in violation of State and local mandatory reporting laws or policy; or*
    - (ii) *a pattern of assisting individual perpetrators in maintaining their careers despite substantiated evidence of child sexual abuse.*

**[(c)] (d) LIMITATION.**—No funds appropriated for any grant or contract pursuant to authorizations made in this Act may be used for any purpose other than that for which such funds were authorized to be appropriated.

**[(d)] (e) SENSE OF CONGRESS.**—It is the sense of Congress that the Secretary should encourage all States and public and private entities that receive assistance under this title to—

- (1) ensure that children and families with limited English proficiency who participate in programs under this title are provided with materials and services through such programs in an appropriate language other than English; and
- (2) ensure that individuals with disabilities who participate in programs under this title are provided with materials and services through such programs that are appropriate to their disabilities.

**[(e)] (f) ANNUAL REPORT.**—A State that receives funds under section 106(a) shall annually prepare and submit to the Secretary a report describing the manner in which funds provided under this

Act, alone or in combination with other Federal funds, were used to address the purposes and achieve the objectives of section 106.

\* \* \* \* \*

**[SEC. 110. REPORTS.**

**[(a) COORDINATION EFFORTS.—**Not later than 1 year after the date of enactment of the CAPTA Reauthorization Act of 2010, the Secretary shall submit to the Committee on Education and Labor of the House of Representatives and the Committee on Health, Education, Labor, and Pensions of the Senate a report on efforts to coordinate the objectives and activities of agencies and organizations that are responsible for programs and activities related to child abuse and neglect. Not later than 3 years after that date of enactment, the Secretary shall submit to those committees a second report on such efforts during the 3-year period following that date of enactment. Not later than 5 years after that date of enactment, the Secretary shall submit to those committees a third report on such efforts during the 5-year period following that date of enactment.

**[(b) EFFECTIVENESS OF STATE PROGRAMS AND TECHNICAL ASSISTANCE.—**Not later than 2 years after the date of enactment of the CAPTA Reauthorization Act of 2010 and every 2 years thereafter, the Secretary shall submit to the Committee on Education and Labor of the House of Representatives and the Committee on Health, Education, Labor, and Pensions of the Senate a report evaluating the effectiveness of programs receiving assistance under section 106 in achieving the objectives of section 106.

**[(c) STUDY AND REPORT RELATING TO CITIZEN REVIEW PANELS.—**

**[(1) IN GENERAL.—**The Secretary shall conduct a study to determine the effectiveness of citizen review panels, established under section 106(c), in achieving the stated function of such panels under section 106(c)(4)(A) of—

**[(A) examining the policies, procedures, and practices of State and local child protection agencies; and**

**[(B) evaluating the extent to which such State and local child protection agencies are fulfilling their child protection responsibilities, as described in clauses (i) through (iii) of section 106(c)(4)(A).**

**[(2) CONTENT OF STUDY.—**The study described in paragraph (1) shall be completed in a manner suited to the unique design of citizen review panels, including consideration of the variability among the panels within and between States. The study shall include the following:

**[(A) Data describing the membership, organizational structure, operation, and administration of all citizen review panels and the total number of such panels in each State.**

**[(B) A detailed summary of the extent to which collaboration and information-sharing occurs between citizen review panels and State child protective services agencies or any other entities or State agencies. The summary shall include a description of the outcomes that result from collaboration and information sharing.**

[(C) Evidence of the adherence and responsiveness to the reporting requirements under section 106(c)(6) by citizen review panels and States.

[(3) REPORT.—Not later than 2 years after the date of enactment of the CAPTA Reauthorization Act of 2010, the Secretary shall submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Education and Labor of the House of Representatives a report that contains the results of the study conducted under paragraph (1).

[(d) STUDY AND REPORT RELATING TO IMMUNITY FROM PROSECUTION FOR PROFESSIONAL CONSULTATION IN SUSPECTED AND KNOWN INSTANCES OF CHILD ABUSE AND NEGLECT.—

[(1) STUDY.—The Secretary shall complete a study, in consultation with experts in the provision of healthcare, law enforcement, education, and local child welfare administration, that examines how provisions for immunity from prosecution under State and local laws and regulations facilitate and inhibit individuals cooperating, consulting, or assisting in making good faith reports, including mandatory reports, of suspected or known instances of child abuse or neglect.

[(2) REPORT.—Not later than 1 year after the date of the enactment of the CAPTA Reauthorization Act of 2010, the Secretary shall submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Education and Labor of the House of Representatives a report that contains the results of the study conducted under paragraph (1) and any recommendations for statutory or regulatory changes the Secretary determines appropriate. Such report may be submitted electronically.]

**SEC. 110. STUDY AND REPORT RELATING TO SCALING EVIDENCE-BASED TREATMENT OF CHILD ABUSE AND NEGLECT; STUDY AND REPORT ON MARITAL AGE OF CONSENT; STUDY AND REPORT ON STATE MANDATORY REPORTING LAWS.**

(a) *IN GENERAL.*—The Secretary shall conduct a study that examines challenges to, and best practices for, the scalability of treatments that reduce the trauma resulting from child abuse and neglect and reduce the risk of revictimization, such as those allowable under sections 105 and 106.

(b) *CONTENT OF STUDY.*—The study described in subsection (a) shall be completed in a manner that considers the variability among treatment programs and among populations vulnerable to child abuse and neglect. The study shall include, at minimum:

(1) A detailed synthesis of the existing research literature examining barriers and challenges to, and best practices for the scalability of child welfare programs and services as well as programs and services for vulnerable children and families in related fields, including healthcare and education.

(2) Data describing state and local providers' experiences with scaling treatments that reduce the trauma resulting from child abuse and neglect and reduce the risk of revictimization.

(3) Consultation with experts in child welfare, healthcare, and education.

(c) *REPORT.*—Not later than 3 years after the date of the enactment of the Stronger Child Abuse Prevention and Treatment Act,

*the Secretary shall submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Education and Labor of the House of Representatives a report that contains the results of the study conducted under subsection (a), including recommendations for best practices for scaling treatments that reduce the trauma resulting from child abuse and neglect and reduce the risk of revictimization.*

*(d) STUDY AND REPORT ON MARITAL AGE OF CONSENT.—*

*(1) STUDY.—The Secretary shall study, with respect to each State—*

*(A) the State law regarding the minimum marriage age; and*

*(B) the prevalence of marriage involving a child who is under the age of such minimum marriage age.*

*(2) FACTORS.—The study required under paragraph (1) shall include an examination of—*

*(A) the extent to which any statutory exceptions to the minimum marriage age in such laws contribute to the prevalence of marriage involving a child described in paragraph (1)(B);*

*(B) whether such exceptions allow such a child to be married without the consent of such child; and*

*(C) the impact of such exceptions on the safety of such children.*

*(3) REPORT.—Not later than 1 year after the date of enactment of the Stronger Child Abuse Prevention and Treatment Act, the Secretary shall submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Education and Labor of the House of Representatives a report containing the findings of the study required by this subsection, including any best practices.*

*(e) STUDY AND REPORT ON STATE MANDATORY REPORTING LAWS.—*

*(1) STUDY.—The Secretary shall collect information on and otherwise study State laws for mandatory reporting of incidents of child abuse or neglect. Such study shall examine trends in referrals and investigations of child abuse and neglect due to differences in such State laws with respect to the inclusion, as mandatory reporters, of the following individuals:*

*(A) Individuals licensed or certified to practice in any health-related field licensed by the State, employees of health care facilities or providers licensed by the State, who are engaged in the admission, examination, care or treatment of individuals, including mental health and emergency medical service providers.*

*(B) Individuals employed by a school who have direct contact with children, including teachers, administrators, and independent contractors.*

*(C) Peace officers and law enforcement personnel.*

*(D) Clergy, including Christian Science practitioners, except where prohibited on account of clergy-penitent privilege.*

*(E) Day care and child care operators and employees.*

*(F) Employees of social services agencies who have direct contact with children in the course of employment.*

(G) Foster parents.

(H) Court appointed special advocates (employees and volunteers).

(I) Camp and after-school employees.

(J) An individual, paid or unpaid, who, on the basis of the individual's role as an integral part of a regularly scheduled program, activity, or service, accepts responsibility for a child.

(2) REPORT.—Not later than 4 years after the date of enactment of the Stronger Child Abuse Prevention and Treatment Act, the Secretary shall submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Education and Labor of the House of Representatives a report containing the findings of the study required by this subsection, including any best practices related to the inclusion, as mandatory reporters, of individuals described in paragraph (1).

