

FINAL REPORT
CHILD PROTECTION TASK FORCE

January 1995

AUTHORIZATION AND APPOINTMENT

The Child Protection Task Force was created by the Legislative Council for the 1994 Legislative Interim and received the following charge:

The Task Force is to review federal and state laws, regulations and policies regarding child protection, including the Child Abuse Registry, and make recommendations for changes in the Child Protection System. The Task Force shall review the minimum standard of children's care as defined in the definition of the Child in Need of Assistance (CINA) cases under section 232.2 of the Iowa Code and the legal custody or placement of children provisions in section 232.102. The Task Force shall review issues associated with expanding the Court-Appointed Special Advocate (CASA) program and other services in the state which would increase involvement of children services without incurring new financial strains on state government. The Task Force shall submit a report of its findings and recommendations to the General Assembly on or before December 16, 1994.

MEMBERSHIP

The members of the Study Committee were:

Senator Elaine Szymoniak, Co-Chairperson

Representative Dan Boddicker, Co-Chairperson

Senator Randal Giannetto

Senator Patty Judge

Senator Paul Pate (Senator Pate resigned from his Senate seat following his election as Secretary of State but prior to the Task Force's final meeting. A replacement was not appointed.)

Senator Maggie Tinsman

Representative Betty Grundberg

Representative Ralph Klemme

Representative Michael Moreland

Representative Pat Murphy

Dr. Randell Alexander, Associate Professor of Pediatrics, Iowa City

Ms. Marti Anderson, Director, Crime Victim Assistance, Des Moines

Mr. Mike Bandstra, Youth Law Center, Des Moines

Ms. Kay Gardner, Vice President, Family Resources, Davenport
Ms. Sharon Greer, Private Attorney, Marshalltown
Ms. Melodee Hanes, Assistant Polk County Attorney, Des Moines
Mr. Rhea Hambright, Private Citizen, Davenport
Mr. Ralph Hoksbergen, Private Citizen, Oskaloosa
Mr. John Holtkamp, Iowa Chapter, National Committee to Prevent Child Abuse,
Des Moines
Mr. Dan Kelley, Child Abuse Investigator, Marion
Ms. Brenda Ristvedt, Executive Director, Volunteer Services, Inc., Independence
Ms. Sue Tesdahl, Director, Child Protection Center, Cedar Rapids
Mr. Joseph Thornton, Private Attorney, Council Bluffs
Ms. Catherine Williams, Council on Human Services, Des Moines

BACKGROUND

Iowa's child protection system has been a regular topic of debate by the General Assembly in recent legislative sessions. In 1994, legislation addressing many child protection provisions (1994 Iowa Acts, chapter 1130) included a request for the Legislative Council to establish a child protection task force. In addition, an appropriation of \$10,000 was enacted in 1994 Iowa Acts, chapter 1199, section 8, subsection 21, for costs associated with the requested task force. This appropriation was used for per diem and expenses of task force members and for costs to bring in a representative of the American Humane Association to address the task force.

CHILD PROTECTION TASK FORCE PROCEEDINGS

The Child Protection Task Force was authorized to hold three meeting days which were held in a two-day meeting on November 28-29, 1994, and a final meeting on January 12, 1995. The Task Force received a large volume of written testimony and information which is filed with the Legislative Service Bureau. A listing is included in this report as Attachment 1.

November 28-29, 1994, Meeting

Overview of child protection system. The initial two-day meeting provided an overview of the major aspects of the child protection system and discussion of criticisms of the system. The overview was presented by Task Force members and Department of Human Services (DHS) field staff from around the state and included the following components:

- System history and philosophy
- Child abuse report intake process
- Child abuse investigation process
- Process of developing a conclusion - determining whether child abuse is found, unfounded, or undetermined

- Results of a conclusion - possible services, emergency removal of children or parents, confidentiality requirements, child in need of assistance proceedings, and criminal charges
- Overview of committees, teams, and task forces which assist DHS in reviewing cases, improving training, and developing policy
- Overview of changes and trends in child protection over the past 20 years provided by the research director of the National Resource Center on Child Abuse and Neglect

Discussion. The following issues were raised during the Task Force discussion:

