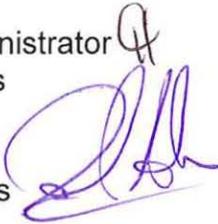


**DIVISION OF CHILDREN AND FAMILY SERVICES
ADMINISTRATIVE MEMO #17-2011**

To: All Division of Children and Family Services Staff

From: Christine M. Hanus, Child Welfare Administrator
Division of Children and Family Services

Approved by: Scot L. Adams PhD., Interim Director
Division of Children and Family Services 

Date: December 19, 2011

Re: Referrals to Child Advocacy Centers (CAC)

Effective Date: Immediately

Duration: Until revised

Contact: Suzanne Schied, CFS Program Specialist
402-471-9245 or suzanne.schied@nebraska.gov or
Sherri Haber, Child and Adult Abuse and Neglect Administrator
402-471-7989 or sherri.haber@nebraska.gov

Background: In the 2006 Legislative session, the Nebraska Legislature passed Nebraska Revised Statute 28-728 which states that child abuse and neglect are community problems requiring a cooperative complementary response by law enforcement, child advocacy centers, prosecutors, the Department of Health and Human Services and other agencies or entities designed to protect children.

Process: DHHS contracts with the child advocacy centers to provide the following services to child victims and non-offending family members:

- Videotaped forensic interviews;
- Medical evaluations;
- Advocacy;
- Case coordination to the multi-disciplinary (LB 1184) investigation and treatment teams;
- Training

As required by Nebraska statute, a Child Advocacy Center *will* be involved in *every* investigation/assessment involving any child 16 or younger who may be a victim of or witness to:

- Sexual abuse
- Serious physical abuse or neglect
- Domestic violence involving injury to the child or adult victim
- Kidnapping

- Kidnapping
- Homicide
- Drug lab

In order to assist the assessment worker in knowing which cases require involvement by a Child Advocacy Center, the N-FOCUS system automatically identifies any intake alleging sexual abuse. For situations not alleging sexual abuse, the Intake specialist receiving the abuse or neglect report will identify that the Child Advocacy Center will be involved by checking a box as they document the intake on N-FOCUS. This documentation will occur in the following situations to identify the intake as requiring Child Advocacy Center involvement:

- Serious injury or medical condition of a child possibly caused by physical abuse or neglect
- A child who has witnessed a violent crime
- A child who has been removed from a drug lab
- A child who has been recovered from a kidnapping
- A child who has witnessed the death of a sibling or house-mate
- A child who has witnessed a serious injury to a sibling or house-mate

A serious injury or medical condition is defined as one requiring medical intervention or treatment.

Not all children will be seen at the Child Advocacy Center, if he/she has received medical care at a hospital or other acute care facility. If the child was admitted to or seen at a hospital or other medical facility, the medical records will be obtained and reviewed by the cooperating pediatrician from the appropriate Child Advocacy Center. Review of medical records by a medical professional who is an expert in child abuse and neglect will assure that all child abuse or neglect related injuries are recognized and identified.

Medical exams at a Child Advocacy Center are recommended if there is an allegation of:

- Sexual abuse
- Serious physical abuse or neglect (medical neglect, failure to thrive, etc.)
- Drug exposure to children

Child Advocacy Center consultation will be done in all situations involving child death.