\* \* \* \* \*

**SEC. 112. AUTHORIZATION OF APPROPRIATIONS.**

(a) IN GENERAL.—

(1) GENERAL AUTHORIZATION.—There are authorized to be appropriated [to carry out this title \$120,000,000 for fiscal year 2010] to carry out this title \$270,000,000 for fiscal year 2020 and such sums as may be necessary for each of the fiscal years [2011 through 2015] 2021 through 2025.

(2) DISCRETIONARY ACTIVITIES.—

[(A) IN GENERAL.—Of the amounts appropriated for a fiscal year under paragraph (1), the Secretary shall make available 30 percent of such amounts to fund discretionary activities under this title.]

(A) IN GENERAL.—Of the amounts appropriated for a fiscal year under paragraph (1), the Secretary shall make available 30 percent of such amounts, or \$100,000,000, whichever is less, to fund discretionary activities under this title.

(B) DEMONSTRATION PROJECTS.—Of the amounts made available for a fiscal year under subparagraph (A), the Secretary shall make available not more than 40 percent of such amounts to carry out section 104.

(b) AVAILABILITY OF FUNDS WITHOUT FISCAL YEAR LIMITATION.—The Secretary shall ensure that funds appropriated pursuant to authorizations in this title shall remain available until expended for the purposes for which they were appropriated.

\* \* \* \* \*

**SEC. 114. MONITORING AND OVERSIGHT.**

The Secretary shall conduct monitoring to ensure that each State that receives a grant under section 106 is in compliance with the requirements of section 106(b), which—

(1) shall—

(A) be in addition to the review of the State plan upon its submission under section 106(b)(1)(A); and

(B) include monitoring of State policies and procedures required under ~~clauses (ii) and (iii) of section 106(b)(2)(B)~~ *clauses (i) and (ii) of section 106(b)(2)(D)*; and (2) may include—

(A) a comparison of activities carried out by the State to comply with the requirements of section 106(b) with the State plan most recently approved under section 432 of the Social Security Act;

(B) a review of information available on the website of the State relating to its compliance with the requirements of section 106(b);

(C) site visits, as may be necessary to carry out such monitoring; and

(D) a review of information available in the State's Annual Progress and Services Report most recently submitted under section 1357.16 of title 45, Code of Federal Regulations (or successor regulations).

**SEC. 115. ELECTRONIC INTERSTATE DATA EXCHANGE SYSTEM.**

(a) *INTERSTATE DATA EXCHANGE SYSTEM.*—

(1) *IN GENERAL.*—*The Secretary of Health and Human Services shall consider the recommendations included in the reports required under paragraph (8)(A) and subsection (b)(2) in developing an electronic interstate data exchange system that allows State entities responsible under State law for maintaining child abuse and neglect registries to communicate information across State lines.*

(2) *STANDARDS.*—*In developing the electronic interstate data exchange system under paragraph (1), the Secretary shall—*

(A) *use interoperable standards developed and maintained by intergovernmental partnerships, such as the National Information Exchange Model;*

(B) *develop policies and governance standards that—*

(i) *ensure consistency in types of information shared and not shared; and*

(ii) *specify circumstances under which data should be shared through the interstate data exchange system; and*

(C) *ensure that all standards and policies adhere to the privacy, security, and civil rights laws of each State and Federal law.*

(3) *LIMITATION ON USE OF ELECTRONIC INTERSTATE DATA EXCHANGE SYSTEM.*—*The electronic interstate data exchange system may only be used for purposes relating to child safety.*

(4) *PILOT PROGRAM.*—

(A) *IMPLEMENTATION.*—*Not later than 6 months after the date of the enactment of this section, the Secretary of Health and Human Services shall begin implementation of a pilot program to generate recommendations for the full integration of the electronic interstate data exchange system. Such pilot program shall include not less than 10 States and not more than 15 States.*

(B) *COMPLETION.*—*Not later than 30 months after the date of the enactment of this section, the Secretary of Health and Human Services shall complete the pilot program described in subparagraph (A).*

(5) *INTEGRATION.*—*The Secretary of Health and Human Services may assist States in the integration of this system into the infrastructure of each State using funds appropriated under this subsection.*

(6) *PARTICIPATION.*—*As a condition on eligibility for receipt of funds under section 106, each State shall—*

(A) *participate in the electronic interstate data exchange system to the fullest extent possible in accordance with State law (as determined by the Secretary of Health and Human Services) not later than December 31, 2027; and*

(B) *prior to the participation described in subparagraph (A), provide to the Secretary of Health and Human Services an assurance that the child abuse and neglect registry of such State provides procedural due process protections with respect to including individuals on such registry.*

(7) *PROHIBITION.*—*The Secretary of Health and Human Services may not access or store data from the electronic interstate data exchange system, unless the State to which such data pertains voluntarily shares such data with the Secretary of Health and Human Services.*

(8) *REPORTS.*—*The Secretary of Health and Human Services shall prepare and submit to Congress—*

(A) *not later than 3 years after the date of the enactment of this section, a report on the recommendations from the pilot program described in paragraph (4); and*

(B) *not later than January 31, 2025, a report on the progress made in implementing this subsection.*

(9) *AUTHORIZATION OF APPROPRIATIONS.*—*Of the funds appropriated under section 112 for a fiscal year—*

(A) *for each of fiscal years 2020 and 2021, \$2,000,000 shall be reserved to carry out this section; and*

(B) *for each of fiscal years 2022 through 2025, \$1,000,000 shall be reserved to carry out this section.*

(b) *WORKING GROUP.*—

(1) *IN GENERAL.*—*Not later than 60 days after the date of the enactment of this section, the Secretary of Health and Human Services shall convene a working group to study and make recommendations on the following:*

(A) *The feasibility of making publicly available on the website of each State definitions and standards of substantiated child abuse and neglect for the State.*

(B) *Whether background check requirements under this Act, the Child Care and Development Block Grant Act of 1990 (42 U.S.C. 9858 et seq.), and part E of title IV of the Social Security Act (42 U.S.C. 670 et seq.) are complementary or if there are discrepancies that need to be addressed.*

(C) *How to improve communication between and across States, including through the use of technology and the use of the electronic interstate data exchange system established under subsection (a), to allow for more accurate and efficient exchange of child abuse and neglect records.*

(D) *How to reduce barriers and establish best practices for the State to provide timely responses to requests from other States for information contained in the State's child*

*abuse and neglect registry through the electronic interstate data exchange system established under subsection (a).*

*(E) How to ensure due process for any individual included in a State's child abuse and neglect registry, including the following:*

*(i) The level of evidence necessary for inclusion in the State's child abuse and neglect registry.*

*(ii) The process for notifying such individual of inclusion in the State's child abuse and neglect registry and the implications of such inclusion.*

*(iii) The process for providing such individual the opportunity to challenge such inclusion, and the procedures for resolving such challenge.*

*(iv) The length of time an individual's record is to remain in the State's child abuse and neglect registry, and the process for removing such individual's record.*

*(v) The criteria for when such individual's child abuse and neglect registry record may be—*

*(I) made accessible to the general public;*

*(II) made available for purposes of an employment check; and*

*(III) be shared for the purposes of participation in the electronic interstate data exchange system described in subsection (a).*

*(2) REPORT.—Not later than 18 months after the date of the enactment of this section, the working group convened under paragraph (1) shall submit a report containing its recommendations to the Secretary of Health and Human Services, the Committee on Health, Education, Labor, and Pensions of the Senate, and the Committee on Education and Labor of the House of Representatives.*

*(3) CONSTRUCTION.—There shall be no requirement for any State to adopt the recommendations of the working group, nor shall the Secretary of Health and Human Services incentivize or coerce any State to adopt any such recommendation.*

\* \* \* \* \*

## **TITLE II—COMMUNITY-BASED GRANTS FOR THE PREVENTION OF CHILD ABUSE AND NEGLECT**

### **SEC. 201. PURPOSE AND AUTHORITY.**

**[(a) PURPOSE.—It is the purpose of this title—**

**[(1) to support community-based efforts to develop, operate, expand, enhance, and coordinate initiatives, programs, and activities to prevent child abuse and neglect and to support the coordination of resources and activities, to better strengthen and support families to reduce the likelihood of child abuse and neglect; and**

