

116TH CONGRESS
1ST SESSION

S. 2971

To amend and reauthorize the Child Abuse Prevention and Treatment Act,
and for other purposes.

IN THE SENATE OF THE UNITED STATES

DECEMBER 3, 2019

Mr. ISAKSON (for himself and Mr. JONES) introduced the following bill; which
was read twice and referred to the Committee on Health, Education,
Labor, and Pensions

A BILL

To amend and reauthorize the Child Abuse Prevention and
Treatment Act, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “CAPTA Reauthoriza-
5 tion Act of 2019”.

6 **SEC. 2. FINDINGS.**

7 Section 2 of the Child Abuse Prevention and Treat-
8 ment Act (42 U.S.C. 5101 note) is amended—

1 (1) in paragraph (1), by striking “2008, ap-
2 proximately 772,000” and inserting “2017, approxi-
3 mately 674,000”;

4 (2) in paragraph (2)—

5 (A) in subparagraph (A)—

6 (i) by striking “close to $\frac{1}{3}$ ” and in-
7 serting “75 percent”; and

8 (ii) by striking “2008” and inserting
9 “2017”; and

10 (B) by amending subparagraph (B) to read

11 as follows:

12 “(B) investigations have determined that ap-
13 proximately 75 percent of children who were victims
14 of maltreatment in fiscal year 2017 suffered neglect,
15 18 percent suffered physical abuse, and 9 percent
16 suffered sexual abuse;”;

17 (3) in paragraph (3)—

18 (A) in subparagraph (B), by striking
19 “2008, an estimated 1,740” and inserting
20 “2017, an estimated 1,720”; and

21 (B) by amending subparagraph (C) to read

22 as follows:

23 “(C) in fiscal year 2017, children younger than
24 1 year old comprised 40 percent of child maltreat-

1 ment fatalities and 72 percent of child maltreatment
2 fatalities were younger than 3 years of age;”;

3 (4) in paragraph (4)(B)—

4 (A) by striking “37” and inserting “40”;

5 and

6 (B) by striking “2008” and inserting
7 “2017”;

8 (5) in paragraph (5), by striking “, American
9 Indian children, Alaska Native children, and children
10 of multiple races and ethnicities” and inserting “and
11 American Indian or Alaska Native children”;

12 (6) in paragraph (6)—

13 (A) in subparagraph (A), by inserting “to
14 strengthen families” before the semicolon; and

15 (B) in subparagraph (C), by striking
16 “neighborhood” and inserting “community”;

17 (7) in paragraph (11), by inserting “trauma-in-
18 formed,” after “comprehensive,”; and

19 (8) in paragraph (15)—

20 (A) in subparagraph (D), by striking “im-
21 plementing community plans” and inserting
22 “supporting community-based programs to
23 strengthen and support families in order to pre-
24 vent child abuse and neglect”; and

1 (B) by amending subparagraph (E) to read
2 as follows:

3 “(E) improving professional, paraprofes-
4 sional, and volunteer resources to strengthen
5 the child welfare workforce; and”.

6 **SEC. 3. GENERAL DEFINITIONS.**

7 Section 3 of the Child Abuse Prevention and Treat-
8 ment Act (42 U.S.C. 5101 note) is amended—

9 (1) in paragraph (7), by striking “; and” and
10 inserting a semicolon;

11 (2) in paragraph (8), by striking the period and
12 inserting “; and”; and

13 (3) by adding at the end the following:

14 “(9) the term ‘underserved or overrepresented
15 groups in the child welfare system’ includes youth
16 that enter the child welfare system following family
17 rejection, parental abandonment, sexual abuse or
18 sexual exploitation, or unaccompanied homeless-
19 ness.”.

20 **TITLE I—GENERAL PROGRAM**

21 **SEC. 101. INTERAGENCY WORK GROUP ON CHILD ABUSE
22 AND NEGLECT.**

23 Section 102 of the Child Abuse Prevention and
24 Treatment Act (42 U.S.C. 5102) is amended to read as
25 follows:

1 **“SEC. 102. INTERAGENCY WORK GROUP ON CHILD ABUSE**
2 **AND NEGLECT.**

3 “(a) ESTABLISHMENT.—The Secretary may continue
4 the work group known as the Interagency Work Group
5 on Child Abuse and Neglect (referred to in this section
6 as the ‘Work Group’).

7 “(b) COMPOSITION.—The Work Group shall be com-
8 prised of representatives from Federal agencies with re-
9 sponsibility for child abuse and neglect related programs
10 and activities.

11 “(c) DUTIES.—The Work Group shall—

12 “(1) coordinate Federal efforts and activities
13 with respect to child abuse and neglect prevention
14 and treatment;

15 “(2) serve as a forum that convenes relevant
16 Federal agencies to communicate and exchange ideas
17 concerning child abuse and neglect related programs
18 and activities; and

19 “(3) further coordinate Federal efforts and ac-
20 tivities to maximize resources to address child abuse
21 and neglect in areas of critical needs for the field,
22 such as improving research, focusing on prevention,
23 and addressing the links between child abuse and
24 neglect and domestic violence.”.

1 **SEC. 102. NATIONAL CLEARINGHOUSE FOR INFORMATION**
2 **RELATING TO CHILD ABUSE.**

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

5 (1) in subsection (b)—

6 (A) in paragraph (1), by striking “effective
7 programs” and inserting “evidence-based and
8 evidence-informed programs”;

9 (B) by redesignating paragraphs (4)
10 through (9) as paragraphs (5) through (10), re-
11 spectively;

12 (C) by inserting after paragraph (3) the
13 following:

14 “(4) maintain and disseminate information on
15 best practices to support children being cared for by
16 kin, including such children whose living arrange-
17 ments with kin occurred without the involvement of
18 a child welfare agency;”;

19 (D) in paragraph (5), as so redesignated,
20 by inserting “, including efforts to prevent child
21 abuse and neglect” before the semicolon;

22 (E) in paragraph (7), as so redesignated—

23 (i) in subparagraph (A), by striking
24 the semicolon and inserting “, including
25 among at-risk populations, such as young
26 parents, parents with young children, and

1 parents who are adult former victims of
2 domestic violence or child abuse or neglect;
3 and”;

4 (ii) by striking subparagraph (B);
5 (iii) by redesignating subparagraph
6 (C) as subparagraph (B); and
7 (iv) in subparagraph (B), as so redesi-
8 gnated, by striking “abuse” and inserting
9 “use disorder”;

10 (F) in paragraph (8), as so redesignated—
11 (i) by redesignating subparagraphs
12 (B) and (C) as subparagraphs (C) and
13 (D), respectively;
14 (ii) by inserting after subparagraph
15 (A) the following:
16 “(B) best practices in child protection
17 workforce development and retention;” and
18 (iii) in subparagraph (C), as so redesi-
19 gnated, by striking “mitigate psycho-
20 logical” and inserting “prevent and miti-
21 gate the effects of”; and
22 (G) in subparagraph (B) of paragraph (9),
23 as so redesignated, by striking “abuse” and in-
24 serting “use disorder”; and
25 (2) in subsection (c)—

1 (A) in the heading, by inserting “; DATA
2 COLLECTION AND ANALYSIS” after “RE-
3 SOURCES”;

4 (B) in paragraph (1)(C)—

5 (i) in clause (ii), by striking the semi-
6 colon and inserting “, including—

7 “(I) the number of child deaths
8 due to child abuse and neglect re-
9 ported by various sources, including
10 information from the State child wel-
11 fare agency and the State child death
12 review program or other source that
13 compiles State data, including vital
14 statistics death records, State and
15 local medical examiner and coroner of-
16 fice records, and uniform crime re-
17 ports from local law enforcement; and

18 “(II) data, to the extent prac-
19 ticable, about the circumstances under
20 which a child death occurred due to
21 abuse and neglect, including the cause
22 of the death, whether the child was
23 referred to the State child welfare
24 agency, the determination made by
25 the child welfare agency (as applica-

1 ble), and any known previous mal-
2 treatment of children by the perpe-
3 trator;”; and

4 (ii) in clause (iv), by striking “sub-
5 stance abuse” and inserting “substance
6 use disorder”; and

7 (C) in subparagraph (F), by striking
8 “abused and neglected children” and inserting
9 “victims of child abuse or neglect”.

10 **SEC. 103. RESEARCH AND ASSISTANCE ACTIVITIES.**

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

13 (1) in subsection (a)—

14 (A) in paragraph (1)—

15 (i) in the heading, by striking “TOP-
16 ICS” and inserting “IN GENERAL”;

17 (ii) in the matter preceding subpara-
18 graph (A)—

19 (I) by striking “consultation with
20 other Federal agencies and” and in-
21 serting “coordination with applicable
22 Federal agencies and in consultation
23 with”; and

1 (II) by inserting “, including pri-
2 mary prevention of child abuse and
3 neglect,” before “and to improve”;

4 (iii) by striking subparagraphs (C),
5 (E), (I), (J), and (N);

6 (iv) by redesignating subparagraphs
7 (D), (F), (G), (H), (K), (L), and (M) as
8 subparagraphs (F) through (L), respec-
9 tively;

10 (v) by inserting after subparagraph
11 (B) the following:

12 “(C) evidence-based and evidence-informed
13 programs to prevent child abuse and neglect in
14 families that have not had contact with the
15 child welfare system;

16 “(D) best practices in recruiting, training,
17 and retaining a child protection workforce that
18 addresses identified needs;

19 “(E) options for updating technology of
20 outdated devices and data systems to improve
21 communication between systems that are de-
22 signed to serve children and families;”;

23 (vi) in subparagraph (G), as so redesi-
24 gnated, by striking “and the juvenile jus-
25 tice system that improve the delivery of

1 services and treatment, including methods”
2 and inserting “, the juvenile justice system,
3 and other relevant agencies engaged with
4 children and families that improve the de-
5 livery of services and treatment, including
6 related to domestic violence or mental
7 health,”;