- The Family Investment Program (formerly Aid to Families with Dependent Children), which requires applicants to develop a plan to move off public assistance, should also include a review of the family's needs for other types of assistance in addition to employment needs.
- A comprehensive review of the Child Abuse Registry is needed to determine if the policy direction reflects what the public wants.
- Recommendations from the major case review team created by DHS should be provided to the Task Force for review.
- The issues of early termination of parental rights and adoption should be reviewed.
- The possibility of charging a fee for records checks should be considered.
- Community-based efforts to prevent abuse should be expanded and possibly coordinated with the Danforth Foundation approach which encourages coordination of social service, education, public health, and judiciary efforts.
- The allegation-based vs. assessment-based approach to a child protection system should be reviewed.
- The Task Force should consider whether additional death review systems should be implemented at the community level.
- It was noted that the current system approach seeks prevention of abuse through performance of investigations and maintenance of records concerning a wide variety of abuse, including forms of abuse which are less serious than others. There was concern expressed that the desire to protect children can conflict with the desire to treat alleged perpetrators of abuse fairly.
- Decision making in developing conclusions concerning whether allegations of child abuse were true was extensively discussed--should teams of three uninterested parties make these decisions?
- Child in Need of Assistance (CINA) determination provisions should be reviewed.
- Legal custody and placement of children provisions should be reviewed.
- Expansion throughout Iowa of the Iowa Healthy Family Program should be considered.
- The issue of registration of day care homes with four or fewer children should be reviewed.

Issues identified. Following this discussion, the Task Force raised concerns regarding the broad scope of its charge and issues raised and agreed to focus on the following issues:

- Conduct an in-depth review of the Child Abuse Registry, including fees for registry checks.
- Consider methods to augment and review DHS decision making in child abuse determinations and criminal justice efforts. Suggestions include multidisciplinary review teams and citizen review panels.
- Consider improving practices when a child is removed from the child's home, particularly permanency planning for the future of the child, adoption efforts, and expedited termination of parental rights.
- The Iowa approach to child protection focuses upon responding to allegations of abuse. Other states are investigating approaches which center on assessing and assisting with family problems. The Task Force should consider the advantages and disadvantages of these approaches.
- Review service delivery models based upon collaboration between community agencies and service providers. Investigate linking with similar community collaboration efforts encouraged by the Danforth Foundation.
- Consider expanding child abuse prevention efforts such as the Iowa Healthy Family pilot program which is now operational in six counties.

January 12, 1995, Meeting

Overview. The major focus of this meeting was to address the priority issues identified in the previous meeting and to consider recommendations.

Child Abuse Investigations and Registry. Ms. Marno Cook, Child Protection Program Manager, Department of Human Services, reviewed her survey of child protection investigation and registry practices in eight other states. She explained that a child protection system is responsible for making a decision concerning the truth of a child abuse allegation and for assessing needs during an investigation. Her presentation covered pros and cons associated with emphasizing one of these responsibilities more than the other as a basis for the system. In addition, she discussed concerns expressed that the registry identifies all forms of child abuse with the identical label of child abuse regardless of severity. She completed her presentation by explaining a proposal for revising Iowa's child protection system by responding to allegations with an assessment approach and only maintaining the names of serious founded child abuse cases in the central registry. Ms. Cook emphasized that no system is without complaints and that change should be implemented gradually.

Child Abuse Intervention Teams. Ms. Melodee Hanes, Assistant Polk County Attorney, discussed her research concerning other states' statutes that provide for multidisciplinary teams which focus on child abuse intervention and prosecution needs at the local or regional level. She noted that the states vary in emphases and administrative jurisdictions for these teams. She

proposed that the Attorney General be directed to form a multidisciplinary committee to study the best approaches and make recommendations for legislative consideration. She suggested that recommendations cover administrative structures, recommended protocols, and funding.

Foster Care and Adoption Issues. Mr. Mike Bandstra of the Youth Law Center and Ms. LeAnn Jones of the State Citizen Foster Care Review Board discussed foster care and adoption issues. Ms. Jones explained the citizen foster care review process. Mr. Bandstra noted that when a child's parental rights are terminated, the child becomes a ward of the state and it is in both the child's and the state's best interests to locate an adoptive parent for the child. Concerns were raised that heavy worker caseloads and lack of technical assistance have resulted in lengthy foster care placements and have reduced the number of adoptive placements. He suggested revising fiscal estimates, securing technical assistance to improve adoption efforts, and changing a termination of parental rights statute. In addition, he presented recommendations on behalf of Mr. John Holtkamp to revise the guardian ad litem law so that a guardian ad litem can file a petition to terminate parental rights on behalf of a child.