**[(2) to foster an understanding, appreciation, and knowledge of diverse populations in order to be effective in preventing and treating child abuse and neglect.**

[(b) AUTHORITY.—The Secretary shall make grants under this title on a formula basis to the entity designated by the State as the lead entity (referred to in this title as the “lead entity”) under section 202(1) for the purpose of—

[(1) developing, operating, expanding, and enhancing community-based and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect that are accessible, effective, culturally appropriate, and build upon existing strengths that—

[(A) offer assistance to families;

[(B) provide early, comprehensive support for parents;

[(C) promote the development of parenting skills, especially in young parents and parents with very young children;

[(D) increase family stability;

[(E) improve family access to other formal and informal resources and opportunities for assistance available within communities, including access to such resources and opportunities for unaccompanied homeless youth;

[(F) support the additional needs of families with children with disabilities through respite care and other services;

[(G) demonstrate a commitment to involving parents in the planning and program implementation of the lead agency and entities carrying out local programs funded under this title, including involvement of parents of children with disabilities, parents who are individuals with disabilities, racial and ethnic minorities, and members of other underrepresented or underserved groups; and

[(H) provide referrals to early health and developmental services;

[(2) fostering the development of a continuum of preventive services for children and families, including unaccompanied homeless youth, through State and community-based collaborations and partnerships both public and private;

[(3) financing the start-up, maintenance, expansion, or redesign of specific community-based child abuse and neglect prevention program services (such as respite care services, child abuse and neglect prevention activities, disability services, mental health services, substance abuse treatment services, domestic violence services, housing services, transportation, adult education, home visiting and other similar services) identified by the inventory and description of current services required under section 205(a)(3) as an unmet need, and integrated with the network of community-based child abuse and neglect prevention programs to the extent practicable given funding levels and community priorities;

[(4) maximizing funding through leveraging of funds for the financing, planning, community mobilization, collaboration, assessment, information and referral, startup, training and technical assistance, information management and reporting, reporting and evaluation costs for establishing, operating, or expanding community-based and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect; and

【(5) financing public information activities that focus on the healthy and positive development of parents and children and the promotion of child abuse and neglect prevention activities.】

(a) *PURPOSE.—The purposes of this title are—*

(1) *to establish and maintain support for community-based family strengthening services and statewide systems-building approaches to the extent practicable, to ensure the development, operation, expansion, coordination, and evaluation of quality services, initiatives, programs, and activities to prevent child abuse and neglect; and*

(2) *to promote improved access for diverse populations with demonstrated need, including low-income families, racial and ethnic minorities, families with children or caregivers with disabilities, underserved communities, and rural communities, to family strengthening services in order to more effectively prevent child abuse and neglect.*

(b) *AUTHORITY.—The Secretary shall make grants under this title on a formula basis to the entity designated by the State as the lead entity (referred to in this title as the “lead entity”) under section 202(1) for the following purposes:*

(1) *Providing programs, activities, and initiatives to help families build protective factors linked to the prevention of child abuse and neglect, such as knowledge of parenting and child development, parental resilience, social connections, time-limited and need-based concrete support, and social and emotional development of children, that—*

(A) *are accessible to diverse populations, effective, and culturally appropriate;*

(B) *build upon existing strengths;*

(C) *offer assistance to families;*

(D) *provide early, comprehensive support for parents;*

(E) *promote the development of healthy familial relationships and parenting skills, especially in young parents and parents with very young children;*

(F) *increase family stability;*

(G) *improve family access to formal and informal community-based resources, including health and mental health services, time-limited and need-based concrete supports, and services and supports to meet the needs of families with children or caregivers with disabilities; and*

(H) *support the additional needs of families with children with disabilities, including through respite care.*

(2) *Fostering the development of a continuum of preventive services to strengthen families through State- and community-based collaborations and both public and private partnerships.*

(3) *Financing the start-up, maintenance, expansion, or redesign of core services described in section 205, where communities have identified gaps and decided to prioritize the establishment of such services, to the extent practicable given funding levels and community priorities.*

(4) *Maximizing funding through leveraging Federal, State, local, public, and private funds to carry out the purposes of this title.*

(5) *Developing or enhancing statewide and local networks to operate, expand, or enhance community-based family strength-*

*ening services, initiatives, and activities that promote child, parent, family, and community health and well-being and prevent child abuse and neglect.*

*(6) Promoting the development of, and coordination with, existing community coalitions of networks of family strengthening services that utilize culturally responsive providers in order to enhance child, family, and community well-being and prevent child abuse and neglect in all families.*

*(7) Financing public information activities that focus on parent and child development and child abuse and neglect prevention.*

*(8) To the extent practicable—*

*(A) promoting the development and implementation of a statewide systems-building strategy to address the unmet needs identified in the inventory described in section 204(3), including the participation of public and private stakeholders, community-based organizations, legislators, parents and other relevant stakeholders, and State agencies, including the child welfare agency, the public health agency, housing agency, and the State education agency, to scale evidence-based, evidence-informed, and promising programs that expand access to family strengthening services and reduce the numbers of children entering the foster care system;*

*(B) developing comprehensive outreach strategies to engage families with various risk factors, including families who have experienced trauma or domestic violence, parents with substance use disorder, and families with children or caregivers with disabilities; and*

*(C) providing capacity-building supports to local programs to improve desired outcomes for children and families, such as—*

*(i) technical assistance, including support for local programs to collect outcome data that helps improve service delivery;*

*(ii) professional development; and*

*(iii) peer support networks, including through developing a problem-solving forum.*

**SEC. 202. ELIGIBILITY.**

A State shall be eligible for a grant under this title for a fiscal year if—

**(1)****[(A) the Governor of the State has designated a lead entity to administer funds under this title for the purposes identified under the authority of this title, including to develop, implement, operate, enhance, or expand community-based and prevention-focused, programs and activities designed to strengthen and support families to prevent child abuse and neglect;]**

*(A) the Governor of the State has designated a lead entity to administer funds under this title for the purposes identified under the authority of this title, including to develop, implement, operate, enhance, or expand community-based family strengthening services designed to prevent child abuse and neglect;*

(B) such lead entity is an existing public, quasi-public, or nonprofit private entity (which may be an entity that has not been established pursuant to State legislation, executive order, or any other written authority of the State) that exists to strengthen and support families to prevent child abuse and neglect with a demonstrated ability to work with other State and community-based agencies to provide training and technical assistance, and that has the capacity and commitment to ensure the meaningful involvement of parents who are consumers and who can provide leadership in the planning, implementation, and evaluation of programs and policy decisions of the applicant agency in accomplishing the desired outcomes for such efforts;

(C) in determining which entity to designate under subparagraph (A), the Governor should give priority consideration equally to a trust fund advisory board of the State or to an existing entity that leverages Federal, State, and private funds for a broad range of child abuse and neglect prevention activities and family resource programs, and that is directed by an interdisciplinary, public-private structure, including participants from communities; and

[(D) in the case of a State that has designated a State trust fund advisory board for purposes of administering funds under this title (as such title was in effect on the date of the enactment of the Child Abuse Prevention and Treatment Act Amendments of 1996) and in which one or more entities that leverage Federal, State, and private funds (as described in subparagraph (C)) exist, the Governor shall designate the lead entity only after full consideration of the capacity and expertise of all entities desiring to be designated under subparagraph (A);]

*(D) the Governor of the State has given consideration to the capacity and expertise of all entities requesting to be designated under subparagraph (A);*

(2) the Governor of the State provides assurances that the lead entity will provide or will be responsible for providing—

(A) community-based and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect composed of local, collaborative, public-private partnerships directed by interdisciplinary structures with balanced representation from private and public sector members, parents, adult former victims of child abuse or neglect, and public and private nonprofit service providers and individuals and organizations experienced in working in partnership with families with children with disabilities;

(B) direction through an interdisciplinary, collaborative, public-private structure with balanced representation from private and public sector members, parents, adult former victims of child abuse or neglect, and public sector and private nonprofit sector service providers, and parents with disabilities; and

(C) direction and oversight through identified goals and objectives, clear lines of communication and accountability, the provision of leveraged or combined funding from Fed-

eral, State, and private sources, centralized assessment and planning activities, the provision of training and technical assistance, and reporting and evaluation functions; and

(3) the Governor of the State provides assurances that the lead entity—

[(A) has a demonstrated commitment to parental participation in the development, operation, and oversight of the community-based and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect;]

*(A) has demonstrated ongoing meaningful partnerships with parents in the development, operation, and oversight of State- and community-based family strengthening services designed to prevent child abuse and neglect;*

(B) has a demonstrated ability to work with State and community-based public and private nonprofit organizations to develop a continuum of preventive, family centered, comprehensive services for children and families through the [community-based and prevention-focused programs and activities designed to strengthen and support families] *community-based family strengthening services designed to prevent child abuse and neglect;*

[(C) has the capacity to provide operational support (both financial and programmatic) training, technical assistance, and evaluation assistance, to community-based and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect, through innovative, interagency funding and interdisciplinary service delivery mechanisms; and

[(D) will integrate its efforts with individuals and organizations experienced in working in partnership with families with children with disabilities, parents with disabilities, and with the child abuse and neglect prevention activities of the State, and demonstrate a financial commitment to those activities.]