8 (vii) in subparagraph (L), as so redes-
9 ignated—

10 (I) by inserting “underserved or
11 overrepresented groups in the child
12 welfare system or” after “facing”; and

13 (II) by striking “Indian tribes
14 and Native Hawaiian” and inserting
15 “such”;

16 (viii) by inserting after subparagraph
17 (L), as so redesignated, the following:

18 “(M) methods to address geographic, ra-
19 cial, and cultural disparities in the child welfare
20 system, including a focus on access to serv-
21 ices;”; and

22 (ix) by redesignating subparagraph
23 (O) as subparagraph (N); and

24 (B) in paragraph (2), by striking “para-
25 graph (1)(O)” and inserting “paragraph (1)(N)

1 and analyses based on data from previous years
2 of surveys of national incidence under this
3 Act”;

4 (C) in paragraph (3)—

5 (i) by striking “of 2010” and insert-
6 ing “of 2019”; and

7 (ii) by striking “that contains the re-
8 sults of the research conducted under
9 paragraph (2).” and inserting “that—

10 “(A) identifies the research priorities
11 under paragraph (4) and the process for deter-
12 mining such priorities;

13 “(B) contains a summary of the research
14 supported pursuant to paragraph (1);

15 “(C) contains the results of the research
16 conducted under paragraph (2); and

17 “(D) describes how the Secretary will con-
18 tinue to improve the accuracy of information on
19 the national incidence on child abuse and ne-
20 glect specified in paragraph (2).”;

21 (D) in subparagraph (B) of the first para-
22 graph (4) (relating to priorities)—

23 (i) by striking “1 years” and inserting
24 “1 year”; and

1 (ii) by inserting “, at least 30 days
2 prior to publishing the final priorities,”
3 after “subparagraph (A)”; and

4 (E) by striking the second paragraph (4)
5 (relating to a study on shaken baby syndrome),
6 as added by section 113(a)(5) of the CAPTA
7 Reauthorization Act of 2010 (Public Law 111–
8 320);

9 (2) in subsection (b)—

10 (A) in paragraph (1)—

11 (i) by inserting “or underserved or
12 overrepresented groups in the child welfare
13 system” after “children with disabilities”;
14 and

15 (ii) by striking “substance abuse” and
16 inserting “substance use disorder”;

17 (B) by redesignating paragraphs (2) and
18 (3) as paragraphs (3) and (4), respectively;

19 (C) by inserting after paragraph (1) the
20 following:

21 “(2) CONTENT.—The technical assistance
22 under paragraph (1) shall be designed to, as applica-
23 ble—

24 “(A) promote best practices for addressing
25 child abuse and neglect in families with complex

1 needs, such as families who have experienced
2 domestic violence, substance use disorders, and
3 adverse childhood experiences;

4 “(B) provide training for child protection
5 workers in trauma-informed practices and sup-
6 ports that prevent and mitigate the effects of
7 trauma for infants, children, youth, and adults;

8 “(C) reduce geographic, racial, and cul-
9 tural disparities in child protection systems,
10 which may include engaging law enforcement,
11 education, and health systems, and other sys-
12 tems;

13 “(D) leverage community-based resources
14 to prevent child abuse and neglect, including re-
15 sources regarding health (including mental
16 health and substance use disorder), housing,
17 parent support, financial assistance, early child-
18 hood education and care, and education serv-
19 ices, and other services to assist families; and

20 “(E) provide other technical assistance, as
21 determined by the Secretary in consultation
22 with such State and local public and private
23 agencies and community-based organizations as
24 the Secretary determines appropriate.”;

1 (D) in subparagraph (B) of paragraph (3),
2 as so redesignated, by striking “mitigate psy-
3 chological” and inserting “prevent and mitigate
4 the effects of”; and

5 (E) in subparagraph (B) of paragraph (4),
6 as so redesignated—

7 (i) by striking “substance abuse” and
8 inserting “substance use disorder”; and

9 (ii) by striking “and domestic violence
10 services personnel” and inserting “domes-
11 tic violence services personnel, and per-
12 sonnel from relevant youth-serving and re-
13 ligious organizations”;

14 (3) in subsection (c)(3), by inserting “, which
15 may include applications related to research on pri-
16 mary prevention of child abuse and neglect” before
17 the period; and

18 (4) by striking subsection (e).

19 **SEC. 104. GRANTS TO STATES, INDIAN TRIBES OR TRIBAL**
20 **ORGANIZATIONS, AND PUBLIC OR PRIVATE**
21 **AGENCIES AND ORGANIZATIONS.**

22 Section 105 of the Child Abuse Prevention and
23 Treatment Act (42 U.S.C. 5106) is amended to read as
24 follows:

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

4 “(a) **AUTHORITY TO AWARD GRANTS OR ENTER**
5 **INTO CONTRACTS.**—The Secretary may award grants, and
6 enter into contracts, for programs and projects in accord-
7 ance with this section, for any of the following purposes:

8 “(1) Capacity building, in order to create co-
9 ordinated, inclusive, and collaborative systems that
10 have statewide impact in preventing, reducing, and
11 treating child abuse and neglect.

12 “(2) Innovation, through time-limited, field-ini-
13 tiated demonstration projects that further the under-
14 standing of the field to reduce child abuse and ne-
15 glect.

16 “(3) Plans of safe care grants to improve and
17 coordinate State responses to ensure the safety, per-
18 manency, and well-being of infants affected by sub-
19 stance use.

20 “(b) **CAPACITY BUILDING GRANT PROGRAM.**—

21 “(1) **IN GENERAL.**—The Secretary may award
22 grants or contracts to an eligible entity that is a
23 State or local agency, Indian Tribe or Tribal organi-
24 zation, a nonprofit entity, or a consortium of such
25 entities.

1 “(2) APPLICATIONS.—To be eligible to receive a
2 grant or contract under this section, an entity shall
3 submit an application to the Secretary at such time,
4 in such manner, and containing such information as
5 the Secretary may require.

6 “(3) USES OF FUNDS.—An eligible entity re-
7 ceiving a grant or contract under this subsection
8 shall use the grant funds to better align and coordi-
9 nate community-based, local, and State activities to
10 strengthen families and prevent child abuse and ne-
11 glect, by—

12 “(A) training professionals in prevention,
13 identification, and treatment of child abuse and
14 neglect, which may include—

15 “(i) training of professional and para-
16 professional personnel in the fields of
17 health care, medicine, law enforcement, ju-
18 diciary, social work and child protection,
19 education, early childhood care and edu-
20 cation, and other relevant fields, or individ-
21 uals such as court appointed special advo-
22 cates (CASAs) and guardian ad litem, who
23 are engaged in, or intend to work in, the
24 field of prevention, identification, and
25 treatment of child abuse and neglect, in-

1 cluding the links between child abuse and
2 neglect and domestic violence, and ap-
3 proaches to working with families with
4 substance use disorder;

5 “(ii) training on evidence-based and
6 evidence-informed programs to improve
7 child abuse and neglect reporting by
8 adults, with a focus on adults who work
9 with children in a professional or volunteer
10 capacity, including on recognizing and re-
11 sponding to child sexual abuse;

12 “(iii) training of personnel in best
13 practices to meet the unique needs and de-
14 velopment of special populations of chil-
15 dren, including those with disabilities, and
16 children under age of 3, including pro-
17 moting interagency collaboration;

18 “(iv) improving the training of super-
19 visory child welfare workers on best prac-
20 tices for recruiting, selecting, and retaining
21 personnel;

22 “(v) enabling State child welfare and
23 child protection agencies to coordinate the
24 provision of services with State and local
25 health care agencies, substance use dis-

1 order prevention and treatment agencies,
2 mental health agencies, other public and
3 private welfare agencies, and agencies that
4 provide early intervention services to pro-
5 mote child safety, permanence, and family
6 stability, which may include training on
7 improving coordination between agencies to
8 meet health evaluation needs of children
9 who have been victims of substantiated
10 cases of child abuse or neglect;

11 “(vi) training of personnel in best
12 practices relating to the provision of dif-
13 ferential response; or

14 “(vii) training for child welfare profes-
15 sionals to reduce and prevent discrimina-
16 tion (including training related to implicit
17 biases) in the provision of child protection
18 and welfare services related to child abuse
19 and neglect;

20 “(B) enhancing systems coordination and
21 triage procedures, including information sys-
22 tems, for responding to reports of child abuse
23 and neglect, which include programs of collabo-
24 rative partnerships between the State child pro-
25 tective services agency, community social service

1 agencies and community-based family support
2 programs, law enforcement agencies and legal
3 systems, developmental disability agencies, sub-
4 stance use disorder treatment agencies, health
5 care entities, domestic violence prevention enti-
6 ties, mental health service entities, schools,
7 places of worship, and other community-based
8 agencies, such as children’s advocacy centers, in
9 accordance with all applicable Federal and
10 State privacy laws, to allow for the establish-
11 ment or improvement of a coordinated triage
12 system; or

13 “(C) building coordinated community-level
14 systems of support for children, parents, and
15 families through prevention services in order to
16 strengthen families and connect families to the
17 services and supports relevant to their diverse
18 needs and interests, including needs related to
19 substance use disorder prevention.

20 “(c) FIELD-INITIATED INNOVATION GRANT PRO-
21 GRAM.—

22 “(1) IN GENERAL.—The Secretary may award
23 grants to entities that are States or local agencies,
24 Indian Tribes or Tribal organizations, or public or
25 private agencies or organizations (or combinations of

1 such entities) for field-initiated demonstration
2 projects of up to 5 years that advance innovative ap-
3 proaches to prevent, reduce, or treat child abuse and
4 neglect.