Child Death Review Team. Dr. Randell Alexander, Associate Professor of Pediatrics, University of Iowa, distributed draft legislation to create a permanent multidisciplinary team to review information on all child deaths in the state. He suggested that the team make recommendations for policy changes to prevent future deaths from occurring. He noted that the team could be asked to review major child abuse cases. He proposed that the team be independent of other state agencies but noted that many states provide administrative services through their state health department.

Ombudsman. Assistant Citizens' Aide/Ombudsman Ms. Wendy Sheetz explained the role of the Ombudsman's office in performing an independent review of the actions of a government agency in response to a citizen complaint. She noted that the review is bound by strict confidentiality requirements and said that public opinion of DHS actions regarding a report would be improved if some details concerning a report could be publicly discussed. She expressed support for the process currently available for a subject of a child abuse report to object to the DHS finding at the conclusion of an investigation. She expressed concern regarding the large volume of cases carried by child protective investigators.

Iowa Healthy Family Program. Ms. Brenda Ristvedt described the Iowa Healthy Family Program, which targets services to at-risk families that have a newborn child. The program operates in six counties. She noted improvement in various risk factors such as immunization rates and employment-related activities in families involved in the program.

Recommendations

The Child Protection Task Force made the following recommendations during its final meeting on January 12, 1995:

1. **Primary Prevention.** That the General Assembly and the Governor annually increase funding for the Healthy Families Iowa Program so that the program is

eventually available statewide. This program targets at-risk families that have a newborn child in order to prevent child abuse and neglect, strengthen families, and perform other primary prevention activities. The Legislative Fiscal Bureau is requested to estimate the savings in public expenditures realized as a result of the program's prevention activities. A summary of the evaluation findings from the program's second year of operation is attached to this report as Attachment 2.

2. **Child Death Review Team.** That a prevention-oriented, multidisciplinary Iowa child death review team be created in statute. This team should be given the duty of reviewing all child death information and making annual recommendations to policymakers and public agencies for changes to reduce the incidence of child deaths. Consideration should also be given to requiring this team to review major child abuse cases. A copy of proposed legislation is attached to this report as Attachment 3.
3. **Child Abuse Intervention Teams.** That the Attorney General be directed to form a multidisciplinary committee to develop a proposal for regional multidisciplinary teams to focus upon child abuse prosecution and intervention needs. The committee should be directed to submit a report prior to the 1996 Legislative Session. The committee should consider other state statutes for multidisciplinary teams, options for regional groupings, and various approaches and specialties such as sexual abuse, and funding mechanisms.
4. **Worker Caseloads.** That the General Assembly continue to review the impact of heavy caseloads on the effectiveness of child protection investigators, foster care staff, and other DHS workers associated with the child protection system. The Task Force Co-chairpersons, Senator Szymoniak and Representative Boddicker, agreed to meet with the Department of Human Services (DHS) to discuss this issue and whether there are any areas of duplication. In addition, it is recommended that the General Assembly review caseload findings of the Kempe Center Study of Iowa's Child Protection System (an outside consultant study conducted in 1988) and the recent Illinois consent decree directives on child protective worker caseloads.
5. **Child Abuse Investigations.** That the General Assembly continue to review proposals to change the child protection system's response to a child abuse report. DHS offered a proposal to place greater emphasis on its responsibility to assess needs when responding to a report. Current law requires DHS to issue a decision concerning every child abuse report within a relatively short period of time. Concern was raised that this responsibility of making a decision overshadows the more important responsibility of assessing needs during the investigation. In addition, there was concern raised that a finding of child abuse is not an informative label in that all forms of abuse, regardless of the severity, are labeled identically. Various legislators and other members expressed interest in continuing to work on this issue.
6. **Child Abuse Registry.** That the General Assembly continue to review proposals for revising the child abuse registry, including proposals for only listing the more

serious cases in the registry. There was consensus on submitting the following items for legislative consideration: require that, with certain exceptions, alleged perpetrators of founded child abuse are notified by certified mail of the finding prior to the listing of the alleged perpetrator in the registry; the notice should include an appeal form which must be returned within 10 business days; however, if the alleged abuse is sexual abuse, or the case is referred for juvenile court action or for criminal charges, the name of the alleged perpetrator would be entered on the registry prior to the opportunity for appeal; time limits should be applied to the appeal process; and further consideration should be given to citizen review and other options for revising the current appeal process.