*(C) has the capacity to provide operational support (both financial and programmatic), professional development, technical assistance, and evaluation assistance, to community-based organizations;*

*(D) will integrate efforts with individuals and organizations experienced in working in partnership with low-income families, racial and ethnic minorities, families with children or caregivers with disabilities, sexual and gender minority youth, victims of domestic violence, and with the child abuse and neglect prevention activities in the State, and demonstrate a financial commitment to those activities; and*

*(E) will take into consideration access for diverse populations and unmet need when distributing funds to local programs under section 205.*

**SEC. 203. AMOUNT OF GRANT.**

[(a) RESERVATION.—The Secretary shall reserve 1 percent of the amount appropriated under section 210 for a fiscal year to make

allotments to Indian tribes and tribal organizations and migrant programs.】

(a) *RESERVATION.*—For the purpose of making allotments to Indian tribes and tribal organizations and migrant programs, the Secretary shall reserve 5 percent of the amount appropriated under section 210(a) for each fiscal year, except that, if making such reservation would cause the total amount allotted to States under this section for a fiscal year to be less than such total for fiscal year 2019, the Secretary shall reserve 1 percent of the amount appropriated under section 210(a) for the year for such purpose.

(b) *REMAINING AMOUNTS.*—

(1) *IN GENERAL.*—The Secretary shall allot the amount appropriated under section 210 for a fiscal year and remaining after the reservation under subsection (a) among the States as follows:

(A) *70 PERCENT.*—70 percent of such amount appropriated shall be allotted among the States by allotting to each State an amount that bears the same proportion to such amount appropriated as the number of children under the age of 18 residing in the State bears to the total number of children under the age of 18 residing in all States (except that no State shall receive less than \$175,000 under this subparagraph).

(B) *30 PERCENT.*—30 percent of such amount appropriated shall be allotted among the States by allotting to each State an amount that bears the same proportion to such amount appropriated as the amount of private, State or other non-Federal funds leveraged and directed through the currently designated State lead entity in the preceding fiscal year bears to the aggregate of the amounts leveraged by all States from private, State, or other non-Federal sources and directed through the current lead entity of such States in the preceding fiscal year.

(2) *ADDITIONAL REQUIREMENT.*—The Secretary shall provide allotments under paragraph (1) to the State lead entity.

(c) *ALLOCATION.*—Funds allotted to a State under this section—

(1) shall be for a 3-year period; and

(2) shall be provided by the Secretary to the State on an annual basis, as described in subsection (b).

(d) *LIMITATION.*—For any fiscal year for which the amount allotted to a State under subsection (b) exceeds the amount allotted to the State under such subsection for fiscal year 2019, the State’s lead entity may use not more than 10 percent of such excess amount for administrative expenses.

#### **SEC. 204. APPLICATION.**

A grant may not be made to a State under this title unless an application therefor is submitted by the State to the Secretary and such application contains the types of information [specified by the Secretary as essential to carrying out the provisions of section 202, including] and assurances required in paragraphs (2) and (3) of section 202 and types of information specified by the Secretary as essential in carrying out the provisions of section 201(b), including—

(1) a description of the lead entity that will be responsible for the administration of funds provided under this title and

the oversight of programs funded through the [community-based and prevention-focused programs and activities designed to strengthen and support families] *community-based family strengthening services designed to prevent child abuse and neglect* which meets the requirements of section 202;

(2) a description of how the [community-based and prevention-focused programs and activities designed to strengthen and support families] *community-based family strengthening services designed to prevent child abuse and neglect* will operate, including how community-based child abuse and neglect prevention programs provided by public and private, nonprofit organizations will be integrated into a developing continuum of family centered, holistic, preventive services for children and families;

(3) a description of the inventory of current unmet needs and current [community-based and prevention-focused programs and activities] *community-based family strengthening services designed to prevent child abuse and neglect*, and other family resource services operating in the State;

(4) a budget for the development, operation, and expansion of the [community-based and prevention-focused programs and activities designed to strengthen and support families] *community-based family strengthening services designed to prevent child abuse and neglect* that verifies that the State will expend in non-Federal funds an amount equal to not less than 20 percent of the amount received under this title (in cash, not in-kind) for activities under this title;

(5) an assurance that funds received under this title will supplement, not supplant, other State and local public funds designated for the start up, maintenance, expansion, and redesign of community-based [and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect;] *services and statewide strategies designed to strengthen and support families to promote child, family, and community well-being and prevent child abuse and neglect*;

[(6) a description of the State's capacity to ensure the meaningful involvement of parents who are consumers, of family advocates, and of adult former victims of child abuse or neglect, who can provide leadership in the planning, implementation, and evaluation of the programs and policy decisions of the applicant agency in accomplishing the desired outcomes for such efforts;]

(6) *a description of the State's capacity and commitment to ensure the meaningful involvement of parents who are or have been consumers of preventative supports, including the involvement of parents of diverse populations, such as low-income families, families with children or caregivers with disabilities, racial and ethnic minorities, and members of other underrepresented or underserved groups, family advocates, and adult victims of child abuse or neglect who can provide leadership in the planning, implementation, and evaluation of the programs and policy decisions of the applicant agency in accomplishing the desired outcomes for such efforts*;

*(7) a description of the process and criteria the lead entity will use to identify and select communities in which to build a continuum of family strengthening services, including an assurance that the process will ensure access for all families, including families in communities with high rates of child abuse and neglect relative to other communities in the State;*

**[(7)]** *(8) a description of the criteria that the entity will use to develop, or select and fund, community-based and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect as part of network development, expansion, or enhancement;*

**[(8)]** *a description of outreach activities that the entity and the community-based and prevention-focused programs designed to strengthen and support families to prevent child abuse and neglect will undertake to maximize the participation of racial and ethnic minorities, children and adults with disabilities, homeless families and those at risk of homelessness, unaccompanied homeless youth, and members of other underserved or underrepresented groups;*

*(9) a description of outreach activities that the lead entity and local grantees will undertake to maximize the participation of low-income families, racial and ethnic minorities, families with children or caregivers with disabilities, sexual and gender minority youth, victims of domestic violence, homeless families and those at risk of homelessness, and members of other underserved or underrepresented groups;*

**[(9)]** *a plan for providing operational support, training, and technical assistance to community-based and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect for development, operation, expansion and enhancement activities;*

*(10) a plan for providing operational support, professional development, and technical assistance to grantees, other State and local programs and providers, families, and other entities involved in strengthening families and preventing child abuse and neglect;*

**[(10)]** *(11) a description of how the applicant entity's activities and those of the network [and its members (where appropriate)] of community-based family strengthening services and statewide initiatives will be evaluated;*

**[(11)]** *a description of the actions that the applicant entity will take to advocate systemic changes in State policies, practices, procedures, and regulations to improve the delivery of community-based and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect services to children and families; and*

*(12) a description of the actions that the applicant entity will take to inform systemic changes in State policies, practices, procedures, and regulations to improve the delivery of community-based family strengthening services designed to promote child, family, and community well-being, and to prevent child abuse and neglect;*

*(13) a description of how the lead entity will incorporate research evidence in its process for selecting community-based family strengthening services;*

(14) *an assurance that, in issuing regulations to improve the delivery of community-based family strengthening services designed to promote child, family, and community well-being, and to prevent child abuse and neglect, the State will—*

*(A) take into account how such regulations will impact activities funded under this Act; and*

*(B) where appropriate, attempt to avoid duplication of efforts, minimize costs of compliance with such regulations, and maximize local flexibility with respect to such regulations; and*

[(12)] (15) an assurance that the applicant entity will provide the Secretary with reports at such time and containing such information as the Secretary may require.