5 “(2) APPLICATIONS.—To be eligible to receive a
6 grant under this section, an entity shall submit an
7 application to the Secretary at such time, in such
8 manner, and containing such information as the Sec-
9 retary may require, including a rigorous methodo-
10 logical approach to the evaluation of the grant.

11 “(3) USE OF FUNDS.—An entity that receives
12 a grant under this section shall use the funds made
13 available through the grant to carry out or bring to
14 scale promising, evidence-informed, or evidence-
15 based activities to prevent, treat, or reduce child
16 abuse and neglect that shall include one or more of
17 the following:

18 “(A) Multidisciplinary systems of care to
19 strengthen families and prevent child abuse and
20 neglect, including primary prevention programs
21 or strategies aimed at reducing the prevalence
22 of child abuse and neglect.

23 “(B) Projects for the development of new
24 research-based strategies for risk and safety as-
25 sessments and ongoing evaluation and reassess-

1 ment of performance and accuracy of existing
2 risk and safety assessment tools, including to
3 improve practices utilized by child protective
4 services agencies, which may include activities
5 to reduce and prevent bias in such practices.

6 “(C) Projects that involve research-based
7 strategies for innovative training for mandated
8 child abuse and neglect reporters, which may
9 include training that is specific to the mandated
10 individual’s profession or role when working
11 with children.

12 “(D) Projects to improve awareness of
13 child welfare professionals and volunteers in the
14 child welfare system and the public about—

15 “(i) child abuse or neglect under State
16 law;

17 “(ii) the responsibilities of individuals
18 required to report suspected and known in-
19 cidents of child abuse or neglect under
20 State law, as applicable; and

21 “(iii) the resources available to help
22 prevent child abuse and neglect.

23 “(E) Programs that promote safe, family-
24 friendly physical environments for visitation and
25 exchange—

1 “(i) for court-ordered, supervised visi-
2 tation between children and abusing par-
3 ents; and

4 “(ii) to facilitate the safe exchange of
5 children for visits with noncustodial par-
6 ents in cases of domestic violence.

7 “(F) Innovative programs, activities, and
8 services that are aligned with the research pri-
9 orities identified under section 104(a)(4).

10 “(G) Projects to improve implementation
11 of best practices to assist medical professionals
12 in identifying, assessing, and responding to po-
13 tential abuse in infants, including regarding re-
14 ferrals to child protective services as appro-
15 priate and identifying injuries indicative of po-
16 tential abuse in infants, and to assess the out-
17 comes of such best practices.

18 “(d) GRANTS TO STATES TO IMPROVE AND COORDI-
19 NATE THEIR RESPONSE TO ENSURE THE SAFETY, PER-
20 MANENCY, AND WELL-BEING OF INFANTS AFFECTED BY
21 SUBSTANCE USE.—

22 “(1) PROGRAM AUTHORIZED.—The Secretary is
23 authorized to make grants to States for the purpose
24 of assisting child welfare agencies, social services
25 agencies, substance use disorder treatment agencies,

1 hospitals with labor and delivery units, medical staff,
2 public health and mental health agencies, and ma-
3 ternal and child health agencies to facilitate collabo-
4 ration in developing, updating, implementing, and
5 monitoring plans of safe care described in section
6 106(b)(2)(B)(iii). Section 112(a)(2) shall not apply
7 to the program authorized under this paragraph.

8 “(2) DISTRIBUTION OF FUNDS.—

9 “(A) RESERVATIONS.—Of the amounts
10 made available to carry out paragraph (1), the
11 Secretary shall reserve—

12 “(i) no more than 3 percent for the
13 purposes described in paragraph (7); and

14 “(ii) up to 3 percent for grants to In-
15 dian Tribes and Tribal organizations to ad-
16 dress the needs of infants born with, and
17 identified as being affected by, substance
18 abuse or withdrawal symptoms resulting
19 from prenatal drug exposure or a fetal al-
20 cohol spectrum disorder and their families
21 or caregivers, which to the extent prac-
22 ticable, shall be consistent with the uses of
23 funds described under paragraph (4).

24 “(B) ALLOTMENTS TO STATES AND TERRI-
25 TORIES.—The Secretary shall allot the amount

1 made available to carry out paragraph (1) that
2 remains after application of subparagraph (A)
3 to each State that applies for such a grant, in
4 an amount equal to the sum of—

5 “(i) \$500,000; and

6 “(ii) an amount that bears the same
7 relationship to any funds made available to
8 carry out paragraph (1) and remaining
9 after application of subparagraph (A), as
10 the number of live births in the State in
11 the previous calendar year bears to the
12 number of live births in all States in such
13 year.

14 “(C) RATABLE REDUCTION.—If the
15 amount made available to carry out paragraph
16 (1) is insufficient to satisfy the requirements of
17 subparagraph (B), the Secretary shall ratably
18 reduce each allotment to a State.

19 “(3) APPLICATION.—A State desiring a grant
20 under this subsection shall submit an application to
21 the Secretary at such time and in such manner as
22 the Secretary may require. Such application shall in-
23 clude—

24 “(A) a description of—

1 “(i) the impact of substance use dis-
2 order in such State, including with respect
3 to the substance or class of substances
4 with the highest incidence of abuse in the
5 previous year in such State, including—

6 “(I) the prevalence of substance
7 use disorder in such State;

8 “(II) the aggregate rate of births
9 in the State of infants affected by
10 substance abuse or withdrawal symp-
11 toms or a fetal alcohol spectrum dis-
12 order (as determined by hospitals, in-
13 surance claims, claims submitted to
14 the State Medicaid program, or other
15 records), if available and to the extent
16 practicable; and

17 “(III) the number of infants
18 identified, for whom a plan of safe
19 care was developed, and for whom a
20 referral was made for appropriate
21 services, as reported under section
22 106(d)(18);

23 “(ii) the challenges the State faces in
24 developing, implementing, and monitoring

1 plans of safe care in accordance with sec-
2 tion 106(b)(2)(B)(iii);

3 “(iii) the State’s lead agency for the
4 grant program and how that agency will
5 coordinate with relevant State entities and
6 programs, including the child welfare agen-
7 cy, the substance use disorder treatment
8 agency, hospitals with labor and delivery
9 units, health care providers, the public
10 health and mental health agencies, pro-
11 grams funded by the Substance Abuse and
12 Mental Health Services Administration
13 that provide substance use disorder treat-
14 ment for women, the State Medicaid pro-
15 gram, the State agency administering the
16 block grant program under title V of the
17 Social Security Act (42 U.S.C. 701 et
18 seq.), the State agency administering the
19 programs funded under part C of the Indi-
20 viduals with Disabilities Education Act (20
21 U.S.C. 1431 et seq.), the maternal, infant,
22 and early childhood home visiting program
23 under section 511 of the Social Security
24 Act (42 U.S.C. 711), the State judicial
25 system, and other agencies, as determined

1 by the Secretary, and Indian Tribes and
2 Tribal organizations, as appropriate, to im-
3 plement the activities under this para-
4 graph;

5 “(iv) how the State will monitor local
6 development and implementation of plans
7 of safe care, in accordance with section
8 106(b)(2)(B)(iii)(II), including how the
9 State will monitor to ensure plans of safe
10 care address differences between substance
11 use disorder and medically supervised sub-
12 stance use, including for the treatment of
13 a substance use disorder;

14 “(v) if applicable, how the State plans
15 to utilize funding authorized under part E
16 of title IV of the Social Security Act (42
17 U.S.C. 670 et seq.) to assist in carrying
18 out any plan of safe care, including such
19 funding authorized under section 471(e) of
20 such Act (as in effect on October 1, 2018)
21 for mental health and substance abuse pre-
22 vention and treatment services and in-
23 home parent skill-based programs and
24 funding authorized under such section
25 472(j) (as in effect on October 1, 2018)

1 for children with a parent in a licensed res-
2 idential family-based treatment facility for
3 substance abuse; and

4 “(vi) an assessment of the treatment
5 and other services and programs available
6 in the State to effectively carry out any
7 plan of safe care developed, including iden-
8 tification of needed treatment, and other
9 services and programs to ensure the well-
10 being of young children and their families
11 affected by substance use disorder, such as
12 programs carried out under part C of the
13 Individuals with Disabilities Education Act
14 (20 U.S.C. 1431 et seq.) and comprehen-
15 sive early childhood development services
16 and programs such as Head Start pro-
17 grams;

18 “(B) a description of how the State plans
19 to use funds for activities described in para-
20 graph (4) for the purposes of ensuring State
21 compliance with requirements under clauses (ii)
22 and (iii) of section 106(b)(2)(B); and

23 “(C) an assurance that the State will com-
24 ply with requirements to refer a child identified
25 as substance-exposed to early intervention serv-

1 ices as required pursuant to a grant under part
2 C of the Individuals with Disabilities Education
3 Act (20 U.S.C. 1431 et seq.).

4 “(4) USES OF FUNDS.—Funds awarded to a
5 State under this subsection may be used for the fol-
6 lowing activities, which may be carried out by the
7 State directly, or through grants or subgrants, con-
8 tracts, or cooperative agreements:

9 “(A) Improving State and local systems
10 with respect to the development and implemen-
11 tation of plans of safe care, which—

12 “(i) shall include parent and caregiver
13 engagement, as required under section
14 106(b)(2)(B)(iii)(I), regarding available
15 treatment and service options, which may
16 include resources available for pregnant,
17 perinatal, and postnatal women; and

18 “(ii) may include activities such as—

19 “(I) developing policies, proce-
20 dures, or protocols for the administra-
21 tion or development of evidence-based
22 and validated screening tools for in-
23 fants who may be affected by sub-
24 stance use withdrawal symptoms or a
25 fetal alcohol spectrum disorder and

1 pregnant, perinatal, and postnatal
2 women whose infants may be affected
3 by substance use withdrawal symp-
4 toms or a fetal alcohol spectrum dis-
5 order;

6 “(II) improving assessments used
7 to determine the needs of the infant
8 and family;

9 “(III) improving ongoing case
10 management services;

11 “(IV) improving access to treat-
12 ment services, which may be prior to
13 the pregnant woman’s delivery date;
14 and

15 “(V) keeping families safely to-
16 gether when it is in the best interest
17 of the child.