7. **Registry Fees.** That the General Assembly consider applying a fee for performing a child abuse registry check. It was noted that DHS currently performs approximately 50,000 checks annually and fee revenues could be used to offset staff costs or to expand funding of prevention programs.
8. **Adoption Improvement Costs.** That the Legislative Fiscal Bureau be directed to work with the Department of Human Services, State Foster Care Review Board, and the Youth Law Center in developing a cost analysis of providing increased funding to expedite adoption of children for whom parental rights are terminated and who are wards of the state placed in long-term foster care. This cost analysis and related issues should be presented to the Joint Appropriations Subcommittee on Human Services.
9. **Termination of Parental Rights in Severe Abuse Cases.** That the General Assembly amend section 232.116 to authorize termination of parental rights in cases of life-threatening abuse and neglect in which there is evidence that the offer or receipt of services would not in a reasonable period of time correct the conditions which led to the abuse. Current law requires that the services must be received prior to termination. Proposed language is attached to this report as Attachment 4.
10. **Guardian Ad Litem Petition for Termination of Parental Rights.** That the General Assembly enact authority for a child's guardian ad litem to file a petition for termination of parental rights. Under current law only the child's guardian or custodian, the Department of Human Services, a juvenile court officer, or the county attorney may file a petition. A guardian ad litem is an individual appointed by the court to represent a child's interests in judicial proceedings.

Minority Report. There was strong support among a minority of the Task Force members for making significant changes to the child protection system. The Task Force expressed belief that all members' points of view should be represented and a minority report is included as Attachment 5 of this report.

ATTACHMENT 1

MATERIALS SUBMITTED TO THE CHILD PROTECTION TASK FORCE

1. Background memoranda prepared by the Legislative Service Bureau summarizing the statutes, administrative rules, and employee manuals describing the requirements for child abuse investigations.
2. American Humane Association report of May 1994 entitled, "Twenty Years After CAPTA: A Portrait of the Child Protective Services System."
3. Summary of the Kempe Center Study of Iowa's child protection system conducted in 1988.
4. A report on the implementation of the Kempe Center Study provided by the Department of Human Services.
5. Information on the Court-Appointed Special Advocate (CASA) program provided by the Judicial Department.
6. Information concerning the decision-making process for a child abuse finding prepared by DHS.
7. Information concerning family-centered services distributed by Ms. Kay Gardner.
8. A description of the results of a child abuse investigation conclusion prepared by DHS.
9. A description of the Buchanan County Volunteer Co-op distributed by Ms. Brenda Ristvedt.
10. A description of child abuse organizations distributed by Dr. Randell Alexander and Ms. Sue Tesdahl.
11. American Humane Association report of August 1994 entitled, "Twenty Years After CAPTA: The Challenge of System Reform."
12. A description of Iowa's central child abuse registry distributed by DHS.
13. An excerpt from the Supreme Court Task Force Report on Courts' and Communities' Response to Domestic Abuse distributed by Ms. Marti Anderson.
14. A report from the Child Protection Council dated October 1994.
15. An evaluation report of the Iowa Healthy Family Program Hopes Project for 1993-1994.
16. A letter from Ms. Sue Williams, a foster parent, expressing concern regarding the effect of child abuse investigations on foster parents.
17. A statement raising questions regarding the value of the child protection system submitted by Mr. John Harvey.
18. A statement raising questions regarding case permanency planning submitted by Ms. Anna Lee Bear.
19. A document entitled, "Outline on Permanency Planning and Adoptions," prepared by Mr. Mike Bandstra.