**[SEC. 205. LOCAL PROGRAM REQUIREMENTS.**

[(a) IN GENERAL.—Grants made under this title shall be used to develop, implement, operate, expand, and enhance community-based, and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect that—

[(1) assess community assets and needs through a planning process that involves parents, local public agencies, local non-profit organizations, and private sector representatives in meaningful roles;

[(2) develop a comprehensive strategy to provide a continuum of preventive, family-centered services to children and families, especially to young parents, to parents with young children, and to parents who are adult former victims of domestic violence or child abuse or neglect, through public-private partnerships;

[(3)(A) provide for core child abuse and neglect prevention services, which may be provided directly by the local recipient of the grant funds or through grants or agreements with other local agencies, such as—

[(i) parent education, mutual support and self help, and parent leadership services;

[(ii) respite care services;

[(iii) outreach and followup services, which may include voluntary home visiting services; and

[(iv) community and social service referrals; and

[(B) provide access to optional services, including—

[(i) referral to and counseling for adoption services for individuals interested in adopting a child or relinquishing their child for adoption;

[(ii) child care, early childhood education and care, and intervention services;

[(iii) referral to services and supports to meet the additional needs of families with children with disabilities and parents who are individuals with disabilities;

[(iv) referral to job readiness services;

[(v) referral to educational services, such as academic tutoring, literacy training, and General Educational Degree services;

[(vi) self-sufficiency and life management skills training;

- [(vii) community referral services, including early developmental screening of children;
- [(viii) peer counseling; and
- [(ix) domestic violence service programs that provide services and treatment to children and their non-abusing caregivers.

[(4) develop leadership roles for the meaningful involvement of parents in the development, operation, evaluation, and oversight of the programs and services;

[(5) provide leadership in mobilizing local public and private resources to support the provision of needed child abuse and neglect prevention program services; and

[(6) participate with other community-based and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect in the development, operation, and expansion of networks where appropriate.

[(b) PRIORITY.—In awarding local grants under this title, a lead entity shall give priority to effective community-based programs serving low-income communities and those serving young parents or parents with young children, including community-based child abuse and neglect prevention programs..]

**SEC. 205. LOCAL PROGRAM REQUIREMENTS.**

(a) *IN GENERAL.*—Grants from the lead entity made under this title shall be used to develop, implement, operate, expand, and enhance community-based family strengthening services designed to prevent child abuse and neglect that—

(1) assess community assets and needs and develop a strategy to create a comprehensive continuum of effective services that strengthen and support families to prevent child abuse and neglect, through a planning process involving parents, local and public agencies, local nonprofit organizations and service providers, and private sector representatives in meaningful ways;

(2) develop or enhance existing place-based family strengthening services, other parenting support services, and connections and coordination among key family services in the community by reaching spaces familiar to such families; and

(3) help families build protective factors that support child and family well-being and help prevent child abuse and neglect, including knowledge of parenting and child development, parental resilience, social connections, time-limited and need-based concrete support, and social and emotional development of children.

(b) *LOCAL CONSIDERATION.*—In awarding grants, the lead entity shall consider, consistent with the needs of the State and community, how the grantee—

(1) demonstrates the ability to form collaborations across a range of services or initiatives and the commitment to engage in long-term planning and strategic development for community-based family strengthening services as well as provide on-going problem solving support;

(2) involves parents, including parents of children with disabilities, diverse racial and ethnic groups, and members of other underrepresented or underserved populations, in the de-

velopment, implementation, oversight, and evaluation of services;

(3) addresses the need for place-based services and the need to reach families in hard-to-reach areas through approaches that provide core family strengthening services;

(4) promotes improved access to family strengthening services for diverse populations and ensures that the services address identified needs of all families; and

(5) demonstrates an understanding of the sources of child and family trauma and the strategies that mitigate the impact of and prevent adverse childhood experiences.

(c) LOCAL USES OF FUNDS.—Grant funds from the lead entity shall be used for community-based family strengthening services designed to prevent child abuse and neglect, which may include the following:

(1) Developing a strategy based on supporting a comprehensive continuum of preventive, family-centered services that strengthen and support families to prevent child abuse and neglect, especially to young parents, to parents with young children, and to parents who are adult victims of domestic violence or child abuse or neglect, through public-private partnerships.

(2) Addressing the needs of families in hard-to-reach areas by creating access to place-based family strengthening services.

(3) Performing an assessment of community needs, including by partnering, at the option of the grantee, with an organization that already has performed a needs assessment (such as a Maternal, Infant and Early Childhood Home Visiting program under section 511 of the Social Security Act (42 U.S.C. 711) or a Head Start program under the Head Start Act (42 U.S.C. 9831 et seq.).

(4) Supporting outreach for services, including by coordinating with existing family strengthening services such as home visiting and other early intervention programs.

(5) Providing, promoting the development or enhancement of, or connecting families to, core services that include—

(A) parenting support and parent education programs, including services that help parents and other caregivers support children's development;

(B) parent leadership skills development programs that support parents' personal growth as leaders in their families and communities;

(C) mutual support groups for parents, children, and parent partners;

(D) respite and crisis care; and

(E) referrals to optional community and social services, including—

(i) domestic violence services;

(ii) screening and referrals to early intervention;

(iii) voluntary home visiting programs;

(iv) health and mental health services, including referrals for information on the State Medicaid plan under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.);

(v) early care and learning programs including child care and Head Start programs and Early Head Start

programs under the Head Start Act (42 U.S.C. 9831 et seq.);

(vi) nutrition programs, including the special supplemental nutrition program for women, infants, and children established under section 17 of the Child Nutrition Act of 1966 (42 U.S.C. 1786) and the supplemental nutrition assistance program established under the Food and Nutrition Act of 2008 (7 U.S.C. 2011 et seq.);

(vii) education and workforce development programs, including adult literacy, child development, wellness, and family socioeconomic mobility programs; and

(viii) services and supports to meet the needs of families with children or caregivers with disabilities, such as early intervention services for infants and toddlers with disabilities and their families, as early intervention services are defined in section 632 of the Individuals with Disabilities Education Act (20 U.S.C. 1432).

(6) Providing leadership in mobilizing local public and private resources to support the provision of community-based family strengthening services designed to prevent child abuse and neglect.

(7) Developing and maintaining meaningful partnerships with parents relating to the development, operation, evaluation, and oversight of the programs and services.

(8) Coordinating with other community-based family strengthening services designed to prevent child abuse and neglect in the development, operation, and expansion of networks where appropriate.

(d) **PRIORITY.**—When awarding grants, a lead entity shall give priority to effective community-based efforts that serve low-income communities and are focused on comprehensive approaches to serving young parents or parents with young children.

**SEC. 206. PERFORMANCE MEASURES.**

A State receiving a grant under this title, through reports provided to the Secretary—

(1) shall demonstrate the effective development, operation, and expansion of [community-based and prevention-focused programs and activities designed to strengthen and support families] *community-based family strengthening services designed to prevent child abuse and neglect that [meets] meet* the requirements of this title;

(2) shall supply an inventory and description of the services provided to families by local programs that meet identified community needs, [including core and optional services as described in section 202] which description shall specify whether those services are supported by research;

[(3) shall demonstrate that they will have addressed unmet needs identified by the inventory and description of current services required under section 205(3);

[(4) shall describe the number of families served, including families with children with disabilities, and parents with disabilities, and the involvement of a diverse representation of families in the design, operation, and evaluation of community-based and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and

neglect, and in the design, operation and evaluation of the networks of such community-based and prevention-focused programs;】

(3) shall demonstrate how they have addressed unmet needs identified by the inventory required under section 204;

(4) shall describe the number of families served, including families with children or caregivers with disabilities, and the involvement of a diverse representation of families in the design, operation, and evaluation of both community-based family strengthening services and networks of such services;

(5) shall demonstrate a high level of satisfaction among families who have used the services of the 【community-based and prevention-focused programs and activities designed to strengthen and support families】 *community-based family strengthening services designed to prevent child abuse and neglect*;

(6) shall demonstrate the establishment or maintenance of innovative funding mechanisms, at the State or community level, that blend Federal, State, local, and private funds, and innovative, interdisciplinary service delivery mechanisms, for the development, operation, expansion, and enhancement of the 【community-based and prevention-focused programs and activities designed to strengthen and support families】 *community-based family strengthening services designed to prevent child abuse and neglect*;

【(7) shall describe the results of evaluation, or the outcomes of monitoring, conducted under the State program to demonstrate the effectiveness of activities conducted under this title in meeting the purposes of the program; and】

(7) shall describe—

(A) the number of programs funded disaggregated by urban, suburban, and rural community type;

(B) the number of children and families served under each such program disaggregated by urban, suburban, and rural community type; and

(C) the number of programs that partner with outside entities and the services such outside entities provide;

(8) shall demonstrate an implementation plan to ensure the continued 【leadership of】 *partnership with* parents in the ongoing planning, implementation, and evaluation of such 【community-based and prevention-focused programs and activities designed to strengthen and support families】 *community-based family strengthening services designed to prevent child abuse and neglect【.】*; and

(9) shall describe the extent to which there is evidence to support the effectiveness of activities conducted under this title for the program's intended purpose, or, in instances where such evidence is not available, shall describe barriers and challenges to developing evidence of effectiveness.