18 “(B) Developing policies, procedures, or
19 protocols in consultation and coordination with
20 health professionals, public and private health
21 facilities, and substance use disorder treatment
22 agencies to ensure that—

23 “(i) appropriate notification to child
24 protective services is made in a timely

1 manner, as required under section
2 106(b)(2)(B)(ii);

3 “(ii) a plan of safe care is in place, in
4 accordance with section 106(b)(2)(B)(iii),
5 before the infant is discharged from the
6 birth or health care facility; and

7 “(iii) such health and related agency
8 professionals are trained on how to follow
9 such protocols and are aware of the sup-
10 ports that may be provided under a plan of
11 safe care.

12 “(C) Training health professionals and
13 health system leaders, child welfare workers,
14 substance use disorder treatment agencies, and
15 other related professionals such as home vis-
16 iting agency staff and law enforcement in rel-
17 evant topics including—

18 “(i) State mandatory reporting laws
19 established under section 106(b)(2)(B)(i)
20 and the referral and process requirements
21 for notification to child protective services
22 when child abuse or neglect reporting is
23 not mandated;

1 “(ii) the co-occurrence of pregnancy
2 and substance use disorder, and implica-
3 tions of prenatal exposure;

4 “(iii) the clinical guidance about
5 treating substance use disorder in preg-
6 nant and postpartum women;

7 “(iv) appropriate screening and inter-
8 ventions for infants affected by substance
9 use disorder, withdrawal symptoms, or a
10 fetal alcohol spectrum disorder and the re-
11 quirements under section 106(b)(2)(B)(iii);
12 and

13 “(v) appropriate multigenerational
14 strategies to address the mental health
15 needs of the parent and child together.

16 “(D) Establishing partnerships, agree-
17 ments, or memoranda of understanding between
18 the lead agency and other entities (including
19 health professionals, health facilities, child wel-
20 fare professionals, juvenile and family court
21 judges, substance use and mental disorder
22 treatment programs, early childhood education
23 programs, maternal and child health and early
24 intervention professionals (including home vis-
25 iting providers), peer-to-peer recovery programs

1 such as parent mentoring programs, and hous-
2 ing agencies) to facilitate the implementation
3 of, and compliance with, section 106(b)(2) and
4 subparagraph (B) of this paragraph, in areas
5 which may include—

6 “(i) developing a comprehensive,
7 multi-disciplinary assessment and interven-
8 tion process for infants, pregnant women,
9 and their families who are affected by sub-
10 stance use disorder, withdrawal symptoms,
11 or a fetal alcohol spectrum disorder, that
12 includes meaningful engagement with and
13 takes into account the unique needs of
14 each family and addresses differences be-
15 tween medically supervised substance use,
16 including for the treatment of substance
17 use disorder, and substance use disorder;

18 “(ii) ensuring that treatment ap-
19 proaches for serving infants, pregnant
20 women, and perinatal and postnatal women
21 whose infants may be affected by sub-
22 stance use, withdrawal symptoms, or a
23 fetal alcohol spectrum disorder, are de-
24 signed to, where appropriate, keep infants

1 with their mothers during both inpatient
2 and outpatient treatment; and

3 “(iii) increasing access to all evidence-
4 based medication-assisted treatment ap-
5 proved by the Food and Drug Administra-
6 tion, behavioral therapy, and counseling
7 services for the treatment of substance use
8 disorders, as appropriate.

9 “(E) Developing and updating systems of
10 technology for improved data collection and
11 monitoring under section 106(b)(2)(B)(iii), in-
12 cluding existing electronic medical records, to
13 measure the outcomes achieved through the
14 plans of safe care, including monitoring systems
15 to meet the requirements of this Act and sub-
16 mission of performance measures.

17 “(5) REPORTING.—Each State that receives
18 funds under this subsection, for each year such
19 funds are received, shall submit a report to the Sec-
20 retary, disaggregated by geographic location, eco-
21 nomic status, and major racial and ethnic groups,
22 except that such disaggregation shall not be required
23 if the results would reveal personally identifiable in-
24 formation on, with respect to infants identified
25 under section 106(b)(2)(B)(ii)—

1 “(A) the number who experienced removal
2 associated with parental substance use;

3 “(B) the number who experienced removal
4 and subsequently are reunified with parents,
5 and the length of time between such removal
6 and reunification;

7 “(C) the number who are referred to com-
8 munity providers without a child protection
9 case;

10 “(D) the number who receive services while
11 in the care of their birth parents;

12 “(E) the number who receive post-reunifi-
13 cation services within 1 year after a reunifica-
14 tion has occurred; and

15 “(F) the number who experienced a return
16 to out-of-home care within 1 year after reunifi-
17 cation.

18 “(6) SECRETARY’S REPORT TO CONGRESS.—

19 The Secretary shall submit an annual report to the
20 Committee on Health, Education, Labor, and Pen-
21 sions and the Committee on Appropriations of the
22 Senate and the Committee on Education and Labor
23 and the Committee on Appropriations of the House
24 of Representatives that includes the information de-
25 scribed in paragraph (5) and recommendations or

1 observations on the challenges, successes, and les-
2 sons derived from implementation of the grant pro-
3 gram.

4 “(7) ASSISTING STATES’ IMPLEMENTATION.—
5 The Secretary shall use the amount reserved under
6 paragraph (2)(A)(i) to provide written guidance and
7 technical assistance to support States in complying
8 with and implementing this paragraph, which shall
9 include—

10 “(A) technical assistance, including pro-
11 grams of in-depth technical assistance, to addi-
12 tional States, territories, and Indian Tribes and
13 Tribal organizations in accordance with the
14 substance-exposed infant initiative developed by
15 the National Center on Substance Abuse and
16 Child Welfare;

17 “(B) guidance on the requirements of this
18 Act with respect to infants born with, and iden-
19 tified as being affected by, substance use or
20 withdrawal symptoms or fetal alcohol spectrum
21 disorder, as described in clauses (ii) and (iii) of
22 section 106(b)(2)(B), including by—

23 “(i) enhancing States’ understanding
24 of requirements and flexibilities under the
25 law, including by clarifying key terms;

1 “(ii) addressing State-identified chal-
2 lenges with developing, implementing, and
3 monitoring plans of safe care, including
4 those reported under paragraph (3)(A)(ii);

5 “(iii) disseminating best practices on
6 implementation of plans of safe care, on
7 such topics as differential response, col-
8 laboration and coordination, and identifica-
9 tion and delivery of services for different
10 populations, while recognizing needs of dif-
11 ferent populations and varying community
12 approaches across States; and

13 “(iv) helping States improve the long-
14 term safety and well-being of young chil-
15 dren and their families;

16 “(C) supporting State efforts to develop in-
17 formation technology systems to manage plans
18 of safe care; and

19 “(D) preparing the Secretary’s report to
20 Congress described in paragraph (6).

21 “(8) SUNSET.—The authority under this sub-
22 section shall sunset on September 30, 2023.

23 “(e) EVALUATION.—In making grants or entering
24 into contracts for projects under this section, the Sec-
25 retary shall require all such projects to report on the out-

1 comes of such activities. Funding for such evaluations
 2 shall be provided either as a stated percentage of a dem-
 3 onstration grant or as a separate grant or contract entered
 4 into by the Secretary for the purpose of evaluating a par-
 5 ticular demonstration project or group of projects. In the
 6 case of an evaluation performed by the recipient of a
 7 grant, the Secretary shall make available technical assist-
 8 ance for the evaluation, where needed, including the use
 9 of a rigorous application of scientific evaluation tech-
 10 niques.”.

11 **SEC. 105. GRANTS TO STATES FOR CHILD ABUSE OR NE-**
 12 **GLECT PREVENTION AND TREATMENT PRO-**
 13 **GRAMS.**

14 Section 106 of the Child Abuse Prevention and
 15 Treatment Act (42 U.S.C. 5106a) is amended—

16 (1) in subsection (a)—

17 (A) in the matter preceding paragraph

18 (1)—

19 (i) by striking “subsection (f)” and in-
 20 sserting “subsection (g)”; and

21 (ii) by striking “State in—” and in-
 22 sserting “State with respect to one or more
 23 of the following activities:”;

24 (B) by amending paragraph (1) to read as
 25 follows:

1 “(1) Maintaining and improving the intake, as-
2 sessment, screening, and investigation of reports of
3 child abuse or neglect, including support for rapid
4 response to investigations, with special attention to
5 cases involving children under the age of 5, and es-
6 pecially children under the age of 1.”;

7 (C) in paragraph (2)—

8 (i) in subparagraph (A)—

9 (I) by striking “creating and”
10 and inserting “Creating and”; and

11 (II) by inserting “, which may in-
12 clude such teams used by children’s
13 advocacy centers,” after “multidisci-
14 plinary teams”; and

15 (ii) in subparagraph (B)(ii), by strik-
16 ing the semicolon and inserting a period;

17 (D) by amending paragraph (3) to read as

18 follows:

19 “(3) Implementing and improving case manage-
20 ment approaches, including ongoing case monitoring,
21 and delivery of services and treatment provided to
22 children and their families to ensure safety and re-
23 spond to family needs, that include—

1 “(A) multidisciplinary approaches to as-
2 sessing family needs and connecting them with
3 services;

4 “(B) organizing treatment teams of com-
5 munity service providers that prevent and treat
6 child abuse and neglect, and improve child well-
7 being;

8 “(C) case-monitoring that can ensure
9 progress in child well-being; and

10 “(D) the use of differential response.”;

11 (E) by striking paragraphs (4), (5), and
12 (6) and inserting the following:

13 “(4)(A) Developing or enhancing data systems
14 to improve case management coordination and com-
15 munication between relevant agencies;

16 “(B) enhancing the general child protective sys-
17 tem by developing, improving, and implementing risk
18 and safety assessment tools and protocols, such as
19 tools and protocols that allow for the identification
20 of cases requiring rapid responses, systems of data
21 sharing with law enforcement, including the use of
22 differential response, and activities to reduce and
23 prevent bias;

24 “(C) developing and updating systems of tech-
25 nology that support the program and track reports

1 of child abuse and neglect from intake through final
2 disposition and allow for interstate and intrastate in-
3 formation exchange; and

4 “(D) real-time case monitoring for caseworkers
5 at the local agency level, and State agency level to
6 track assessments, service referrals, follow-up, case
7 reviews, and progress toward case plan goals.