20. A document entitled, "Case Permanency Planning and Citizen Review," prepared by Ms. DeAnn Jones, Administrator, State Citizen Foster Care Review Board.
21. A description of the cycle of services leading to adoption distributed by Ms. Jones.
22. A letter outlining a family's experience with a child abuse investigation submitted by Ms. Debbie Freitag.
23. Draft legislation to establish a state child death review team submitted by Dr. Alexander and Ms. Tesdahl.
24. A packet of materials prepared by DHS outlining guiding principles for a child protection system, pros and cons of allegation-based and assessment-based approaches to child abuse investigations, a description of the current use of the child abuse registry in Iowa and in other states, a comparison of child maltreatment definitions used in Iowa and other states, and a proposal to modify Iowa's child protection system.
25. Legislative proposals of the Iowa Chapter, National Committee to Prevent Child Abuse.
26. A statement and general information distributed by Ms. Wendy Sheetz, Assistant Citizens' Aide/Ombudsman.
27. A letter from Ms. Tammy Rogers describing the events surrounding the death of her child.
28. A letter from Ms. Pam Johnson describing child protection activities stemming from reports made by her stepdaughter.
29. A packet of materials from the American Humane Association providing child abuse data, descriptions of allegation-based and assessment-based approaches to child abuse investigations, and information regarding kinship care approaches to foster care.
30. A packet of materials including personal experiences, foster parent survey responses, and a synopsis of a program to assist foster parents with the abuse allegation and investigation process, submitted by Ms. Sue Williams and Mr. Kevin Cerveny of the Heartland of Iowa Foster and Adoptive Parents Association.
31. A packet of materials regarding the Iowa Healthy Family Program Project.
32. A statement of concern regarding the child protection system distributed by Mr. Rhea Hambright.

Evaluation Results - Year II

- The infant mortality rate (per 1,000 live births) for the six pilot counties decreased from 9.8 in 1992 to 7.5 in 1993.
- The foster care placement of 12.3 for HOPES clients was significantly lower than the 50.6 rate for HOPES drop out clients.
- The founded child abuse rate of 67.5 for HOPES clients was significantly lower than the 158.2 rate for drop out clients.
- Parents showed an increased ability to provide adequate resources in the household; mothers had significantly improved perception of newborns; decreased parenting stress; and improved scores related to family interactions.
- Infants achieve higher growth percentiles the longer they are in the program.
- 92% of children have current immunizations.
- 66% of parents are in school, job training, and/or employed.
- 63% have fathers showing significant family involvement.
- 10% subsequent pregnancies.

1 **BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF IOWA:**

2 **Section 1. Short Title.** This act shall be known and may be cited as the "CHILD
3 DEATH REVIEW ACT."

4 **Section 2. Legislative Findings and Purpose.**

5 (a) The legislature hereby finds and declares that:

6 1) Protection of the health and welfare of the children of this state is a goal of
7 its people and the death of children is an important public health concern that requires legislative
8 action.

9 2) Collecting accurate data on the cause and manner of deaths will better
10 enable the state to identify preventable deaths, and thus help reduce the incidence of such deaths.

11 3) Multidisciplinary review of child deaths is a mechanism to assist the state in
12 the development of a greater understanding of the incidence and causes of child deaths and the
13 methods for prevention of such deaths.

14 (b) The purpose of this Act is to aid in the reduction of the incidence of serious injury
15 and death to children by accurately identifying the cause and manner of death of children by
16 establishing an Iowa Child Death Review Team. The team will collect data from such review and
17 report to the legislature regarding the causes and recommendations for prevention of such deaths.

18 **Section 3. Iowa Child Death Review Teams.**

19 (a) There is hereby established the Iowa Child Death Review Team.

20 (b) The State Team shall:

21 1) collect, review, and analyze child death certificates, child death summary
22 data, including patient records or other pertinent confidential information (not withstanding the
23 confidential nature of any such records or information), and such other information as the State
24 Team deems appropriate, to use in preparation of an annual report to the legislature concerning
25 the causes and manner of child deaths;

26 2) recommend interventions to the legislature aimed at preventing deaths of
27 children based on an analysis of the cause and manner of such deaths; and

28 3) recommend changes within the agencies represented on the State Team
29 which may prevent child deaths; and

1 4) maintain the confidentiality of any patient records or other confidential
2 information reviewed under this section.

3 (c) The State Team shall include:

- 4 1) the State's chief medical examiner or his designee,
- 5 2) the designee of the Department of Public Health,
- 6 3) the designee of the Department of Human Services,
- 7 4) the designee of the Department of Public Safety,
- 8 5) the designee of the Division of Vital Records,
- 9 6) the designee of the Attorney General's Office,
- 10 7) the designee of the Department of Transportation,
- 11 8) the designee of the Department of Education,
- 12 9) a professional with expertise in SIDS,
- 13 10) two pediatricians with experience with child deaths,
- 14 11) two mental health professionals with child death experience,
- 15 12) two social workers with child death experience,
- 16 13) one professional with domestic violence experience,
- 17 14) one professional with substance abuse experience,
- 18 15) one local law enforcement,
- 19 16) one county attorney,
- 20 17) one nurse with child death experience,
- 21 18) one perinatal expert,
- 22 19) one representative from the health insurance industry,
- 23 20) three others at large

24 (d) The Major Case Review Committee will call a meeting with members of the State
25 Team designated in section (c)1-8 to designate individuals in section 3(c)9-20. Thereafter, the
26 State Team shall be responsible for designating any new members.