**SEC. 207. NATIONAL NETWORK FOR COMMUNITY-BASED FAMILY RESOURCE PROGRAMS.**

The Secretary may allocate 【such sums as may be necessary】 *not more than 5 percent* from the amount provided under the State allotment to support the activities of the lead entity in the State—

(1) to create, operate, and maintain a peer review process;

(2) to create, operate, and maintain an information clearing-house;

(3) to fund a yearly symposium on State system change efforts that result from the operation of the **community-based and prevention-focused programs and activities designed to strengthen and support families** *community-based family strengthening services designed to prevent child abuse and neglect*;

(4) to create, operate, and maintain a computerized communication system between lead entities; and

(5) to fund State-to-State technical assistance through bi-annual conferences.

**SEC. 208. DEFINITIONS.**

For purposes of this title:

**[(2) COMMUNITY-BASED AND PREVENTION-FOCUSED PROGRAMS AND ACTIVITIES TO PREVENT CHILD ABUSE AND NEGLECT.—**The term “community-based and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect” includes organizations such as family resource programs, family support programs, voluntary home visiting programs, respite care programs, parenting education, mutual support programs, and other community programs or networks of such programs that provide activities that are designed to prevent or respond to child abuse and neglect.]

*(1) COMMUNITY-BASED FAMILY STRENGTHENING SERVICES.—The term “community-based family strengthening services” includes organizations such as family resource programs, family support programs, voluntary home visiting programs, respite care services, parenting education, mutual support groups for parents, children, parent partner programs, and other community programs or networks of such programs that provide activities that are designed to prevent child abuse and neglect.*

**[(1)] (2) COMMUNITY REFERRAL SERVICES.—**The term “community referral services” means services provided under contract or through interagency agreements to assist families in obtaining needed information, mutual support and community resources, including respite care services, health and mental health services, employability development and job training, and other social services, including early developmental screening of children, through help lines or other methods.

**(3) RESPITE CARE SERVICES.—**The term “respite care services” means short term care services, including the services of crisis nurseries, provided in the temporary absence of the regular caregiver (parent, other relative, foster parent, adoptive parent, or guardian) to children who—

(A) are in danger of child abuse or neglect;

(B) have experienced child abuse or neglect; or

(C) have disabilities or chronic or terminal illnesses.

Such services shall be provided within or outside the home of the child, be short-term care (ranging from a few hours to a few weeks of time, per year), and be intended to enable the family to stay together and to keep the child living in the home and community of the child.

**SEC. 209. RULE OF CONSTRUCTION.**

*Nothing in this title shall be construed to prohibit grandparents, kinship care providers, foster parents, adoptive parents, or any other individual in a parenting role from receiving or participating in services and programs under this title.*

**SEC. [209.] 210. AUTHORIZATION OF APPROPRIATIONS.**

**[There are]** (a) *IN GENERAL.*—*There are authorized to be appropriated [to carry out this title \$80,000,000 for fiscal year 2010] to carry out this title \$270,000,000 for fiscal year 2020 and such sums as may be necessary for each of the fiscal years [2011 through 2015] 2021 through 2025.*

(b) *TREATMENT OF NON-FEDERAL FUNDS IN CERTAIN FISCAL YEARS.*—*For any fiscal year for which the amount appropriated under subsection (a) exceeds the amount appropriated under such subsection for fiscal year 2019, the Secretary shall consider non-Federal funds and in-kind contributions as part of the State contribution for the activities specified in section 204(4).*

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**CHILD ABUSE PREVENTION AND TREATMENT AND ADOPTION REFORM ACT OF 1978**

\* \* \* \* \*

**TITLE II—ADOPTION OPPORTUNITIES**

**SEC. 201. [CONGRESSIONAL FINDINGS AND DECLARATION OF PURPOSE] PURPOSE.**

**[(a) FINDINGS.**—Congress finds that—

**[(1)** on the last day of fiscal year 2009, some 424,000 children were living in temporary foster family homes or other foster care settings;

**[(2)** most children in foster care are victims of child abuse or neglect by their biological parents and their entry into foster care brought them the additional trauma of separation from their homes and often their communities;

**[(3)** on average, children entering foster care have more physical and mental health needs than do children in the general population, and some require intensive services because the children entering foster care—

**[(A)** were born to mothers who did not receive prenatal care;

**[(B)** were born with life-threatening conditions or disabilities;

**[(C)** were born addicted to alcohol or other drugs; or

**[(D)** have HIV/AIDS;

**[(4)** each year, thousands of children in foster care, regardless of their age, the size of the sibling group they are a part of, their racial or ethnic status, their medical condition, or any physical, mental or emotional disability they may have, are in need of placement with permanent, loving, adoptive families;

**[(5)(A)** States have made important strides in increasing the number of children who are placed in permanent homes with

adoptive parents and in reducing the length of time children wait for such a placement; and

【(B) many thousands of children, however, still remain in institutions or foster homes solely because of legal and other barriers to such a placement;

【(6)(A) on the last day of fiscal year 2009, there were 115,000 children waiting for adoption;

【(B) children waiting for adoption have had parental rights of all living parents terminated or the children have a permanency goal of adoption;

【(C)(i) the average age of children adopted with public child welfare agency involvement during fiscal year 2009 was a little more than 6 years; and

【(ii) the average age of children waiting for adoption on the last day of that fiscal year was a little more than 8 years of age and more than 30,000 of those children were 12 years of age or older; and

【(D)(i) 25 percent of the children adopted with public child welfare agency involvement during fiscal year 2009 were African-American; and

【(ii) 30 percent of the children waiting for adoption on the last day of fiscal year 2009 were African-American;

【(7) adoption may be the best alternative for assuring the healthy development of children placed in foster care;

【(8) there are qualified persons seeking to adopt such children who are unable to do so because of barriers to their placement and adoption; and

【(9) in order both to enhance the stability of and love in the home environments of such children and to avoid wasteful expenditures of public funds, such children—

【(A) should not have medically indicated treatment withheld from them; or

【(B) be maintained in foster care or institutions when adoption is appropriate and families can be found for such children.】

【(b) PURPOSE.—】 It is the purpose of this title to facilitate the elimination of barriers, including geographic barriers, to adoption and to provide permanent and loving home environments for children who would benefit from adoption, particularly older children, minority children, *sexual and gender minority youth* and children with special needs, including disabled infants with life-threatening conditions, by providing a mechanism to—

(1) promote quality standards for adoption services, pre-placement, post-placement, and post-legal adoption *services and*, counseling, and standards to protect the rights of children in need of adoption;

(2) maintain an Internet-based national adoption information exchange system to—

(A) bring together children who would benefit from adoption and qualified prospective adoptive parents who are seeking such children;

(B) conduct national recruitment efforts in order to reach prospective parents for children awaiting adoption; and

(C) connect placement agencies, prospective adoptive parents, and adoptive parents to resources designed to re-

- duce barriers to adoption, support adoptive families, and ensure permanency; and
- (3) demonstrate expeditious ways to free children for adoption for whom it has been determined that adoption is the appropriate plan.