8 “(5) Developing, strengthening, and facilitating
9 training for professionals and volunteers engaged in
10 the prevention, intervention, and treatment of child
11 abuse and neglect including training on at least one
12 of the following—

13 “(A) the legal duties of such individuals;

14 “(B) personal safety training for case
15 workers;

16 “(C) early childhood, child, and adolescent
17 development and the impact of child abuse and
18 neglect, including long-term impacts of adverse
19 childhood experiences;

20 “(D) improving coordination among child
21 protective service agencies and health care
22 agencies, entities providing health care (includ-
23 ing mental health and substance use disorder
24 services), and community resources, for pur-

1 poses of conducting evaluations related to sub-
2 stantiated cases of child abuse or neglect;

3 “(E) improving screening, forensic diag-
4 nosis, and health and developmental evalua-
5 tions;

6 “(F) addressing the unique needs of chil-
7 dren with disabilities, including promoting
8 interagency collaboration;

9 “(G) the placement of children with kin,
10 and the unique needs and strategies as related
11 to children in such placements;

12 “(H) responsive, family-oriented ap-
13 proaches to prevention, identification, interven-
14 tion, and treatment of child abuse and neglect;

15 “(I) ensuring child safety;

16 “(J) the links between child abuse and ne-
17 glect and domestic violence, and approaches to
18 working with families with mental health needs
19 or substance use disorder; and

20 “(K) coordinating with other services and
21 agencies, as applicable, to address family and
22 child needs, including trauma.”;

23 (F) by redesignating paragraphs (7) and
24 (8) as paragraphs (6) and (7), respectively;

25 (G) in paragraph (6), as so redesignated—

1 (i) by striking “improving” and in-
2 serting “Improving”;

3 (ii) by striking “the skills, qualifica-
4 tions, and availability of individuals pro-
5 viding services to children and families,
6 and the supervisors of such individuals,
7 through the child protection system, in-
8 cluding improvements in”; and

9 (iii) by striking the semicolon and in-
10 serting “, which may include efforts to ad-
11 dress the effects of indirect trauma expo-
12 sure for child welfare workers.”;

13 (H) in paragraph (7), as so redesignated—

14 (i) by striking “developing,” and in-
15 serting “Developing,”; and

16 (ii) by striking the semicolon and in-
17 serting “, which may include improving
18 public awareness and understanding relat-
19 ing to the role and responsibilities of the
20 child protection system and the nature and
21 basis for reporting suspected incidents of
22 child abuse and neglect.”; and

23 (I) by striking paragraphs (9) through
24 (14) and inserting the following:

1 “(8) Collaborating with other agencies in the
2 community, county, or State and coordinating serv-
3 ices to promote a system of care focused on both
4 prevention and treatment, such as by—

5 “(A) developing and enhancing the capac-
6 ity of community-based programs to integrate
7 shared leadership strategies between parents
8 and professionals to prevent and treat child
9 abuse and neglect at the community level; or

10 “(B) supporting and enhancing inter-
11 agency collaboration between the child protec-
12 tion system, public health agencies, education
13 systems, domestic violence systems, and the ju-
14 venile justice system for improved delivery of
15 services and treatment, such as models of co-lo-
16 cating service providers, which may include—

17 “(i) methods for continuity of treat-
18 ment plan and services as children transi-
19 tion between systems;

20 “(ii) addressing the health needs, in-
21 cluding mental health needs, of children
22 identified as victims of child abuse or ne-
23 glect, including supporting prompt, com-
24 prehensive health and developmental eval-
25 uations for children who are the subject of

1 substantiated child maltreatment reports;
2 or

3 “(iii) the provision of services that as-
4 sist children exposed to domestic violence,
5 and that also support the caregiving role of
6 their nonabusing parents.”;

7 (2) in subsection (b)—

8 (A) in paragraph (1)—

9 (i) in subparagraph (A), by striking
10 “areas of the child protective services sys-
11 tem” and inserting “ways in which the
12 amounts received under the grant will be
13 used to improve and strengthen the child
14 protective services system through the ac-
15 tivities”; and

16 (ii) by amending subparagraphs (B)
17 and (C) to read as follows:

18 “(B) DURATION OF PLAN.—Each State
19 plan shall—

20 “(i) be submitted not less frequently
21 than every 5 years, in coordination with
22 the State plan submitted under part B of
23 title IV of the Social Security Act; and

24 “(ii) be periodically reviewed and re-
25 vised by the State, as necessary to reflect

1 any substantive changes to State law or
2 regulations related to the prevention of
3 child abuse and neglect that may affect the
4 eligibility of the State under this section,
5 or if there are significant changes from the
6 State application in the State’s funding of
7 strategies and programs supported under
8 this section.

9 “(C) PUBLIC COMMENT.—Each State shall
10 consult widely with public and private organiza-
11 tions in developing the plan, make the plan
12 public by electronic means in an easily acces-
13 sible format, and provide all interested members
14 of the public at least 30 days to submit com-
15 ments on the plan.”;

16 (B) in paragraph (2)—

17 (i) in the matter preceding subpara-
18 graph (A)—

19 (I) by inserting “be developed, as
20 appropriate, in collaboration with local
21 programs funded under title II and
22 with families affected by child abuse
23 and neglect, and” after “shall”; and

24 (II) by striking “achieve the ob-
25 jectives of this title” and inserting

1 “strengthen families and reduce inci-
2 dents of and prevent child abuse and
3 neglect”;

4 (ii) in subparagraph (A), by inserting
5 “and takes into account prevention services
6 across State agencies in order to improve
7 coordination of efforts to prevent and re-
8 duce child abuse and neglect” before the
9 semicolon;

10 (iii) in subparagraph (B)—

11 (I) by amending clause (i) to
12 read as follows:

13 “(i) provisions or procedures for indi-
14 viduals to report known and suspected in-
15 stances of child abuse and neglect directly
16 to a State child protection agency or to a
17 law enforcement agency, as applicable
18 under State law, including a State law for
19 mandatory reporting by individuals re-
20 quired to report such instances, including,
21 as defined by the State—

22 “(I) health professionals;

23 “(II) school and child care per-
24 sonnel;

1 “(III) law enforcement officials;
2 and

3 “(IV) other individuals, as the
4 applicable State law or statewide pro-
5 gram may require;”;

6 (II) by moving the margins of
7 subclauses (I) and (II) of clause (iii)
8 2 ems to the right;

9 (III) in clause (vi), by inserting
10 “, which may include placements with
11 caregivers who are kin” before the
12 semicolon;

13 (IV) by striking clauses (x) and
14 (xx);

15 (V) by redesignating clauses (xi)
16 through (xix) as clauses (x) through
17 (xviii), respectively; and

18 (VI) by redesignating clauses
19 (xxi) through (xxv) as clauses (xix)
20 through (xxiii), respectively;
21 (iv) in subparagraph (D)—

22 (I) in clause (i), by inserting “,
23 and how such services will be strategi-
24 cally coordinated with relevant agen-
25 cies to provide a continuum of preven-

1 tion services and be” after “refer-
2 rals”;

3 (II) in clause (ii), by inserting
4 “and retention activities” after “train-
5 ing”;

6 (III) in clause (iii), by inserting
7 “, including for purposes of making
8 such individuals aware of these re-
9 quirements” before the semicolon;

10 (IV) in clause (v)—

11 (aa) by inserting “the
12 State’s efforts to improve” before
13 “policies”;

14 (bb) by striking “substance
15 abuse treatment agencies, and
16 other agencies” and inserting
17 “substance abuse treatment
18 agencies, other agencies, and kin-
19 ship navigators”; and

20 (cc) by striking “; and” and
21 inserting a semicolon;

22 (V) in clause (vi), by striking the
23 semicolon and inserting “, to improve
24 outcomes for children and families;
25 and”; and

1 (VI) by adding at the end the fol-
2 lowing:

3 “(vii) the State’s policies and proce-
4 dures regarding public disclosure of the
5 findings or information about the case of
6 child abuse or neglect that has resulted in
7 a child fatality or near fatality, which shall
8 provide for exceptions to the release of
9 such findings or information in order to
10 ensure the safety and well-being of the
11 child, or when the release of such informa-
12 tion would jeopardize a criminal investiga-
13 tion;” and

14 (v) by striking the flush text that fol-
15 lows subparagraph (G); and
16 (C) in paragraph (3)—

17 (i) in the heading, by striking “LIMI-
18 TATION” and inserting “LIMITATIONS”;

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

22 “(B) CERTAIN IDENTIFYING INFORMA-
23 TION.—With regard to clauses (vi) and (vii) of
24 paragraph (2)(B)”;

1 (iii) by inserting before subparagraph
2 (B), as added by clause (ii), the following:

3 “(A) IN GENERAL.—Nothing in paragraph
4 (2)(B) shall be construed to limit a State’s au-
5 thority to determine State policies relating to
6 public access to court proceedings to determine
7 child abuse and neglect, except that such poli-
8 cies shall, at a minimum, ensure the safety and
9 well-being of the child, parents, and families.”;
10 and