27 (e) The State Team may establish subcommittees to which it may delegate some or all
28 of its responsibilities under subsections (b)1-4 of this section.

29 (f) There shall be no monetary liability on the part of, and no cause of action for
30 damages shall arise against, any member of the State Team, or of any subcommittee appointed

1 under section 4(d), for any act or proceeding undertaken or performed within the scope of the
2 functions of the State Team if the member acts without malice.

3 **Section 4. Report to Legislature.**

4 (a) The State Team shall report to the legislature annually concerning the causes and
5 manner of deaths of children. The report shall include analysis of factual information obtained
6 through review and recommendations regarding prevention.

7 (b) Members of the State Child Death Review Team, while engaged in duties related
8 to the mission of the State Team, shall be reimbursed for their expenses.

9 (c) Funds appropriated for the State Team shall be solely used to accomplish the
10 purpose of the team. All federal funds or any grants received shall be deposited with the treasurer
11 of the state and used only for the purposes agreed upon as conditions for the receipt of those
12 funds.

13 **Section 5. Effective date.**

14 This Act shall become effective July 1, 1995.

S.F. _____ H.F. _____

1 Section 1. Section 232.116, subsection 1, paragraph h,
2 Code 1995, is amended to read as follows:

3 h. The court finds that both all of the following have
4 occurred:

5 (1) The child meets the definition of child in need of
6 assistance based on a finding of physical or sexual abuse or
7 neglect as a result of the acts or omissions of one or both
8 parents.

9 (2) There is clear and convincing evidence that the abuse
10 or neglect posed a significant risk to the life of the child.

11 ~~(2) (3)~~ (3) There is clear and convincing evidence that the
12 ~~circumstances-surrounding-the-abuse-or-neglect-of-the-child,~~
13 ~~despite-the~~ offer or receipt of services, ~~constitutes-imminent~~
14 ~~danger-to-the-child~~ would not correct the conditions which led
15 to the abuse or neglect of the child within a reasonable
16 period of time.

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MINORITY REPORT FOR CHILD PROTECTION TASK FORCE

Due to the complex nature of the child protection issue, and the many charges of the Task Force, several members of the Task Force feel that little time was available to discuss the issue of false accusations of child abuse.

Accusing or being accused of child abuse is a very serious matter. The social stigma attached to an alleged child abuser is one of the most negative labels that a person can suffer in modern society.

People who are accused of child abuse are plunged into a complex legal system that operates in a manner where the dominant public perception is that you are guilty until you prove yourself innocent. Frequently, families and individuals are forced to deplete savings and assets to try to return their children home or simply restore their good name.

Created in response to society's outrage over child abuse, our current child protection system is such that anyone can accuse a person or family of child abuse with total anonymity and without consequence of the pain or emotional or financial burden that they may cause for the accused, the accused family, OR THE CHILDREN OF THE ACCUSED.

Iowa's current child protection system offers few checks and balances and little due process for those accused of abuse and no opportunity for recouping damages from their accuser if falsely accused. It would seem that simply proving oneself innocent, regardless of the emotional and financial drain, the damaged reputation, or irreparable damage to a marriage or family, is enough.

Vindication of abuse accusations is not enough.

Abuse accusations are far too serious to allow our child protection system to operate outside of normal and constitutional due process.

The members of the Task Force listed below recommend that the General Assembly form a second Task Force to study the issues of:

1. False accusations.
2. Intimidation and coercion by child abuse investigators.
3. Methods of interviewing of children by child abuse investigators and availability of evidence to the accused.
4. The contents of DHS handbooks and guidelines for field staff.

We share the concerns for the safety of children expressed by the Task Force and are committed to working to ensure that Iowa becomes a safer environment for children. However, to allow the

injustice of false accusations and the needless destruction to individuals and families to continue is counterproductive to the overall welfare of the children within those families and the other children in our state.

Submitted by:

Representative Dan Boddicker
Representation Ralph Klemme
Mr. Rhea Hambright
Mr. Ralph Hoksbergen

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