**SEC. 202. REPORT AND GUIDANCE ON UNREGULATED CUSTODY TRANSFERS.**

(a) *SENSE OF CONGRESS.*—*It is the sense of Congress that:*

(1) *Some adopted children may be at risk of experiencing an unregulated custody transfer because the challenges associated with adoptions (including the child's mental health needs and the difficulties many families face in acquiring support services) may lead families to seek out unregulated custody transfers.*

(2) *Some adopted children experience trauma, and the disruption and placement in another home by unregulated custody transfer creates additional trauma and instability for children.*

(3) *Children who experience an unregulated custody transfer may be placed with families who have not completed required child welfare or criminal background checks or clearances.*

(4) *Social services agencies and courts are often unaware of the placement of children through unregulated custody transfer and therefore do not conduct assessments on the child's safety and well-being in such placements.*

(5) *Such lack of placement oversight places a child at risk for future abuse and increases the chance that the child may experience—*

(A) *abuse or neglect;*

(B) *contact with unsafe adults or youth; and*

(C) *exposure to unsafe or isolated environments.*

(6) *The caregivers with whom a child is placed through unregulated custody transfer often have no legal responsibility with respect to such child, placing the child at risk for additional unregulated custody transfers.*

(7) *Such caregivers also may not have complete records with respect to such child, including the child's birth, medical, or immigration records.*

(8) *A child adopted through intercountry adoption may be at risk of not acquiring United States citizenship if an unregulated custody transfer occurs before the adoptive parents complete all necessary steps to finalize the adoption of such child.*

(9) *Engaging in, or offering to engage in, unregulated custody transfer places children at risk of harm.*

(b) *REPORT TO CONGRESS.*—

(1) *IN GENERAL.*—*Not later than 1 year after the date of the enactment of this section, the Secretary of Health and Human Services shall provide to the Committee on Education and Labor of the House of Representatives, the Committee on Ways and Means of the House of Representatives, the Committee on Finance of the Senate, and the Committee on Health, Education, Labor and Pensions of the Senate a report on unregulated custody transfers of children, including of adopted children.*

(2) *ELEMENTS.*—*The report required under paragraph (1) shall include—*

(A) the causes, methods, and characteristics of unregulated custody transfers, including the use of social media and the internet;

(B) the effects of unregulated custody transfers on children, including the lack of assessment of a child's safety and well-being by social services agencies and courts due to such unregulated custody transfer;

(C) the prevalence of unregulated custody transfers within each State and across all States; and

(D) recommended policies for preventing, identifying, and responding to unregulated custody transfers, including of adopted children, that include—

(i) amendments to Federal and State law to address unregulated custody transfers;

(ii) amendments to child protection practices to address unregulated custody transfers; and

(iii) methods of providing the public information regarding adoption and child protection.

(c) **GUIDANCE TO STATES.**—

(1) **IN GENERAL.**—Not later than 180 days after the date specified in subsection (b)(1), the Secretary shall issue guidance and technical assistance to States related to preventing, identifying, and responding to unregulated custody transfers, including of adopted children.

(2) **ELEMENTS.**—The guidance required under paragraph (1) shall include—

(A) education materials related to preventing, identifying, and responding to unregulated custody transfers for employees of State, local, and Tribal agencies that provide child welfare services;

(B) guidance on appropriate pre-adoption education and post-adoption services for domestic and international adoptive families to promote child permanency; and

(C) the assistance available through the National Resource Center for Special Needs Adoption under section 203(b)(9).

(d) **DEFINITIONS.**—In this section:

(1) **STATE.**—The term “State” means each of the several States, the District of Columbia, and any commonwealth, territory, or possession of the United States.

(2) **UNREGULATED CUSTODY TRANSFER.**—The term “unregulated custody transfer” means the abandonment of a child, by the child's parent, legal guardian, or a person or entity acting on behalf, and with the consent, of such parent or guardian—

(A) by placing a child with a person who is not—

(i) the child's parent, step-parent, grandparent, adult sibling, legal guardian, or other adult relative;

(ii) a friend of the family who is an adult and with whom the child is familiar; or

(iii) a member of the Federally recognized Indian tribe of which the child is also a member;

(B) with the intent of severing the relationship between the child and the parent or guardian of such child; and

(C) without—

*(i) reasonably ensuring the safety of the child and permanency of the placement of the child, including by conducting an official home study, background check, and supervision; and*

*(ii) transferring the legal rights and responsibilities of parenthood or guardianship under applicable Federal and State law to a person described in subparagraph (A).*

**SEC. 203. INFORMATION AND SERVICES.**

(a) **IN GENERAL.**—The Secretary shall establish in the Department of Health and Human Services an appropriate administrative arrangement to provide a centralized focus for planning and coordinating of all departmental activities affecting adoption and foster care and for carrying out the provisions of this title. The Secretary shall make available such consultant services, on-site technical assistance and personnel, together with appropriate administrative expenses, including salaries and travel costs, as are necessary for carrying out such purposes, including services to facilitate the adoption of older children, minority children, and children with special needs, particularly infants and toddlers with disabilities who have life-threatening conditions, and services to families considering adoption of children with special needs.

(b) **REQUIRED ACTIVITIES.**—In connection with carrying out the provisions of this title, the Secretary shall—

(1) conduct (directly or by grant to or contract with public or private agencies or organizations) an education and training program on adoption, and prepare, publish, and disseminate (directly or by grant to or contract with public or private agencies and organizations) to all interested parties, public and private agencies and organizations (including, but not limited to, hospitals, health care and family planning clinics, and social services agencies), and governmental bodies, information and education and training materials regarding adoption, adoption assistance programs, and post-legal adoption services;

(2) conduct, directly or by grant or contract with public or private organizations, ongoing, extensive recruitment efforts on a national level, including efforts to promote the adoption of older children, minority children, and children with special needs, develop national public awareness efforts to unite children in need of adoption with appropriate adoptive parents, and establish a coordinated referral system of recruited families with appropriate State or regional adoption resources to ensure that families are served in a timely fashion;

(3) notwithstanding any other provision of law, provide (directly or by grant to or contract with public or private agencies or organizations) for (A) the operation of a national adoption information exchange system (including only such information as is necessary to facilitate the adoptive placement of children, utilizing computers and data processing methods to assist in the location of children who would benefit by adoption and in the placement in adoptive homes of children awaiting adoption); and (B) the coordination of such system with similar State and regional systems;

(4) provide (directly or by grant to or contract with public or private agencies or organizations, including adoptive family

groups and minority groups) for the provision of technical assistance in the planning, improving, developing, and carrying out of programs and activities relating to adoption, and to promote professional leadership training of minorities in the adoption field;

(5) encourage involvement of corporations and small businesses in supporting adoption as a positive family-strengthening option, including the establishment of adoption benefit programs for employees who adopt children;

(6) support the placement of children in kinship care arrangements, pre-adoptive, or adoptive homes;

(7) increase the effective use of public or private agencies (including community-based and other organizations) by States, or sectarian institutions, for the recruitment of potential adoptive and foster families and to provide assistance in the placement of children for adoption, including assisting in efforts to work with organizations that promote the placement of older children, minority children, and children with special needs;

(8) consult with other appropriate Federal departments and agencies in order to promote maximum coordination of the services and benefits provided under programs carried out by such departments and agencies with those carried out by the Secretary, and provide for the coordination of such aspects of all programs within the Department of Health and Human Services relating to adoption;

(9) *not later than 2 years after the date of the enactment of the Stronger Child Abuse Prevention and Treatment Act, establish and maintain* (directly or by grant to or contract with public or private agencies or organizations) a National Resource Center for Special Needs Adoption to—

(A) promote professional leadership development of minorities in the adoption field;

(B) provide training and technical assistance to service providers and State agencies to improve professional competency in the field of adoption and the adoption of children with special needs;

(C) facilitate the development of interdisciplinary approaches to meet the needs of children who are waiting for adoption and the needs of adoptive families; and

(D) identify best practices to reduce adoption disruption and termination;

(10) provide (directly or by grant to or contract with States, local government entities, tribal child welfare agencies, public or private licensed child welfare or adoption agencies or adoptive family groups and community-based organizations with experience in working with minority populations) for the provision of programs aimed at increasing the number of minority children (who are in foster care and have the goal of adoption) placed in adoptive families, with a special emphasis on recruitment of minority families—

(A) which may include such activities as—

(i) outreach, public education, or media campaigns to inform the public of the needs and numbers of such children;

(ii) recruitment of prospective adoptive families for such children, including developing and using procedures to notify family and relatives when a child enters the child welfare system;

(iii) expediting, where appropriate, the legal availability of such children;

(iv) expediting, where appropriate, the agency assessment of prospective adoptive families identified for such children;

(v) formation of prospective adoptive family support groups;