11 (iv) by adding at the end the fol-
12 lowing:

13 “(C) MANDATED REPORTERS IN CERTAIN
14 STATES.—With respect to a State in which
15 State law requires all of the individuals to re-
16 port known or suspected instances of child
17 abuse and neglect directly to a State child pro-
18 tection agency or to a law enforcement agency,
19 the requirement under paragraph (2)(B)(i)
20 shall not be construed to require the State to
21 define the classes of individuals described in
22 subclauses (I) through (IV) of such para-
23 graph.”;

24 (3) in subsection (c)—

25 (A) in paragraph (1)—

1 (i) in subparagraph (A)—

2 (I) by striking “Except as pro-
3 vided in subparagraph (B), each” and
4 inserting “Each”; and

5 (II) by striking “not less than 3
6 citizen review panels” and inserting
7 “at least 1 citizen review panel”; and

8 (ii) by amending subparagraph (B) to
9 read as follows:

10 “(B) EXCEPTION.—A State may designate
11 a panel for purposes of this subsection, com-
12 prised of one or more existing entities estab-
13 lished under State or Federal law, such as child
14 fatality panels, or foster care review panels, or
15 State task forces established under section 107,
16 if such entities have the capacity to satisfy the
17 requirements of paragraph (3) and the State
18 ensures that such entities will satisfy such re-
19 quirements.”;

20 (B) by striking paragraph (3);

21 (C) by redesignating paragraphs (4)
22 through (6) as paragraphs (3) through (5), re-
23 spectively;

24 (D) in paragraph (4), as so redesignated—

1 (i) by redesignating subparagraphs
2 (A) and (B) as subparagraphs (B) and
3 (C), respectively;

4 (ii) in subparagraph (B), as so redesi-
5 gnated, by striking “paragraph (4)” and
6 inserting “paragraph (3)”; and

7 (iii) by inserting before subparagraph
8 (B), as so redesignated, the following:

9 “(A) shall develop a memorandum of un-
10 derstanding with each panel, clearly outlining
11 the panel’s roles and responsibilities, and identi-
12 fying any support from the State;” and

13 (E) in paragraph (5), as so redesignated—

14 (i) by inserting “which may be carried
15 out collectively by a combination of such
16 panels,” before “on an annual basis”;

17 (ii) by striking “whether or”; and

18 (iii) by inserting “, which may include
19 providing examples of efforts to implement
20 citizen review panel recommendations” be-
21 fore the period of the second sentence;

22 (4) in subsection (d)—

23 (A) in paragraph (1), by inserting “,
24 disaggregated, where available, by demographic
25 characteristics such as age, sex, race and eth-

1 nicity, disability, caregiver risk factors, care-
2 giver relationship, living arrangement, and rela-
3 tion of victim to their perpetrator” before the
4 period;

5 (B) in paragraph (5), by striking “ne-
6 glect.” and inserting “neglect, including—

7 “(A) the number of child deaths due to
8 child abuse and neglect from separate reporting
9 sources within the State, including information
10 from the State child welfare agency and the
11 State child death review program that—

12 “(i) is compiled by the State welfare
13 agency for submission; and

14 “(ii) considers State data, including
15 vital statistics death records, State and
16 local medical examiner and coroner office
17 records, and uniform crime reports from
18 local law enforcement; and

19 “(B) information about the circumstances
20 under which a child death occurred due to
21 abuse and neglect, including the cause of the
22 death, whether the child was referred to the
23 State child welfare agency, the determination
24 made by the child welfare agency, and the per-
25 petrator’s previous maltreatment of children

1 and the sources used to provide such informa-
2 tion.”;

3 (C) in paragraph (13)—

4 (i) by inserting “and recommenda-
5 tions” after “the activities”; and

6 (ii) by striking “subsection (c)(6)”
7 and inserting “subsection (c)(5)”;

8 (D) in paragraph (16), by striking “sub-
9 section (b)(2)(B)(xxi)” and inserting “sub-
10 section (b)(2)(B)(xix)”;

11 (E) in paragraph (17), by striking “sub-
12 section (b)(2)(B)(xxiv)” and inserting “sub-
13 section (b)(2)(B)(xxii)”;

14 (5) by redesignating subsections (e) and (f) as
15 subsections (f) and (g), respectively;

16 (6) by inserting after subsection (d) the fol-
17 lowing:

18 “(e) ASSISTING STATES IN IMPLEMENTATION.—The
19 Secretary shall provide technical assistance to support
20 States in reporting the information required under sub-
21 section (d)(5).”;

22 (7) in subsection (f), as so redesignated, by
23 striking “the Congress” and inserting “the Com-
24 mittee on Health, Education, Labor, and Pensions

1 of the Senate and the Committee on Education and
2 Labor of the House of Representatives”; and

3 (8) by adding at the end the following:

4 “(h) ANNUAL REPORT.—A State that receives funds
5 under subsection (a) shall annually prepare and submit
6 to the Secretary a report describing the manner in which
7 funds provided under this Act, alone or in combination
8 with other Federal funds, were used to address the pur-
9 poses and achieve the objectives of section 106, includ-
10 ing—

11 “(1) a description of how the State used such
12 funds to improve the child protective system related
13 to—

14 “(A) effective collaborative and coordina-
15 tion strategies among child protective services
16 and social services, legal, health care (including
17 mental health and substance use disorder serv-
18 ices), domestic violence services, education
19 agencies, and community-based organizations
20 that contribute to improvements of the overall
21 well-being of children and families; and

22 “(B) capacity-building efforts to support
23 identification and improvement of responses to,
24 child maltreatment; and

1 “(2) how the State collaborated with commu-
2 nity-based prevention organizations to reduce bar-
3 riers to, and improve the effectiveness of, programs
4 related to child abuse and neglect.”.

5 **SEC. 106. GRANTS TO STATES FOR PROGRAMS RELATING**
6 **TO THE INVESTIGATION AND PROSECUTION**
7 **OF CHILD ABUSE AND NEGLECT CASES.**

8 Section 107 of the Child Abuse Prevention and
9 Treatment Act (42 U.S.C. 5106e) is amended—

10 (1) in subsection (a)—

11 (A) by striking “the assessment and inves-
12 tigation” each place it appears and inserting
13 “the assessment, investigation, and prosecu-
14 tion”;

15 (B) in paragraph (1)—

16 (i) by striking “and exploitation,” and
17 inserting “, exploitation, and child sex-traf-
18 ficking,”; and

19 (ii) by inserting “, including through
20 a child abuse investigative multidisciplinary
21 review team” before the semicolon;

22 (C) in paragraph (2), by adding “and”
23 after the semicolon;

24 (D) by striking paragraph (3);

1 (E) by redesignating paragraph (4) as
2 paragraph (3); and

3 (F) in paragraph (3), as so redesignated,
4 by inserting “, or other vulnerable populations,”
5 after “health-related problems”;

6 (2) in subsection (c)(1)—

7 (A) in subparagraph (I), by striking “and”
8 at the end;

9 (B) in subparagraph (J), by striking the
10 period and inserting “; and”; and

11 (C) by adding at the end the following:

12 “(K) individuals experienced in working
13 with underserved or overrepresented groups in
14 the child welfare system.”; and

15 (3) in subsection (d)(1), by striking “and ex-
16 ploitation” and inserting “, exploitation, and child
17 sex-trafficking”; and

18 (4) in subsection (e)(1)—

19 (A) in subparagraph (A), by striking “and
20 exploitation” and inserting “, exploitation, and
21 child sex-trafficking”;

22 (B) in subparagraph (B), by striking “;
23 and” at the end and inserting a semicolon;

24 (C) in subparagraph (C)—

1 (i) by striking “and exploitation” and
2 inserting “, exploitation, and child sex-traf-
3 ficking”; and

4 (ii) by striking the period and insert-
5 ing “; and”; and

6 (D) by adding at the end the following:

7 “(D) improving coordination among agen-
8 cies regarding reports of child abuse and ne-
9 glect to ensure both law enforcement and child
10 protective services agencies have ready access to
11 full information regarding past reports, which
12 may be done in coordination with other States
13 or geographic regions.”.

14 **SEC. 107. MISCELLANEOUS REQUIREMENTS RELATING TO**
15 **ASSISTANCE.**

16 Section 108 of the Child Abuse Prevention and
17 Treatment Act (42 U.S.C. 5106d) is amended by striking
18 subsection (e).

19 **SEC. 108. REPORTS.**

20 Section 110 of the Child Abuse Prevention and
21 Treatment Act (42 U.S.C. 5106f) is amended—

22 (1) in subsection (a), by striking “CAPTA Re-
23 authorization Act of 2010” and inserting “CAPTA
24 Reauthorization Act of 2019”;

25 (2) in subsection (b)—

1 (A) in the heading, by striking “EFFEC-
2 TIVENESS OF STATE PROGRAMS” and inserting
3 “ACTIVITIES”; and

4 (B) by striking “evaluating the effective-
5 ness of programs receiving assistance under
6 section 106 in achieving the” and inserting “on
7 activities of technical assistance for programs
8 that support State efforts to meet the needs
9 and”; and

10 (3) by striking subsections (c) and (d) and in-
11 serting the following:

12 “(c) REPORT ON STATE MANDATORY REPORTING
13 LAWS.—Not later than 4 years after the date of enact-
14 ment of the CAPTA Reauthorization Act of 2019, the Sec-
15 retary shall submit to the Committee on Health, Edu-
16 cation, Labor, and Pensions of the Senate and the Com-
17 mittee on Education and Labor of the House of Rep-
18 resentatives a report that contains—

19 “(1) information on—

20 “(A) training supported by this Act for
21 mandatory reporters of child abuse or neglect;
22 and

23 “(B) State efforts to improve reporting on,
24 and responding to reports of, child abuse or ne-
25 glect; and

1 “(2) data regarding any changes in the rate of
2 substantiated child abuse reports and changes in the
3 rate of child abuse fatalities since the date of enact-
4 ment of the CAPTA Reauthorization Act of 2019.

5 “(d) REPORT RELATING TO INJURIES INDICATING
6 THE PRESENCE OF CHILD ABUSE.—Not later than 2
7 years after the date of enactment of the CAPTA Reau-
8 thorization Act of 2019, the Secretary shall submit to the
9 Committee on Health, Education, Labor, and Pensions of
10 the Senate and the Committee on Education and Labor
11 of the House of Representatives a report that contains—

12 “(1) information on best practices developed by
13 medical institutions and other multidisciplinary part-
14 ners to identify and appropriately respond to injuries
15 indicating the presence of potential physical abuse in
16 children, including—

17 “(A) the identification and assessment of
18 such injuries by health care professionals and
19 appropriate child protective services referral
20 and notification processes; and

21 “(B) an identification of effective programs
22 replicating best practices, and barriers or chal-
23 lenges to implementing programs; and

1 “(2) data on any outcomes associated with the
2 practices described in paragraph (1), including sub-
3 sequent revictimization and child fatalities.

4 “(e) REPORT RELATING TO CHILD ABUSE AND NE-
5 GLECT IN INDIAN TRIBAL COMMUNITIES.—Not later than
6 2 years after the date of enactment of the CAPTA Reau-
7 thorization Act of 2019, the Comptroller General of the
8 United States, in consultation with Indian Tribes from
9 each of the 12 Bureau of Indian Affairs Regions, shall
10 submit a report to the Committee on Health, Education,
11 Labor, and Pensions of the Senate and the Committee on
12 Education and Labor of the House of Representatives that
13 contains—

14 “(1) information about Indian Tribes and Trib-
15 al Organizations providing child abuse and neglect
16 prevention activities, including types of programming
17 and number of tribes providing services;

18 “(2) promising practices used by tribes for child
19 abuse and neglect prevention;

20 “(3) information about the child abuse and ne-
21 glect prevention activities Indian Tribes are pro-
22 viding with Tribal, State, and Federal funds;

23 “(4) ways to support prevention efforts regard-
24 ing child abuse and neglect of American Indian and

1 Alaska Native children, such as through the chil-
2 dren’s trust fund model;

3 “(5) an assessment of Federal agency collabora-
4 tion and technical assistance efforts to address child
5 abuse and neglect prevention and treatment of
6 American Indian and Alaska Native children;

7 “(6) an examination of access to child abuse
8 and neglect prevention research and demonstration
9 grants by Indian tribes under this Act; and

10 “(7) an examination of Federal child abuse and
11 neglect data systems to identify what Tribal data is
12 being submitted to the Department of Health and
13 Human Services, any barriers to the submission of
14 such data, and recommendations on improving the
15 submission of such data.”.

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

17 Section 112(a)(1) of the Child Abuse Prevention and
18 Treatment Act (42 U.S.C. 5106h(a)(1)) is amended to
19 read as follows:

20 “(1) GENERAL AUTHORIZATION.—There are
21 authorized to be appropriated to carry out this title
22 such sums as may be necessary for each of fiscal
23 years 2021 through 2026.”.

1 **TITLE II—COMMUNITY-BASED**
2 **GRANTS FOR THE PREVEN-**
3 **TION OF CHILD ABUSE AND**
4 **NEGLECT**

5 **SEC. 201. PURPOSE AND AUTHORITY.**

6 Section 201 of the Child Abuse Prevention and
7 Treatment Act (42 U.S.C. 5116) is amended—

8 (1) in subsection (a)—

9 (A) in paragraph (1)—

10 (i) by inserting “State and” after “to
11 support”; and

12 (ii) by inserting “statewide and local
13 networks of” after “coordinate”; and

14 (B) in paragraph (2), by striking “foster
15 an understanding, appreciation, and knowledge
16 of diverse populations” and inserting “support
17 local programs in increasing access for diverse
18 populations to programs and activities”; and

19 (2) in subsection (b)—

20 (A) by striking paragraph (2);

21 (B) by redesignating paragraphs (3)
22 through (5) as paragraphs (4) through (6), re-
23 spectively;

24 (C) in paragraph (1)—

- 1 (i) in subparagraph (C), by inserting
2 “healthy relationships and” before “par-
3 enting skills”;
- 4 (ii) in subparagraph (E), by striking
5 “including access to such resources and
6 opportunities for unaccompanied homeless
7 youth;” and inserting “such as providing
8 referrals to early health and developmental
9 services, including access to such resources
10 and opportunities for homeless families
11 and those at risk of homelessness; and”;
- 12 (iii) by striking subparagraph (H);
- 13 (iv) by redesignating subparagraph
14 (G) as paragraph (3) and adjusting the
15 margin accordingly; and
- 16 (v) in the matter preceding subpara-
17 graph (A)—
- 18 (I) by inserting “statewide and
19 local networks of” after “enhancing”;
20 and
- 21 (II) by striking “that—” and in-
22 serting the following: “in order to pro-
23 vide a continuum of services to chil-
24 dren and families;

1 “(2) supporting local programs, which may in-
2 clude capacity building activities such as technical
3 assistance, training, and professional development to
4 provide community-based and prevention-focused
5 programs and activities designed to strengthen and
6 support families to prevent child abuse and neglect
7 that help families build protective factors linked to
8 the prevention of child abuse and neglect that—”;

9 (D) in paragraph (3), as so redesignated,
10 by striking “demonstrate a commitment to in-
11 volving parents in the planning and program
12 implementation of the lead agency and entities
13 carrying out” and inserting “supporting the
14 meaningful involvement of parents in the plan-
15 ning, program implementation, and evaluation
16 of the lead entity and”;

17 (E) in paragraph (4), as so redesignated,
18 by striking “specific community-based” and all
19 that follows through “section 205(a)(3)” and
20 inserting “core child abuse and neglect preven-
21 tion services described in section 205(a)(3) and
22 the services identified by the inventory required
23 under section 204(3)”;

24 (F) in paragraph (5), as so redesignated—

1 (i) by striking “funds for the” and in-
2 sserting “Federal, State, local, and private
3 funds, to carry out the purposes of this
4 title, which may include”; and

5 (ii) by striking “reporting and evalua-
6 tion costs for establishing, operating, or
7 expanding” and inserting “such as data
8 systems to facilitate statewide monitoring,
9 reporting, and evaluation costs for”; and

10 (G) in paragraph (6), as so redesignated—

11 (i) by inserting “, which may include
12 activities to increase public awareness and
13 education, and developing comprehensive
14 outreach strategies to engage diverse, un-
15 derserved, and at-risk populations,” after
16 “information activities”; and

17 (ii) by striking “and the promotion of
18 child abuse and neglect prevention activi-
19 ties”.

20 **SEC. 202. ELIGIBILITY.**

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

23 (1) in paragraph (1)—

24 (A) in subparagraph (A)—

1 (i) by inserting “, taking into consid-
2 eration the capacity and expertise of eligi-
3 ble entities,” after “Governor of the
4 State”; and

5 (ii) by inserting “statewide and local
6 networks of” before “community-based”;

7 (B) in subparagraph (B)—

8 (i) by striking “who are consumers”
9 and inserting “who are or who have been
10 consumers”;

11 (ii) by striking “applicant agency”
12 and inserting “lead entity”; and

13 (iii) by adding “and” after the semi-
14 colon;

15 (C) in subparagraph (C)—

16 (i) by inserting “local,” after
17 “State,”; and

18 (ii) by striking “; and” and inserting
19 a semicolon; and

20 (D) by striking subparagraph (D);

21 (2) in paragraph (2)—

22 (A) in subparagraph (A), by striking
23 “composed of” and all that follows through
24 “children with disabilities” and inserting “car-

1 ried out by local, collaborative, and public-private
2 vate partnerships”; and

3 (B) in subparagraph (C), by inserting
4 “local,” after “State,”; and

5 (3) in paragraph (3)—

6 (A) in subparagraph (A), by striking “pa-
7 rental participation in the development, oper-
8 ation, and oversight of the” and inserting “the
9 meaningful involvement of parents in the devel-
10 opment, operation, evaluation, and oversight of
11 the State and local efforts to support”;

12 (B) in subparagraph (B)—

13 (i) by inserting “relevant” before
14 “State and community-based”; and

15 (ii) by striking “the community-
16 based” and inserting “community-based”;

17 (C) in subparagraph (C)—

18 (i) by striking “community-based and
19 prevention-focused programs and activities
20 designed to strengthen and support fami-
21 lies to prevent child abuse and neglect”
22 and inserting “local programs”; and

23 (ii) by striking “; and” and inserting
24 a semicolon;

25 (D) in subparagraph (D)—

1 (i) by striking “, parents with disabil-
2 ities,” and inserting “or parents with dis-
3 abilities, and members of underserved or
4 overrepresented groups in the child welfare
5 system,”; and

6 (ii) by striking the period and insert-
7 ing “; and”; and

8 (E) by adding at the end the following:

9 “(E) will take into consideration barriers
10 to access to community-based and prevention-
11 focused programs and activities designed to
12 strengthen and support families to prevent child
13 abuse and neglect, including for populations de-
14 scribed in section 204(7)(A)(iii) and gaps in
15 unmet need identified in the inventory described
16 in section 204(3) when distributing funds to
17 local programs for use in accordance with sec-
18 tion 205(a).”.

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

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

22 (1) in subsection (a), by adding at the end the
23 following: “In any fiscal year for which the amount
24 appropriated under section 209 exceeds the amount
25 appropriated under such section for fiscal year 2019

1 by more than \$2,000,000, the Secretary may in-
2 crease the reservation described in this subsection to
3 up to 5 percent of the amount appropriated under
4 section 210 for the fiscal year for the purpose de-
5 scribed in the preceding sentence.”; and

6 (2) in subsection (b)(1)(A), by striking
7 “\$175,000” and inserting “\$200,000”.