(vi) training of personnel of—

(I) public agencies;

(II) private child welfare and adoption agencies that are licensed by the State; and

(III) adoptive parents organizations and community-based organizations with experience in working with minority populations;

(vii) education and training of prospective adoptive or adoptive parents;

(viii) use of volunteers and adoptive parent groups; and

(ix) any other activities determined by the Secretary to further the purposes of this Act; and

(B) shall be subject to the condition that such grants or contracts may be renewed if documentation is provided to the Secretary demonstrating that appropriate and sufficient placements of such children have occurred during the previous funding period; and

(11) provide (directly or by grant to or contract with States, local government entities, or public or private licensed child welfare or adoption agencies) for the implementation of programs that are intended to increase the number of older children (who are in foster care and with the goal of adoption) placed in adoptive families, with a special emphasis on child-specific recruitment strategies, including—

(A) outreach, public education, or media campaigns to inform the public of the needs and numbers of older youth available for adoption;

(B) training of personnel in the special needs of older youth and the successful strategies of child-focused, child-specific recruitment efforts; and

(C) recruitment of prospective families for **such children** *the children and youth described in the matter preceding paragraph (1) of section 201.*

(c) SERVICES FOR FAMILIES ADOPTING SPECIAL NEEDS CHILDREN.—

(1) IN GENERAL.—The Secretary shall provide (directly or by grant to or contract with States, local government entities, public or private nonprofit licensed child welfare or adoption agencies or adoptive family groups) for the provision of **post** *pre- and post-* legal adoption services for families who have adopted special needs children.

(2) SERVICES.—Services provided under grants made under this subsection shall supplement, not supplant, services *and*

*the development of such services, from any other funds available for the same general purposes, including—*

- (A) individual counseling;
- (B) group counseling;
- (C) family counseling;
- (D) case management;
- (E) training public agency adoption personnel, personnel of private, nonprofit child welfare and adoption agencies licensed by the State to provide adoption services, mental health services professionals, and other support personnel to provide services under this subsection;
- (F) assistance to adoptive parent organizations;
- (G) assistance to support groups for adoptive parents, adopted children, and siblings of adopted children;
- (H) day treatment; and
- (I) respite care.

(d) IMPROVING PLACEMENT RATE OF CHILDREN IN FOSTER CARE.—

(1) IN GENERAL.—The Secretary shall make grants for improving State efforts to increase the placement of foster care children legally free for adoption, according to a pre-established plan and goals for improvement.

(2) APPLICATIONS; TECHNICAL AND OTHER ASSISTANCE.—

(A) APPLICATIONS.—Each State entering into an agreement under this subsection shall submit an application to the Secretary that describes the manner in which the State will use funds during the 3 fiscal years subsequent to the date of the application to accomplish the purposes of this section. Such application shall be in a form and manner determined to be appropriate by the Secretary, consistent with the purpose of this title. Each application shall contain information that—

- (i) describes how the State plans to improve the placement rate of children in permanent homes;
- (ii) describes the methods the State, prior to submitting the application, has used to improve the placement of older children, minority children, and children with special needs, who are legally free for adoption;
- (iii) describes the evaluation the State plans to conduct, to identify the effectiveness of programs and methods of placement under this subsection, and submit to the Secretary; and

(iv) describes how the State plans to coordinate activities under this subsection with relevant activities under section 473 of the Social Security Act (42 U.S.C. 673).

(B) TECHNICAL AND OTHER ASSISTANCE.—The Secretary shall provide, directly or by grant to or contract with public or private agencies or organizations—

- (i) technical assistance and resource and referral information to assist State or local governments with termination of parental rights issues, in recruiting and retaining adoptive families, in the successful placement of older children, minority children, and children with special needs, and in the provision of pre- and

post-placement services, including post-legal adoption services; and

(ii) other assistance to help State and local governments replicate successful adoption-related projects from other areas in the United States.

(C) EVALUATION.—The Secretary shall compile the results of evaluations submitted by States (described in subparagraph (A)(iii)) and submit a report containing the compiled results to the appropriate committees of Congress.

(3) PAYMENTS.—

(A) IN GENERAL.—Payments under this subsection shall begin during fiscal year 1989. Payments under this section during any fiscal year shall not exceed \$1,000,000. No payment may be made under this subsection unless an amount in excess of \$5,000,000 is appropriated for such fiscal year under section 205(a).

(B) REVERSION OF UNUSED FUNDS.—Any payment made to a State under this subsection which is not used by such State for the purpose provided in paragraph (1) during the fiscal year payment is made shall revert to the Secretary on October 1st of the next fiscal year and shall be used to carry out the purposes of this Act.

(e) ELIMINATION OF BARRIERS TO ADOPTIONS ACROSS JURISDICTIONAL BOUNDARIES.—

(1) IN GENERAL.—The Secretary shall award grants to, or enter into contracts **[with, States,]** *with States, Indian Tribes, local government entities, public or private child welfare or adoption agencies, adoption exchanges, or adoption family groups* to carry out initiatives to improve efforts to eliminate barriers to placing children for adoption across jurisdictional boundaries, *including through the use of web-based tools such as the electronic interstate case-processing system referred to in section 437(g) of the Social Security Act (42 U.S.C. 629g(g)).*

(2) SERVICES TO SUPPLEMENT NOT SUPPLANT.—Services provided under grants made under this subsection shall supplement, not supplant, services provided using any other funds made available for the same general purposes including—

(A) developing a uniform homestudy standard and protocol for acceptance of homestudies between States and jurisdictions;

(B) developing models of financing cross-jurisdictional placements;

(C) expanding the capacity of all adoption exchanges to serve increasing numbers of children;

(D) developing training materials and training social workers on preparing and moving children across State lines; and

(E) developing and supporting initiative models for networking among agencies, adoption exchanges, and parent support groups across jurisdictional boundaries.

**[STUDY OF UNLICENSED ADOPTION PLACEMENTS**

**[SEC. 204. (a) IN GENERAL.—**The Secretary shall provide for a study (the results of which shall be reported to the appropriate committees of the Congress not later than eighteen months after

the date of enactment of the Keeping Children and Families Safe Act of 2003) designed to determine—

[(1) the nature, scope, and effects of the interstate (and, to the extent feasible, intrastate) placement of children in adoptive homes (not including the homes of stepparents or relatives of the child in question) by persons or agencies.

[(2) how interstate placements are being financed across State lines;

[(3) recommendations on best practice models for both interstate and intrastate adoptions; and

[(4) how State policies in defining special needs children differentiate or group similar categories of children.

[(b) DYNAMICS OF SUCCESSFUL ADOPTION.—The Secretary shall conduct research (directly or by grant to, or contract with, public or private nonprofit research agencies or organizations) about adoption outcomes and the factors affecting those outcomes. The Secretary shall submit a report containing the results of such research to the appropriate committees of the Congress not later than the date that is 36 months after the date of the enactment of the Keeping Children and Families Safe Act of 2003.

[(c) INTERJURISDICTIONAL ADOPTION.—Not later than 1 year after the date of the enactment of the Keeping Children and Families Safe Act of 2003, the Secretary shall submit to the appropriate committees of the Congress a report that contains recommendations for an action plan to facilitate the interjurisdictional adoption of foster children.]

**SEC. 204. STUDY AND REPORT ON SUCCESSFUL ADOPTIONS.**

(a) *STUDY.*—*The Secretary shall conduct a study (directly or by grant to, or contract with, public or private nonprofit research agencies or organizations) on adoption outcomes and the factors (including parental substance use disorder) affecting those outcomes.*

(b) *REPORT.*—*Not later than the date that is 36 months after the date of the enactment of the Stronger Child Abuse Prevention and Treatment Act the Secretary shall submit a report to Congress that includes the results of the study required under subsection (a).*

AUTHORIZATION OF APPROPRIATIONS

SEC. 205. (a) There are authorized to be appropriated \$40,000,000 for [fiscal year 2010] *fiscal year 2020* and such sums as may be necessary for [fiscal years 2011 through 2015] *fiscal years 2021 through 2025* to carry out programs and activities authorized under this subtitle.

(b) Not less than 30 percent and not more than 50 percent of the funds appropriated under subsection (a) shall be allocated for activities under subsections (b)(10) and (c) of section 203.

(c) The Secretary shall ensure that funds appropriated pursuant to authorizations in this Act shall remain available until expended for the purposes for which they were appropriated.