8 **SEC. 204. APPLICATION.**

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

11 (1) in the matter preceding paragraph (1), by
12 striking “the State” and inserting “the lead entity”;

13 (2) in paragraph (1), by striking “which meets
14 the requirements of section 202”;

15 (3) in paragraph (2), by striking “community-
16 based child abuse and neglect prevention programs”
17 and inserting “such services”;

18 (4) in paragraph (3), by inserting “designed to
19 strengthen and support families” after “programs
20 and activities”;

21 (5) in paragraph (5), by striking “start up”
22 and inserting “start-up”;

23 (6) by amending paragraph (6) to read as fol-
24 lows:

1 “(6) a description of the lead entity’s capacity
2 to ensure the meaningful involvement of family advo-
3 cates, kinship caregivers, adult former victims of
4 child abuse or neglect, and parents who are, or who
5 have been, consumers of preventive supports, in the
6 planning, implementation, and evaluation of the pro-
7 grams and policy decisions;”;

8 (7) by amending paragraph (7) to read as fol-
9 lows:

10 “(7) a description of the criteria that the lead
11 entity will use to—

12 “(A) select and fund local programs, and
13 how the lead entity will take into consideration
14 the local program’s ability to—

15 “(i) collaborate across a broad range
16 of services and initiatives and engage in
17 long-term and strategic planning for, com-
18 munity-based and prevention-focused pro-
19 grams and activities designed to strength-
20 en and support families to prevent child
21 abuse and neglect;

22 “(ii) meaningfully involve parents in
23 the development, implementation, over-
24 sight, and evaluation of services; and

1 “(iii) reduce barriers to access to com-
2 munity-based and prevention-focused pro-
3 grams and activities designed to strength-
4 en and support families to prevent child
5 abuse and neglect, including for diverse,
6 underserved, and at-risk populations; or

7 “(B) develop or provide community-based
8 and prevention-focused programs and activities
9 designed to strengthen and support families to
10 prevent child abuse and neglect, and provide a
11 description of how such activities are evidence-
12 based or evidence-informed;”;

13 (8) in paragraph (8)—

14 (A) by striking “entity and the community-
15 based and prevention-focused programs de-
16 signed to strengthen and support families to
17 prevent child abuse and neglect” and inserting
18 “lead entity and local programs”;

19 (B) by striking “homeless families and
20 those at risk of homelessness, unaccompanied
21 homeless youth” and inserting “victims of do-
22 mestic violence, homeless families and those at
23 risk of homelessness, families experiencing trau-
24 ma”; and

1 (C) by inserting “, including underserved
2 or overrepresented groups in the child welfare
3 system” before the semicolon;

4 (9) in paragraph (9), by striking “community-
5 based and prevention-focused programs and activi-
6 ties designed to strengthen and support families to
7 prevent child abuse and neglect” and inserting “local
8 programs”;

9 (10) in paragraph (10), by striking “applicant
10 entity’s activities and those of the network and its
11 members (where appropriate) will be evaluated” and
12 inserting “lead entity’s activities and local programs
13 will be evaluated, including in accordance with sec-
14 tion 206”;

15 (11) in paragraph (11)—

16 (A) by striking “applicant entity” and in-
17 serting “lead entity”; and

18 (B) by inserting “, including how the lead
19 entity will promote and consider improving ac-
20 cess among diverse, underserved, and at-risk
21 populations” before the semicolon; and

22 (12) in paragraph (12), by striking “applicant
23 entity” and inserting “lead entity”.

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

2 Section 205 of the Child Abuse Prevention and
3 Treatment Act (42 U.S.C. 5116e) is amended—

4 (1) in subsection (a)—

5 (A) in the matter preceding paragraph
6 (1)—

7 (i) by striking “Grants made” and in-
8 serting “Grants or contracts made by the
9 lead entity”; and

10 (ii) by striking “that—” and inserting
11 “, which may include—”;

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

14 “(1) assessing community assets and needs
15 through a planning process that—

16 “(A) involves other community-based orga-
17 nizations or agencies that have already per-
18 formed a needs assessment;

19 “(B) includes the meaningful involvement
20 of parents; and

21 “(C) uses information and expertise from
22 local public agencies, local nonprofit organiza-
23 tions, and private sector representatives in
24 meaningful roles;”;

25 (C) in paragraph (2), by striking “de-
26 velop” and inserting “developing”;

- 1 (D) in paragraph (3)—
- 2 (i) in subparagraph (A)—
- 3 (I) in the matter preceding clause
- 4 (i), by striking “provide for” and in-
- 5 serting “providing”; and
- 6 (II) in clause (i), by striking
- 7 “mutual support and” and inserting
- 8 “which may include programs and
- 9 services that improve knowledge of
- 10 healthy child development, parental
- 11 resilience, mutual support, and”; and
- 12 (ii) in subparagraph (B)—
- 13 (I) in the matter preceding clause
- 14 (i), by striking “provide access to op-
- 15 tional services” and inserting “con-
- 16 necting individuals and families to ad-
- 17 ditional services”;
- 18 (II) in clause (ii), by striking
- 19 “and intervention” and inserting “,
- 20 such as Head Start, including early
- 21 Head Start, and early intervention”;
- 22 (III) by redesignating clauses
- 23 (iii) through (ix) as clauses (iv)
- 24 through (x), respectively;

1 (IV) by inserting after clause (ii)
2 the following:

3 “(iii) nutrition programs, which may
4 include the special supplemental nutrition
5 program for women, infants, and children
6 established by section 17 of the Child Nu-
7 trition Act of 1966 (42 U.S.C. 1786) and
8 the supplemental nutrition assistance pro-
9 gram under the Food and Nutrition Act of
10 2008 (7 U.S.C. 2011 et seq.);”;

11 (V) in clause (vi), as so redesign-
12 nated, by striking “services, such as
13 academic tutoring, literacy training,
14 and General Educational Degree serv-
15 ices” and inserting “and workforce
16 development programs, including
17 adult education and literacy training
18 and academic tutoring”; and

19 (VI) in clause (x), as so redesign-
20 nated, by striking “service programs
21 that provide services and treatment to
22 children and their non-abusing care-
23 givers” and inserting “services”;

24 (E) in paragraph (4)—

1 (i) by striking “develop leadership
2 roles for the” and inserting “developing
3 and maintaining”;

4 (ii) by inserting “, and, as applicable,
5 kinship caregivers,” after “parents”; and

6 (iii) by striking “the programs” and
7 inserting “programs”;

8 (F) in paragraph (5), by striking “pro-
9 vide” and inserting “providing”; and

10 (G) in paragraph (6), by striking “partici-
11 pate” and inserting “participating”; and

12 (2) in subsection (b), by striking “programs..”
13 and inserting “programs.”.

14 **SEC. 206. PERFORMANCE MEASURES.**

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

17 (1) in paragraph (2), by striking “optional serv-
18 ices as described in section 202” and inserting “ad-
19 ditional services as described in section
20 205(a)(3)(B)”;

21 (2) in paragraph (3), by striking “section
22 205(3)” and inserting “section 204”;

23 (3) in paragraph (5), by striking “used the
24 services of” and inserting “participated in”;

1 (4) in paragraph (6), by striking “community
2 level” and inserting “local level”;

3 (5) in paragraph (7), by striking “; and” and
4 inserting a semicolon;

5 (6) by redesignating paragraph (8) as para-
6 graph (9);

7 (7) by inserting after paragraph (7) the fol-
8 lowing:

9 “(8) shall describe the percentage of total fund-
10 ing provided to the State under section 203 that
11 supports evidence-based and evidence-informed com-
12 munity-based and prevention-focused programs and
13 activities designed to strengthen and support fami-
14 lies to prevent child abuse and neglect; and”;

15 (8) in paragraph (9), as so redesignated, by
16 striking “continued leadership” and inserting
17 “meaningful involvement”.

18 **SEC. 207. DEFINITIONS.**

19 Section 208(2) of the Child Abuse Prevention and
20 Treatment Act (42 U.S.C. 5116h(2)) is amended—

21 (1) in the paragraph heading, by inserting “DE-
22 SIGNED TO STRENGTHEN AND SUPPORT FAMILIES”
23 after “ACTIVITIES”;

24 (2) by striking “respite care programs” and in-
25 serting “respite care services”;

1 (3) by inserting “for parents and children”
2 after “mutual support programs”; and
3 (4) by striking “or respond to”.

4 **SEC. 208. AUTHORIZATION OF APPROPRIATIONS.**

5 Section 209 of the Child Abuse Prevention and
6 Treatment Act (42 U.S.C. 5116i) is amended to read as
7 follows:

8 **“SEC. 209. AUTHORIZATION OF APPROPRIATIONS.**

9 “There are authorized to be appropriated to carry out
10 this title such sums as may be necessary for each of fiscal
11 years 2021 through 2026.”.

12 **TITLE III—MISCELLANEOUS**
13 **PROVISIONS**

14 **SEC. 301. TECHNICAL AMENDMENTS.**

15 The Child Abuse Prevention and Treatment Act (42
16 U.S.C. 5101 et seq.) is amended—

17 (1) in section 3, by amending paragraph (5) to
18 read as follows:

19 “(5) the terms ‘Indian’, ‘Indian Tribe’, and
20 ‘Tribal organization’ have the meanings given the
21 terms ‘Indian’, ‘Indian tribe’, and ‘tribal organiza-
22 tion’, respectively, in section 4 of the Indian Self-De-
23 termination and Education Assistance Act (25
24 U.S.C. 450b);”;

1 (2) by striking “tribe” each place such term ap-
2 pays (other than section 3(5)) and inserting
3 “Tribe”; and

4 (3) by striking “tribal” each place such term
5 appears (other than section 3(5)) and inserting
6 “Tribal”.

○